

**Launch of the WHO report  
"Women and health: today's evidence tomorrow's agenda"  
9 November 2009, Geneva, Switzerland**

**Statement by the WHO Cambodia Office in Phnom Penh**

It is an honour for us to participate to the Launch of the Women and Health Report, and to convey to this assembly a "voice from the country".

Women and health in Cambodia is complex and raises multifaceted issues: health system related, determinant of health related, societal and cultural.

**First, some numbers:**

- In the green we have good or well improving averages on LE, TFR, contraceptive prevalence, HIV/AIDS and access to ARVs.
- In the red: among several (traffic injury, violence), one salient statistic is MMR with 472 deaths per 100 000 life births. An estimate which is flat for the past ten years and is one of highest from the region.

**Now in more narrative terms;** I leave you with a quote verbatim from a staff of the Ministry of Health of Cambodia, who was asked to provide a short brief on the situation of women and health in the country:

*"The Women and health situation is serious. **On the demand side** there is: inequity (geographical and socioeconomic), gender issue (low status of women in family and society), knowledge and traditional belief and culture are the problem for the women to access proper health care ... **On the supply side**, there are issues everywhere and in everything: access to health services and coverage of essential interventions are critical, and quality of care for women very problematic: a) Lack of human resources for health especially secondary midwives; b) Lack of necessary skills; c) Often shortage of drugs, medial supplies and equipment; d) Behavior issues, working hour, management..."*

[Unquoted]

Overwhelmed by the amount of things which needed to be said, and as if she had to conclude on one thing, she added that: *in these conditions, it is no surprise that 5 women die every day giving birth, four of them being at home, and for obstetrical reasons which simple interventions – like in many other places in the world - could have been prevented or attended."*

[End of quote]

This is not to confine women and health in the sphere of maternal health. However, priorities are clear here: while there is a government-wide commitment to address determinants of women and health (Ministry of Social Affairs, Ministry of Women Affairs, Ministry of Education, of Information and of Interior) which is very intense and comprehensive (and which I cannot present in detail here), the Minister of Health has launched a **Fast Track Initiative to strengthen health systemic mechanisms** to accelerate achievement on MDG5 along four lines:

- 1) to improve availability of skilled birth attendants through accelerated midwives training programs,
- 2) to remove financial barriers for assisted delivery through health equity funds, cash conditioning transfer, government incentive to midwives for facility-based deliveries,
- 3) to enhance quality of care through Emergency Obstetrical Care,
- 4) and very recently with the precious support of our Regional Director, to improve the count, reporting and auditing of all maternal deaths.

**The policy dialogue around Women and Health** in Cambodia is dense. As I said, it is articulated and affirmed as a commitment from the government of Cambodia at all its levels, even at Prime Minister level, through the recognition FIRST that **"women" are** a driving force for population health in general and SECOND that **"health" is a precondition** for women to exercise their rights and their roles in socioeconomic growth and also to provide a voice for the voiceless of Cambodia.

Our Director-General just asked whether *"gradual improvement"* is the velocity the world is ethically ready to accept for redressing the alarming concerns the Report is highlighting.

The Cambodian leaders, governments and nongovernmental, are definitely on a much Faster Track mode and it is reassuring that Women and Health appears prominently not only on the Planning Documents and budget lines, but also on the ground. Measures are taken that will make women more and more often on the road to seek care, sitting in the waiting room of midwives, and also that they are on the frontline to provide care.

The Minister of Health of Cambodia hand in hand with WHO's Regional Director for Western Pacific are determined to curb maternal mortality, **that one indicator which tells so much about women and health, about gender and health systems.**

The Report of Women and Health provides **the legitimate authority** for *anyone* willing to do more than *"gradually improving"* women and health in Cambodia. It is a precious instrument; it is a guide and a boost for action.

WOMEN  
AND  
HEALTH