



Saudi Arabia

GENERAL INFORMATION

Saudi Arabia is a country with an approximate area of 2150 thousand square kilometers (UNO, 2008). The population is 26,245,969 and the sex ratio (men per hundred women) is 124 (UNO, 2009). The proportion of the population under the age of 18 years is 36% and the proportion above age 60 is 3% (UNO, 2009). The literacy rate is 98% for men and 96% for women (UN Statistics, 2008). The life expectancy at birth is 72 years for males and 74 years for females (UNO, 2005-2010). The healthy life expectancy at birth is 61 years for males and 74 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 4.97% and the per capita government expenditure on health (PPP int. \$) is \$554.0 (WHO, 2006). Suicide rate information is not available. In Saudi Arabia, neuropsychiatric disorders are estimated to contribute to 14.% of the global burden of disease (WHO, 2008).

GOVERNANCE

An officially approved mental health policy exists and most recently revised in 2008. Mental health is also specifically mentioned in the general health policy.

A mental health plan exists and was approved, or most recently revised, in 2007. The mental health plan components include:

- Timelines for the implementation of the mental health plan.
- Funding allocation for the implementation of half or more of the items in 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 2006. Legal provisions concerning mental health are also covered in other laws (e.g., welfare, disability, general health legislation etc.).

Note: As of 2010, the Mental Health Act was under review and consideration in the Council of Ministers (Shoura Council).

FINANCING

Mental health expenditures by the government health department/ministry are 3.89% of the total health budget.

Note: Mental health expenditures are not separately allocated.

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

Data collected in 2010.

UN = information unavailable, NA = item not applicable

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 have 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 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.

Note: Psychotherapeutic medicines are not available at the primary health care level.

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	94	0.36	19	0.07
Day treatment facilities	3	0.01	UN	UN
Psychiatric beds in general hospitals	100	0.38	UN	UN
Community residential facilities	2	0.01	0	0.00
Beds/places in community residential facilities	240	0.91	0	0.00
Mental hospitals	20	0.08	0	0.00
Beds in mental hospitals	3000	11.43	0	0.00

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	UN	UN	UN
Persons staying in community residential facilities at the end of the year	UN	UN	UN
Admissions to mental hospitals	76.53	UN	UN

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

Less than 1 year	UN
More than 1 and less than 5 years	UN
More than 5 years	UN

Data collected in 2010.

UN = information unavailable, NA = item not applicable

Note: The involvement of users and Family Associations in planning and developing mental and social health services is under consideration by higher health and political authorities.

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	2.91	0.21
Medical doctors, not specialized in psychiatry	UN	39.97
Nurses	13.41	6.93
Psychologists	1.66	UN
Social workers	2.90	UN
Occupational therapists	UN	UN
Other health workers	UN	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?	never or rarely	never or rarely

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	225,749
Medicines used for bipolar disorders ²	15,240
Medicines for psychotic disorders ³	191,363
Medicines used for general anxiety ⁴	1,715

¹ N03AG01, N05A, N05B, N05C, N06A

² N03AG01, N05A, N05B, N05C, N06A

³ N05A (excluding N05AN)

⁴ N05B & N05C

Data collected in 2010.

UN = information unavailable, NA = item not applicable

Medicines used for mood disorders ⁵	17,622
--	--------

Note: The above values are based on Ministry of Health (MOH) expenditures that represents about 60%±17% of the whole Kingdom's expenditure.

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	No	No	No
Admissions in general hospitals with psychiatric beds	Yes	Yes	Yes
Admissions in mental hospitals	Yes	Yes	Yes
Days spent in mental hospitals	Yes	Yes	Yes
Admissions in community residential facilities	Yes	Yes	Yes

Note: Mental health data (either on the public system, private system or both) have been compiled for general health statistics in the last three years, but not in a specific mental health report

⁵ N06A

Data collected in 2010.

UN = information unavailable, NA = item not applicable