

# WHO SPECIAL INITIATIVE FOR MENTAL HEALTH



## CAMBODIA

Population: 17 million with 59% living in rural areas

Life expectancy: 77 years, infant mortality is 12 per 1000 live births, maternal mortality is 154 per 100 000 live births, non-communicable diseases account for 64% of all deaths

Gender-based violence affects 21% of women with intimate partners

Heavy episodic alcohol consumption affects 24.5% of the adult population ages 18 to 69 years (and almost 50% of men)

Mental health workers: Approximately 1.6 per 100,000 population

Percentage of people with depression receiving treatment: 1.7% (in 2022)

## STRENGTHS

- The Mental Health Strategic Plan (2023-2032), emphasizes integration of mental health into primary and general healthcare, universal health coverage for mental health services and increasing availability and accessibility to quality care.
- Initiatives include health and mental health workforce training and community engagement
- Active NGOs and professional organizations delivering psychological interventions
- Pre-service and in-service training programs exist
- Education sector is actively engaged in strengthening school-based mental health

## CHALLENGES

- Limited accessibility and availability of mental health services, contributing to a treatment gap particularly among the rural population
- Limited routine data collection and analysis due to the absence of a comprehensive mental health surveillance system
- Limited human resources for mental health
- Stigma remains a barrier to care

## Cambodia's Design Process

1

A multi-stakeholder situational analysis of Cambodia's mental health system was conducted in June–July 2025 to identify gaps and opportunities across services, workforce, information systems and community contexts.

2

Findings of the situational analysis were reviewed against the Mental Health Strategic Plan 2023–2032 (MHSP) to define SIMH priorities across key areas including governance, workforce, primary care integration, community-based care and digital mental health.

3

A design workshop in August 2025 brought together representatives from key ministries, provincial and district authorities, NGOs, professional institutions, community groups, people with lived experience, UN agencies and development partners to co-develop the SIMH action plan.

4

Technical working groups developed and refined outcome–output–activity matrices and indicators, forming the SIMH logframe.

5

The consolidated SIMH logframe was endorsed in January 2026 as a practical roadmap to accelerate MHSP implementation and expand access to quality, affordable mental health care in Cambodia.

# Cambodia's Logical Framework for Planned Work under the WHO Special Initiative for Mental Health

## OUTCOMES AND OUTPUTS

## INDICATORS

1

### Strengthen mental health governance and coordination

- Inclusion of mental health in relevant national strategies, plans and policies
- National multisectoral coordination with provincial health departments
- Mapping of human resources, mental health services and referral pathways between services
- Review of implementation guidelines for the Minimum Package of Activities in primary care
- Standard operating procedures for referrals and care pathways for mental health

- # national strategies, plans and policies including mental health indicators
- # National Multisectoral Working Group coordination meetings and provincial operational plans integrating mental health services
- Mapping tool for mental health services, available human resources and an SOP for referral pathways between sectors and services
- Development of implementation guidelines of the Minimum Package of Activities including evidence-based mental health interventions
- Development of SOP for referral and care pathway(s) for mental health services

2

### Strengthen mental health information systems

- Framework for routine mental health indicators within the national health information management system
- SOP for mental health surveillance system covering public and private providers

- Integration of mental health indicators into NCD patient tracking system
- Mental health included in DHIS-2 output
- Proof of concept for mental health surveillance system tested in select provinces

3

### Improve financing and social protection for mental health

- Investment case for mental health in primary care
- Advocacy/policy briefs encouraging resource allocation for mental health
- Advocate for inclusion of mental health in the Health Equity Fund coverage

- Published economic investment case for mental health (in primary care)
- # advocacy/policy briefs on investment in mental health and social protection presented to the Ministry of Health
- # strategic meetings by the Ministry of Health to increase investment in mental health services
- # evidence-based treatments for mental, neurological and substance-use disorders covered by the Health Equity Fund

4

### Enhance protection, dignity and rights of people with mental health conditions

- Mental health stakeholder advisory group including people with lived experience established
- Adaptation and implementation of WHO Quality Rights Training on Mental Health

- # mental health stakeholder advisory group meetings
- Quality Rights translated and adapted to Cambodia
- % facilities shifting from inpatient to outpatient care
- % of mental health professionals trained in Quality Rights

## OUTCOMES AND OUTPUTS

## INDICATORS

5

### Increase availability and accessibility of mental health services in primary care

- Establishment of multidisciplinary trainers and supervisors for Clinical Practice Guidelines for the Management of Mental Disorders
- Expand training on mhGAP/MPA implementation guidelines and psychological interventions to non-mental health providers
- Establishment and implementation of mhGAP/MPA implementation guidelines and psychological intervention supervision system
- Develop mental health training curriculum for lay non-healthcare workers in the community

- # of trainers and supervisors in Clinical Practice Guidelines for the Management of Mental Disorders and % of primary care providers trained and % providers achieving desired competency level
- # providers trained in mhGAP/MPA or psychological interventions and % providers achieving desired competency level
- # non-specialist providers receiving supervision following mhGAP/MPA or psychological intervention training and # supervision sessions per provider
- # of additional people for whom mental health services are available
- # new registered cases in mental health services
- # and types of audiences trained in basic mental health awareness and referral support
- # referrals made by non-healthcare workers

6

### Strengthen mental health service provision capacity of generalist, specialist and allied health workers

- Develop in-service curricula and competency frameworks
- Develop pre-service curricula and competency frameworks

- Establishment of in-service curricula and competency frameworks for each relevant profession
- # of pre-service curricula and competency frameworks established by profession