



Egypt

GENERAL INFORMATION

Egypt is a country with an approximate area of 1001 thousand square kilometers (UNO, 2008). The population is 84,474,427 and the sex ratio (men per hundred women) is 101 (UNO, 2009). The proportion of the population under the age of 18 years is 39% and the proportion above age 60 is 5% (UNO, 2009). The literacy rate is 88% for men and 82% for women (UN Statistics, 2008). The life expectancy at birth is 70 years for males and 74 years for females (UNO, 2005-2010). The healthy life expectancy at birth is 59 years for males and 74 years for females (UNPD, 2010). The country is in the lower middle income group (based on 2010 World Bank criteria). The total expenditure on health as a percentage of gross domestic product is 4.97% and the per capita government expenditure on health (PPP int. \$) is \$132.0 (WHO, 2006). In Egypt, neuropsychiatric disorders are estimated to contribute to 15.1% of the global burden of disease (WHO, 2008).

GOVERNANCE

An officially approved mental health policy exists and was approved, or most recently revised, in 2006. Mental health is also specifically mentioned in the general health policy.

A mental health plan exists and was approved or, most recently revised, in 2008. The mental health plan components include:

- Timelines for the implementation of the mental health plan.
- Shift of services and resources from mental hospitals to community mental health facilities.
- Integration of mental health services into primary care.

Dedicated mental health legislation exists and was initiated, or most recently revised, in 2009. Legal provisions concerning mental health are also covered in other laws (e.g. welfare, disability, general health legislation etc.).

Note: The new mental health law includes the following provisions: 1.) Strict legal criteria specifying the circumstances in which a person can be detained in mental health institutions. 2.) The right of a detained patient to have the lawfulness of detention reviewed by a local court. 3.) The establishment of both national and regional mental health commissions. 4.) A requirement that doctors document and periodically review treatment plans. 5.) A more restrictive definition of circumstances in which solitary confinement and physical restraints can be used. 6.) A bill of rights for patients inside mental health facilities and the obligation of mental health facilities to inform patients of their rights. 7.) The creation of a patients' rights committee in every mental health facility in order to monitor the human rights of people receiving treatment in those institutions. 8.) A range of sanctions for service providers who violate patients' rights. 9.) Monitoring bodies providing an independent review of involuntary admissions.

FINANCING

Mental health expenditures by the government health department/ministry are 2.29% of the total health budget. Mental hospital expenditures are not available.

MENTAL HEALTH CARE DELIVERY

Primary Care

Prescription regulations authorize primary health care doctors to prescribe and/or to continue prescription of psychotherapeutic medicines but with restrictions. In contrast, the department of health does not authorize primary health care nurses to prescribe and/or to continue prescription of psychotherapeutic medicines. Similarly, official policy does not permit primary health care nurses to independently diagnose and treat mental disorders within the primary care system.

The majority of primary health care doctors and nurses have not received official in-service training on mental health within the last five years. Officially approved manuals on the management and treatment of mental disorders are available in the majority of primary health care clinics. Official referral procedures for referring persons from primary care to secondary/tertiary care do not exist. Referral procedures from tertiary/secondary care to primary care also do not exist.

Mental Health Services

Availability of mental health facilities

	Total number of facilities/beds	Rate per 100,000 population	Number of facilities/beds reserved for children and adolescents only	Rate per 100,000 population
Mental health outpatient facilities	96	0.114	UN	UN
Day treatment facilities	2	0.002	UN	UN
Psychiatric beds in general hospitals	399	0.472	UN	UN
Community residential facilities	UN	UN	UN	UN
Beds/places in community residential facilities	UN	UN	UN	UN
Mental hospitals	38	0.045	UN	UN
Beds in mental hospitals	7940	9.399	UN	UN

Access to care

	Rates per 100,000 population)	Females (%)	Under age 18 (%)
Persons treated in mental health outpatient facilities	46.27	23%	29%
Persons treated in mental health day treatment facilities	1.69	30%	UN
Admissions to psychiatric beds in general hospitals	2.36	UN	UN
Persons staying in community	UN	UN	UN

Data collected in 2011

UN = information unavailable, NA = item not applicable

residential facilities at the end of the year			
Admissions to mental hospitals	11.93	19%	UN

Long term care in mental hospitals (% of persons staying):

Less than 1 year	87%
More than 1 and less than 5 years	4%
More than 5 years	9%

Note: Data on service usage are obtained from the National Mental Health information system which collects data from the 17 main psychiatric hospitals in Egypt (which represent 84% of the psychiatric beds/resources available).

HUMAN RESOURCES

Workforce and training

	Health professionals working in the mental health sector Rate per 100,000	Training of health professions in educational institutions Rate per 100,000
Psychiatrists	0.54	UN
Medical doctors, not specialized in psychiatry	0.31	UN
Nurses	2.08	UN
Psychologists	0.13	UN
Social workers	0.23	UN
Occupational therapists	UN	UN
Other health workers	UN	NA

Note: The number of health professionals working in the mental health sector reported above is for those who work at general secretariat of mental health which supervise & monitor the main 17 psychiatric hospital in Egypt which represent 84% of the bed capacity. The total number of psychiatrists is 979, which corresponds to a rate of 1.16 per 100,000 population.

Informal human resources (Family and User Associations)

	User	Family
Present in the country?	No	No
Number of members	NA	NA
Participation in the formulation/implementation of policy/plan/legislation?	NA	NA

Data collected in 2011

UN = information unavailable, NA = item not applicable

MEDICINES

Expenditures for medicines for mental and behavioral disorders at country level

Type of Medicines	Expenditures at country level per year and per 100,000 population (in USD)
All the psychotherapeutic medicines ¹	UN
Medicines used for bipolar disorders ²	UN
Medicines for psychotic disorders ³	UN
Medicines used for general anxiety ⁴	UN
Medicines used for mood disorders ⁵	UN

INFORMATION SYSTEMS

	Data on number of people/ activities are collected and reported	Data on age and gender are collected and reported	Data on patient's diagnosis are collected and reported
Persons with mental disorders treated in primary health care	No	No	No
Interventions (psychopharmacological and psychosocial) delivered in primary health care for people with mental disorders	No	No	No
Persons treated in mental health outpatient facilities	Yes	Yes	Yes
Contacts in mental health outpatient facilities	Yes	Yes	Yes
Persons treated in mental health day treatment facilities	Yes	Yes	No
Admissions in general hospitals with psychiatric beds	Yes	Yes	No
Admissions in mental hospitals	Yes	Yes	Yes
Days spent in mental hospitals	Yes	Yes	Yes
Admissions in community residential facilities	No	No	No

¹ N03AG01, N05A, N05B, N05C, N06A

² N03AG01, N05A, N05B, N05C, N06A

³ N05A (excluding N05AN)

⁴ N05B & N05C

⁵ N06A

Data collected in 2011

UN = information unavailable, NA = item not applicable

Note: A specific report focusing mental health activities has been published by the Health Department or any other responsible government unit in the last three years.

OTHER INFORMATION

The Egyptian Mental Health Information System publishes monthly reports at:
www.mentalhealthegypt.com. These reports are used for service planning, monitoring and evaluation.