

# Health

Over the past two decades, an increasing number of low-income and middle-income countries, such as Brazil, India, Mexico, Rwanda, South Africa, and Thailand, have started implementing programs to provide Universal Healthcare (Fried et al., 2013). Countries have different approaches to finance their healthcare system. Regardless, the common means to increase government public expenditure on the healthcare sector. As depicted by the World Bank's data from 2010 to 2016, countries in Southeast Asia have raised public government expenditure in recent years. Cambodia, Lao, and Myanmar, however, remain at the bottom with domestic general government health expenditure below 1.5 percent of GDP.

## Envisioned Outcomes

- 1 Cambodia has achieved a Universal Healthcare model.
- 2 The government have obtained effective funding management mechanisms for both public expenditure and international donor funding around the kingdom's healthcare sector.
- 3 The and MoH have focused on improving both supply and demand side issues. On the supply side, they have increased the number of well-trained and professional nurses and health specialists to provide good care to patients. On the demand side, medical education programs and health literacy have been prioritised nationally.

#Cambodia2040

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