Namibia

Total population (UN official estimate): 2,347,984
WHO Region: AFR
Income group: Upper middle-income
Total health expenditure per person (US$, 2013): $423
Availability / status of mental health reporting: Mental health specific data compiled in last two years for public sector only

MENTAL HEALTH SYSTEM GOVERNANCE

Mental health policy
Stand-alone policy or plan for mental health:
(Year of policy / plan): Yes 2005
Implementation status: Available and partially implemented
Policy / plan is in line with human rights covenants
(self-rated 5-point checklist score; 5 = fully in line) 5

Mental health legislation
Stand-alone law for mental health (across provinces):
(Year of policy / plan): Yes 1973
Implementation status: Available and partially implemented

Involvement of service users and families (as reported by MoH focal point)

a. INFORMATION gathered / disseminated by MoH: Partially implemented
b. POLICY on participation developed / published by MoH: Not implemented
c. EARLY INVOLVEMENT in mental health policy and law: Partially implemented
d. PARTICIPATION in MoH planning, policy, service development and evaluation: Partially implemented
e. RESOURCES available for participation and reimbursement: Not implemented

RESOURCES FOR MENTAL HEALTH

Mental health financing
Main source of funds for care of severe mental disorders
Inpatient / outpatient budget breakdown reported
If yes, estimated mental health spending per capita (US$)
(health care costs only, income support and social services excluded)

Human resources for mental health
Total reported staff (mental health inpatient care) 126
Total reported staff (mental health outpatient care) 75
Total mental health workers per 100,000 population 9.2

MENTAL HEALTH SERVICE AVAILABILITY AND UPTAKE

Outpatient care (total facilities)
Mental health outpatient facility 2
Mental health day treatment facility 0

Inpatient care (total facilities)
Mental hospitals 0
Psychiatric units in general hospitals 2
Residential care facilities 0

Mental hospitals
Total number of inpatients Not reported
Admissions that are involuntary Not reported
Discharged inpatients followed up within one month Not reported

Treated prevalence (total cases)
Treated cases of severe mental disorder Not reported

MENTAL HEALTH PROMOTION AND PREVENTION

Existence of at least two functioning programmes Yes (across provinces)
Existence of a suicide prevention strategy Yes

Programme examples

<table>
<thead>
<tr>
<th>Programme examples</th>
<th>Category of programme</th>
<th>Target group</th>
<th>Scope</th>
</tr>
</thead>
<tbody>
<tr>
<td>RADIO TALKS</td>
<td>Mental health awareness/ prevention/ anti-stigma</td>
<td>All ages</td>
<td>Universal</td>
</tr>
<tr>
<td>Videoclips shows in local bank institutions</td>
<td>Mental health awareness/ prevention/ anti-stigma</td>
<td>All ages</td>
<td>Universal</td>
</tr>
</tbody>
</table>

Note: Age-standardised suicide rates - computed using standard categories, definitions and methods - are reported to facilitate comparisons over time and between countries, and may not be the same as official national estimates.

1 UN World Population Prospects, 2013; http://esa.un.org/unpd/wpp/
3 WHO Global Health Expenditure Database; http://apps.who.int/nha/database
4 WHO, 2013: Preventing suicide; a global imperative; http://www.who.int/mental_health/suicide-prevention
5 Risk Analytics, 2011: The Life and Economic Impact of Major Mental Illnesses in Canada; Table 32
6 Mental Health Commission of Canada. Data have been converted to US$ at 2013 exchange rate.
7 Assumption made that, on average, 10% of the 39,392 family doctors’ time spent on mental health work
8 Data represent separations (either discharge or death) occurring in Canada, and not admissions
9 Since recording of admission method is not mandatory in all jurisdictions, significant missing values are present

Mental health Atlas country profile 2014