

Cambodia

GENERAL INFORMATION

Cambodia is a country with an approximate area of 181 thousand square kilometers (UNO, 2008). The population is 15,053,112 and the sex ratio (men per hundred women) is 96 (UNO, 2009). The proportion of the population under the age of 18 years is 43% and the proportion above age 60 is 4% (UNO, 2009). The literacy rate is 89% for men and 86% for women (UN Statistics, 2008). The life expectancy at birth is 60 years for males and 63 years for females (UNO, 2005-2010). The healthy life expectancy at birth is 51 years for males and 63 years for females (UNPD, 2010). The country is in the Low income group (based on 2010 World Bank criteria). The total expenditure on health as a percentage of gross domestic product is 5.92% and the per capita government expenditure on health (PPP int. \$) is \$25.0 (WHO, 2006). Suicide rate information is not available. In Cambodia, neuropsychiatric disorders are estimated to contribute to 9.% of the global burden of disease (WHO, 2008).

GOVERNANCE

An officially approved mental health policy exists and was approved or most recently revised in 2010. Mental health is specifically mentioned in the general health policy.

A mental health plan exists and was approved or most recently revised in 2010. The mental health plan components include:

- Timelines for the implementation of the mental health plan.
- Integration of mental health services into primary care.

Dedicated mental health legislation does not exist. Legal provisions concerning mental health are not covered in other laws (e.g., welfare, disability, general health legislation etc.).

FINANCING

Mental health expenditures by the government health department/ministry are not available, nor are expenditures on mental hospitals.

MENTAL HEALTH CARE DELIVERY

Primary Care

Prescription regulations authorize primary health care doctors to prescribe and/or to continue prescription of psychotherapeutic medicines but with restrictions. The department of health authorize primary health care nurses to prescribe and/or to continue prescription of psychotherapeutic medicines, but with restrictions. Likewise, official policy does not permit primary health care nurses to independently diagnose and treat mental disorders within the primary care system.

The majority of primary health care doctors have not received official in-service training on mental health within the last five years. The majority of primary health care nurses have not received official in-service training on mental health within the last five years. Officially approved manuals on the management and treatment of mental disorders are not available in the majority of primary health care clinics. Official

Data collected in 2011

UN = information unavailable, NA = item not applicable

referral procedures for referring persons from primary care to secondary/tertiary care do not exist, nor do referral procedures from tertiary/secondary care to primary care.

Mental Health Services

Availability of mental health facilities

	Total number of facilities/beds	Rate per 100,000 population	Number of facilities/beds reserved for children and adolescents only	Rate per 100,000 population
Mental health outpatient facilities	63	0.42	UN	UN
Day treatment facilities	2	0.01	1	0.01
Psychiatric beds in general hospitals	15	0.1	0	0.0
Community residential facilities	0	0.0	NA	NA
Beds/places in community residential facilities	0	0.0	NA	NA
Mental hospitals	0	0.0	NA	NA
Beds in mental hospitals	0	0.0	NA	NA

Access to care

	Rates per 100,000 population)	Females (%)	Under age 18 (%)
Persons treated in mental health outpatient facilities	66.43	UN	UN
Persons treated in mental health day treatment facilities	UN	UN	UN
Admissions to psychiatric beds in general hospitals	1.33	50%	UN
Persons staying in community residential facilities at the end of the year	NA	NA	NA
Admissions to mental hospitals	NA	NA	NA

Long term care in mental hospitals (% of persons staying):

Less than 1 year	NA
More than 1 and less than 5 years	NA
More than 5 years	NA

Data collected in 2011

UN = information unavailable, NA = item not applicable

HUMAN RESOURCES

Workforce and training

	Health professionals working in the mental health sector Rate per 100,000	Training of health professions in educational institutions Rate per 100,000
Psychiatrists	0.23	UN
Medical doctors, not specialized in psychiatry	0.40	UN
Nurses	0.80	0.53
Psychologists	UN	UN
Social workers	UN	UN
Occupational therapists	UN	UN
Other health workers	UN	NA

Informal human resources (Family and User Associations)

	User	Family
Present in the country?	No	No
Number of members	NA	NA
Participation in the formulation/implementation of policy/plan/legislation?	NA	NA

MEDICINES

Expenditures for medicines for mental and behavioral disorders at country level

Type of Medicines	Expenditures at country level per year and per 100,000 population (in USD)
All the psychotherapeutic medicines ¹	UN
Medicines used for bipolar disorders ²	UN
Medicines for psychotic disorders ³	UN
Medicines used for general anxiety ⁴	UN
Medicines used for mood disorders ⁵	UN

Data collected in 2011

UN = information unavailable, NA = item not applicable

N03AG01, N05A, N05B, N05C, N06A
 N03AG01, N05A, N05B, N05C, N06A
 N05A (excluding N05AN)

⁴ N05B & N05C

INFORMATION SYSTEMS

	Data on number of people/ activities are collected and reported	Data on age and gender are collected and reported	Data on patient's diagnosis are collected and reported
Persons with mental disorders treated in primary	No	No	No
health care			
Interventions (psychopharmacological and psychosocial) delivered in primary health care for people with mental disorders	No	No	No
Persons treated in mental health outpatient facilities	No	No	No
Contacts in mental health outpatient facilities	No	No	No
Persons treated in mental health day treatment facilities	No	No	No
Admissions in general hospitals with psychiatric beds	No	No	No
Admissions in mental hospitals	NA	NA	NA
Days spent in mental hospitals	NA	NA	NA
Admissions in community residential facilities	NA	NA	NA

Note: no mental health data have been compiled in a report for policy, planning or management purposes in the last three years

OTHER INFORMATION

Due to limited budget and human resources in mental health, most mental health services are dealing with biological aspects.

Data collected in 2011

⁵ N06A

