



Ireland

GENERAL INFORMATION

Ireland is a country with an approximate area of 70 thousand square kilometers (UNO, 2008). The population is 4,589,002 and the sex ratio (men per hundred women) is 100 (UNO, 2009). The proportion of the population under the age of 18 years is 25% and the proportion above age 60 is 12% (UNO, 2009). The life expectancy at birth is 77 years for males and 82 years for females (UNO, 2005-2010). The healthy life expectancy at birth is 71 years for males and 82 years for females (UNPD, 2010). The country is in the high income group (based on 2010 World Bank criteria). The total expenditure on health as a percentage of gross domestic product is 9.74% and the per capita government expenditure on health (PPP int. \$) is \$2431.0 (WHO, 2006). The suicide rate for males is 17.4 per 100,000 population and for females is 3.8 per 100,000 population. In Ireland, neuropsychiatric disorders are estimated to contribute to 29.6% 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 2009. 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.).

FINANCING

Mental health and mental hospital expenditures by the government health department/ministry 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. Similarly, the department of health authorizes primary health care nurses to prescribe and/or to continue prescription of psychotherapeutic medicines, but with restrictions. However, official policy does not permit primary health care nurses to independently diagnose and treat mental disorders within the primary care system.

Officially approved manuals on the management and treatment of mental disorders are not available in the majority of primary health care clinics. Official referral procedures for referring persons from primary care to secondary/tertiary care exist as do referral procedures from tertiary/secondary to primary care.

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	UN	UN	UN	UN
Day treatment facilities	UN	UN	UN	UN
Psychiatric beds in general hospitals	900	19.61	40	0.87
Community residential facilities	UN	UN	UN	UN
Beds/places in community residential facilities	2800	61.02	UN	UN
Mental hospitals	36	0.78	UN	UN
Beds in mental hospitals	2500	54.48	42	0.92

Access to care

	Rates per 100,000 population)	Females (%)	Under age 18 (%)
Persons treated in mental health outpatient facilities	UN	UN	UN
Persons treated in mental health day treatment facilities	UN	UN	UN
Admissions to psychiatric beds in general hospitals	220.37	48%	2%
Persons staying in community residential facilities at the end of the year	UN	UN	UN
Admissions to mental hospitals	219.7	52%	2%

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

Less than 1 year	58%
More than 1 and less than 5 years	18%
More than 5 years	25%

Data collected in 2011

UN = information unavailable, NA = item not applicable

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	6.06	UN
Medical doctors, not specialized in psychiatry	9.04	10.55
Nurses	112.83	31.07
Psychologists	3.53	UN
Social workers	3.84	UN
Occupational therapists	3.16	UN
Other health workers	72.33	NA

Informal human resources (Family and User Associations)

	User	Family
Present in the country?	Yes	Yes
Number of members	UN	UN
Participation in the formulation/implementation of policy/plan/legislation?	frequently	UN

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

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

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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	No	No	No
Contacts in mental health outpatient facilities	No	No	No
Persons treated in mental health day treatment facilities	No	No	No
Admissions in general hospitals with psychiatric beds	No	No	Yes
Admissions in mental hospitals	No	No	Yes
Days spent in mental hospitals	No	No	Yes
Admissions in community residential facilities	No	No	No

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

1.) The Mental Health Commission (www.mchirl.ie), an independent body, was established in April 2002 under the provisions of the Mental Health Act, 2001. The principal functions of the Commission, as specified in the Mental Health Act, 2001 are to promote, encourage, and foster the establishment and maintenance of high standards and good practices in the delivery of mental health services and to take all reasonable steps to protect the interests of persons detained in general hospital psychiatric units, public and private psychiatric hospitals and child and adolescent units.

The remit of the Commission incorporates the broad spectrum of mental health services including general adult mental health services, mental health services for children and adolescents, the elderly, people with learning disabilities and forensic mental health services.

The Mental Health Commission publishes an annual report which includes the Report of the Inspector of Mental Health Services and is laid before the Irish Houses of Parliament each year.

2.) Ireland also has an Inspector of Mental Health Services, whose functions are the following:

- (a) To visit and inspect every general hospital psychiatric unit, public and private psychiatric hospital and child and adolescent unit at least once in each year.
- (b) Review the mental health services and to furnish a report in writing to the Mental Health Commission on:
 - (i) the quality of care and treatment;
 - (ii) what he or she ascertained pursuant to any inspection;
 - (iii) the degree and extent of compliance with regulations, codes of practice, standards;
 - (iv) such other matters considered appropriate to report on.

Data collected in 2011

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