

# UW and Cambodia: Partnering For Health

**The Problem:** An estimated 50 Cambodian physicians were alive at the end of the Khmer Rouge's killing fields. Most fled as refugees. The killing fields left behind a tremendous burden of PTSD, with estimates of 14% to 33% among Khmer Rouge survivors, as compared with 0.4% prevalence of PTSD worldwide. Today, almost forty years later, there are just 53 psychiatrists to serve 16 million Cambodians, one of the lowest psychiatrist-to-patient ratios in the world. Cambodian universities struggle to produce well-trained doctors or nurses, and university training for social workers only very recently became available.

**Local Solution:** The University of Washington (UW)/Royal University of Phnom Penh (RUPP) Partnership initiated a project called "Partnering For Health" (PFH) to establish the first Social Work Unit in two Cambodian government hospitals, Calmette and Preah Kossamak Hospitals.

PFH is developing a new multi-disciplinary model of patient care through:

- A collaborative care model that incorporates task shifting and attention to mental health needs and services within primary or specialty care departments
- Use of electronic real-time patient records to support care and a follow-up care system
- Use of brief, empirically supported interventions for depression
- Attention to patient and family education particularly in the care and treatment of chronic conditions and cancer, and
- Effective discharge planning particularly among the growing segment of elderly with no family supports

**The Need:** The UW/RUPP Partnership seeks funding to provide strong evidence to the Ministry of Health and Cambodian government of the need for social workers, particularly in the delivery of a collaborative care model to expand mental health services in a country with an enormous legacy of trauma.

By March 2019, we seek to raise \$17,745 to directly fund social workers, capacity building in supervision, and advocacy towards systemic changes. We seek to raise an additional \$61,160 by September 2019. We are grateful to consider donations of any size. No funds raised are used for UW administrative support.

**An Opportunity:** Supporting PFH provides technical assistance and infrastructure to implement a strong demonstration model that can be replicated throughout the country. The piloted collaborative care model enhances the country's ability to address its enormous mental health needs and illustrates an effective multi-disciplinary approach for patient care. These services are huge in a country faced by intergenerational trauma from war and genocide.

## More about the Local Context:

The Cambodian health care system was non-existent after the genocide of the Khmer Rouge, with few doctors or nurses.

- Cambodians have a significantly higher rate of Type 2 diabetes likely stemming from the period of starvation during the Khmer Rouge and its intergenerational effects;
- Over 30% of patients screened in the national diabetes clinic present with symptoms of major depression;
- Cambodia is an epicenter of drug-resistant malaria not only affecting locals but spreading regionally;
- It is among 30 highest burden countries regarding tuberculosis with some of the highest mortality rates globally;
- Cancer prevalence in Cambodia's seniors will grow by close to 300% – much faster than in other ASEAN countries – over the next two decades; and,
- It has some of the highest mortality from cancer in the region.

At Calmette Hospital, social workers served over 700 patients in less than 4 years, many of whom faced life-altering diagnoses like cancer, diabetes, stroke, TB/pulmonary problems and HIV-related conditions. Physicians and hospital administrators shared the following:

“Some patients doesn't understand what the doctors do—that's why they need a social worker.”

Social workers are seen to have “special skills” or “technique” in talking with patients and able to show sympathy when discussing sensitive issues. In this way, social work skills compliment the skills of medical providers to support patients' many needs related to their health and wellbeing. As one provider stated, “To make good health must have good physical and psychological care.”

With a diverse range of issues to address, social workers are seen as excellent problem solvers. They are called upon when the medical team has “difficult cases” which they feel unable to manage or find adequate solutions for. One provider noted that there are “some problems that only social workers can solve.”

“I think we have to work together... so we can improve the patient care.”

“Social workers are an important part of this team as ‘partners’ in patient care”.

Social work is not recognized by the Cambodian government civil service system, hence is not legislated as a required staffing component in public hospitals or health clinics. Partnering For Health strives to change this.

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Partnership Website <http://socialwork.uw.edu/programs/cambodia-partnership>

Online gifts may be made at <http://tiny.cc/jovp1y>.

\*\* All funds raised by the Partnership are administered through the UW Foundation, which is a federally recognized 501-C3 and are accounted for by the UW fiscal system. 100% of the funds raised contribute to Partnership activities and none go to administrative overhead.