The Royal Government of Cambodia (RGC) ensures that the Cambodian population receive quality, safe, effective and equitable health care for their physical and mental health. The Ministry of Health (MoH) has put two important strategies: 1) expand and strengthen quality health services throughout the countries especially to reach rural remote and ethnic minorities groups, and 2) Increase social protection risk for all populations amongst other important strategies to ensure equal access to health care. Based on its principles: inclusive, equity, transparency, quality and professionalism, RGC has successfully achieved all-important health milestones toward achieving SDGs.

In doing so, the MoH addresses the root causes of the problem including underlying health determinants that prevent the population and vulnerable community from accessing health care. Working with multiple partners including NGOs, civil societies and local authorities, to increase access to health services without discrimination and racism, MoH address any emerging challenges accordingly to assure rights to health of the population is always maintained. Racism and discrimination do not present as barriers for individuals or communities to access health care, the MoH has attained social inclusion to prevent racism and all forms of discrimination in health care delivery due to its strong commitment and strategic actions to achieve universal health coverage:

1. Removing geographical barriers and ensuring a people-centred health care system: Health centres and health posts have been established throughout the country in every geographic terrain such as remote, mountainous areas to provide essential primary health care services to the population regardless of their race, gender, sex, gender identity, religious or political preference, and socio-economic status. In addition, the RGC has increased resource allocation to the health sector, and prioritized investment to improve the quality of health centres, referral hospitals and provincial hospitals, as well as to improve referral links between health centres/health posts with the hospitals to make sure that people in every corner of the country could get access to health care when needed. With improved infrastructure and communication systems, health service delivery has been improved significantly in recent years, especially during the COVID-19 pandemic, health system has maintained its resilience to cope with the pandemic threat and performed routine service delivery for the population. COVID-19 vaccine is provided to all population living in Cambodia regards of nationality, political socioeconomic status and no discrimination.

Furthermore, social-cultural needs, beliefs and barriers of individuals and community have been taken into consideration in all processes of service delivery from policy formulation, action plan, human resources development, resource allocation and service delivery. Vulnerable groups, ethnic minority groups, LGBT, MSMs, and people with disabilities have always been included in all processes of the health policy development until service delivery to make sure that their concerns are taken into consideration and translated into actions. The government has given priority to human resources development to an ethnic minority or remote community to recruit a health workforce from the local community to ensure effective and sustainable health service delivery for local people.

2. Remove financial barriers to access health care, especially for poor households: Essential health services have provided for free-of-charge including, HIV/AIDS, tuberculosis, malaria and childhood immunization and COVID-19 vaccination. The RGC has taken an incremental approach toward universal health coverage by increasing financial risk protection. Population covered by social protection have increased remarkably from 23% in 2015 to 30.5% in 2020¹ excluding those who hold private health insurance. This significant increase reflects the commitment of the RCG to leave no one behind without accessing health care when needed. In

<sup>&</sup>lt;sup>1</sup> Health Sector achievement report 2020, Department of Planning and Health Information, Ministry of Health 2021

2020, 3,333,768<sup>2</sup> population from poor households were covered by the Health Equity Fund (HEF) (70% of the HEF budget is from the RGC and 30% from development partners). Informal sector workers have covered by the HEF scheme solely funded by the RGC. Financial risk protection contributes to equity access to health care, especially among members of poor households, including those from ethnic communities or vulnerable groups.

Although racism and discrimination have not presented as a major obstacle to health service delivery, the RGC collaboratively works with civil societies, local NGOs, Associations and encourages them to work directly with local authorities and community to identify any forms of racism or discrimination and other challenges that prevent people from accessing health care.

During the COVID-19 pandemic, the RGC put significant efforts and commitment to providing health services and social support to those who most needed it, including poor households, migrant workers, and people who were most hit by the pandemic. Testing, treatment and vaccination have been provided free of charge to every population including foreigners. Based on its non-racism and non-discriminatory policy the RGC collaborate with multiple partners including civil societies to fulfil the obligation to ensure the rights to health for every population and continue to reach universal health coverage.

<sup>&</sup>lt;sup>2</sup> Health Sector achievement report 2020, Department of Planning and Health Information, Ministry of Health 2021