



Public Health and the Rights to Health



SUMMARY OF KEY ISSUES FROM PREVIOUS UPR CYCLES

In last UPR submission, the RGC has not fully implemented recommendations linked to public health, although some milestones have been achieved, in particular in regard to strengthening the social protection for all Cambodian workers. Many key concerns and issues regarding to public health still exist and need urgent solutions. Those key issues are: universal access to health care and medicine; universal and comprehensive national social security; and achieving comprehensive health education.

NATIONAL FRAMEWORK

Article 72 of the Constitution of Kingdom of Cambodia states clearly the human rights to healthcare: *“The health of the people shall be guaranteed. The State shall give full consideration to disease prevention and medical treatment. Poor citizens shall receive free medical consultation in public hospitals, infirmaries and maternities”*. Beside this, the Global Health Declaration in 1998 also clearly states about the commitment to achieve significant goal on a new global health policy *“Health for all in the 21st century”*.

Though human rights to free healthcare services for the poor are stated in above mentioned laws, the spending on healthcare per capita is still high. Base on Health Financing Profile (May 2016), per capita out-of-pocket spending on healthcare in 2014 is accounted 63%, while government expenditure is around 18.5%. Privatization in public health becomes main barrier for citizens especially the poor in access to adequate and free healthcare and treatment. Furthermore, the current legal framework and the percentage of the national budget allocation remain too limited to meet all citizens’ basic needs in terms of public health. As stated in 2016-2020 Health Strategic Plan, there is an expectation of budget gap of USD 1,104 million for healthcare. This needs an increase in percentage of the national budget allocated by the State with the support of development partners to fill in this gap, and numbers of urgent solutions to address to the needs of people in order to ensure fundamental human rights to health.

CHALLENGES	IMPACT
Privatization in public healthcare, and access to free healthcare with quality and equity	Privatization in health services including the adoption and promotion of private sector’s role in providing services, Public-Private-Partnership, and especially the implementation of user-fee at public health facilities become main barriers to access to free and quality healthcare and services for people particularly the poor, and those, approximately 71% of Cambodian population, who are living just above poverty line.
Budget gap in health expenditure	The current percentage of the national budget allocation remains too limited to meet all citizens’ basic needs in terms of public health. In 2016-2020, there is an expectation of budget gap of USD 1,104 million for healthcare. This needs an increase in percentage of the national budget allocation by the State with the support of development partners to fill in this gap especially the expansion and increasing budget for Health Equity Fund for the poor, and paying the cost for treatment including free and/or affordable medicine to patients including the poor and those who live just above poverty line.
Lack of access to safe abortion	Despite relatively progressive legislation on abortion, which was passed in 1997, lack of access to safe abortion remains a challenge in Cambodia, infringing on women reproductive health and rights. When they do access it, women have abortions because of ill health, pre-marital pregnancy, short birth interval, competing family responsibilities, and poverty. However, as in many developing countries, there is limited data on abortion in Cambodia. Although abortion is accessed by older women, the high adolescent fertility rate (12%) remains a key issue, impacting unsafe abortion rates as a result of the conditions placed on access to abortion for young people.



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Social Protection with contributory scheme, and the exclusion for the poor and those who just live above poverty line

Having National Social Protection Policy Framework, adoption, and implementation of Social Security schemes can address to somewhat of needs of people. However, it still lacks of a comprehensive measure, programs, and mechanism to ensure that the poor and those who live just above poverty line will access to free and/or affordable basic social services, and social security such as pension, and necessary support/ subsidies to elders, disabilities, poor women and children. Informal sector, irregular income groups, and those who have income just above poverty line are still excluded from the scheme, though having some access to social assistance.

Pre-payment or contributory scheme, though it is a compulsory obligation of employers and owners of enterprise/establishment, in the long-term, makes more burdens on citizens in addition to tax.

Intellectual Property Right in Medicine

Intellectual Property Rights gives tremendous risk to access to affordable medicine which will be also impeding a universal access to treatment for all Cambodian. The law on Compulsory Licensing for Public Health was passed on 18 April 2018 with the aims to enhance the right to access to pharmaceutical products. However, the law is not yet widely explained and disseminated among implementers and citizen.

Furthermore, the fast integration by government in various free-trade agreement that imposing Trade Related Intellectual Property Rights (TRIPS) and TRIPS-plus especially recent Regional Comprehensive Economic Partnership and other bilateral trade agreements may pose limitation to the use of Compulsory Licensing Law, and thus pose huge threat on access to essential and life-prolonging medicine for communicable and non-communicable disease including HIV/AIDS, TB, Malaria, Diabetes, Cancer, Blood Pressure, Hepatitis C, Anti-biotic.

RECOMMENDATIONS

- 1. Ensure and extend free healthcare and treatment services for patients with communicable and non-communicable diseases including patients with HIV/AIDS, Hepatitis C, Blood Pressure, Diabetes, TB, Malaria, Cancer, and Anti-microbial Resistant, and access to medicine which are free from Intellectual Property Rights protection by 2022.**
- 2. Increase the percentage of the national budget allocation to healthcare and medicine to effectively meet the current needs (for the poor and those who live just above poverty line) by 2020.**
- 3. Ensure the implementation of the law on abortion while addressing the barriers that prevent adequate implementation including increased awareness particularly amongst the marginalized, service provision and adequate information provision including stronger referral systems and ensuring the right to contraception information and services for all women, including young women, by 2022.**
- 4. Ensure that the existing National Policy on Social Protection is based on Universal Declaration of Human Rights and Fundamental of Human Rights in Access to basic needs and basic social services by implementing the schemes to ensure free access to basic social services for all, via a fair, accountable, and transparent tax-based financing.**
- 5. Enlarge the implementation of the pension scheme in support to all Cambodian, in particular, people with disabilities, elders, LGBTIQ individuals, women and children by 2022.**
- 6. Ensure free access to health education as well as facilities for all Cambodian citizens in line with the National Health Strategic Plan 2016-2020 and with SDG 3, including the enhanced cooperation with neighboring countries and development partners by 2023.**