

Mental Health Sector Severely Underfunded

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The mental health sector faces a severe lack of funding that could ultimately undermine Cambodia's development and the government's own health care goals, concludes a new report by the human rights law center at Fordham University in New York.

In a comprehensive study of Cambodia's mental care sector released this week, researchers from Fordham's Leitner Center for International Law and Justice paint a picture of an overburdened mental health care system struggling to treat patients who are routinely stigmatized and ignored.

"[M]ental health can have a wide-ranging impact on meeting Cambodia's Millennium Development Goals, including decreasing extreme poverty, reducing child mortality, and improving maternal health, among others. Further, the failure to adequately address Cambodians' mental health needs can have significant adverse consequences for the population's overall health," the report notes.

Compounding the problem is that Cambodians are at particularly high risk for mental illness due to a number of factors, including the trauma of the Pol Pot regime, as well as modern day poverty and high rates of violence against women.

According to a Cambodian health official quoted in the report, just \$30,000 per year is budgeted to mental health care,

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out of a total health care budget of \$150 million. The report involved a year of research and draws on interviews with more than 150 doctors, patients, health experts and officials.

All of this leaves the country in a grim situation. The paltry budget allocated for mental health means that doctors are severely overburdened by the number of patients they must treat, medication is outdated, and facilities are frequently repurposed as holding facilities for the mentally disabled.

There are two short-term inpatient psychiatric units, leaving the country with just 14 hospital beds for the mentally ill—the lowest ratio in the region.

And in a country with a population of nearly 15 million people, there are about 40 psychiatrists and an equal number of psychiatric nurses.

In interview after interview, mental health professionals described overwhelming caseloads to the report's authors. Those working in government facilities reported seeing 30 to 40 patients a day.

"During morning visits by the [report's authors], the mental health wing of the Khmer-Soviet Friendship Hospital, the country's largest mental health facility, was routinely filled with hundreds of waiting patients," the report said.

Ultimately, the burden of treat-

ment is passed along to patients, who are often not informed of their diagnosis or the names of the drugs they are given. Medicines are frequently in short supply, and doctors tend to prescribe only the older generation of psychiatric pharmaceuticals, even though they are less effective, because they are cheaper.

"Deprived of resources, Cambodia's mental health services remain dwarfed by the scope of the population's mental health needs, which overwhelmingly go unaddressed and unmet," notes the report. "Cambodia is falling short of its right to health obligations, even taking into account its limited resources."

The effects of those limited resources ultimately have an effect on economic productivity.

"Interviewees reported that Cambodia's own economic development was being hindered by the population's poor mental health. Indeed, 'especially in the villages,' reported one mental health professional, '[t]here is no progress because of depression,'" the report states.

While the researchers offer praise for comprehensive legislation and policies in place, they urge far greater commitment to mental health, recommending the government and its donors to prioritize the sector, increase funding, and extend services to rural areas.

The World Health Organization has estimated that every \$1 spent on mental health care can recoup between \$6 and \$7 worth of lost

productivity.

Psychiatrists echoed many of the report's findings yesterday, but stressed that the mental health sector had made enormous strides in recent years.

"[Mental health] service has been established, though it is not yet big enough. There is a national health system. Most provincial hospitals have psychiatric units, though whether they are large or small depends on the place," said Sothara Muny a psychiatrist and technical adviser at the Transcultural Psychosocial Organization, a mental health NGO.

But despite these improvements, continued Dr. Muny, the needs of most of the country's mentally ill continue to go unmet.

"The needs of patients and the availability of professionals is not proportionate yet. It's overburdened as well for professionals," said Dr. Muny, who also works as a professor of psychiatry.

"There are still a lot of cases where they can not get access to the hospitals because they do not know or understand well or they face transportation problems."

"I can say it has not yet been enough, but compared to before, it has changed in the last 10 years," he said. "Stigma is also a big problem, [as well as] people's access to psychiatrists, but it will change over time."

(Additional reporting by Kuch Naren)