

## ◆ Definitions

- ◆ *Mental health in primary care*: the provision of basic preventive and curative mental health care at the first point of entry into the health care system. Usually this means that care is provided by a non-specialist who can refer complex cases to a more specialized mental health professional.
- ◆ *Training of primary care personnel*: the provision of essential knowledge and skills in identification, prevention and care of mental disorders to primary health care personnel.

## ◆ Salient Findings

- ◆ 87% of countries covering 97% population report having mental health care as an identified activity at the primary health care level.
- ◆ Treatment facilities for severe mental disorders are however present in only 59% of countries accounting for 51% population.
- ◆ The availability of treatment facilities at primary care level for severe mental disorders varies from 44.4% of countries in the South-East Asia Region to more than 65% of countries in the Americas and the European Region.
- ◆ Regular training facilities for primary level mental health personnel are present in 59% of countries.

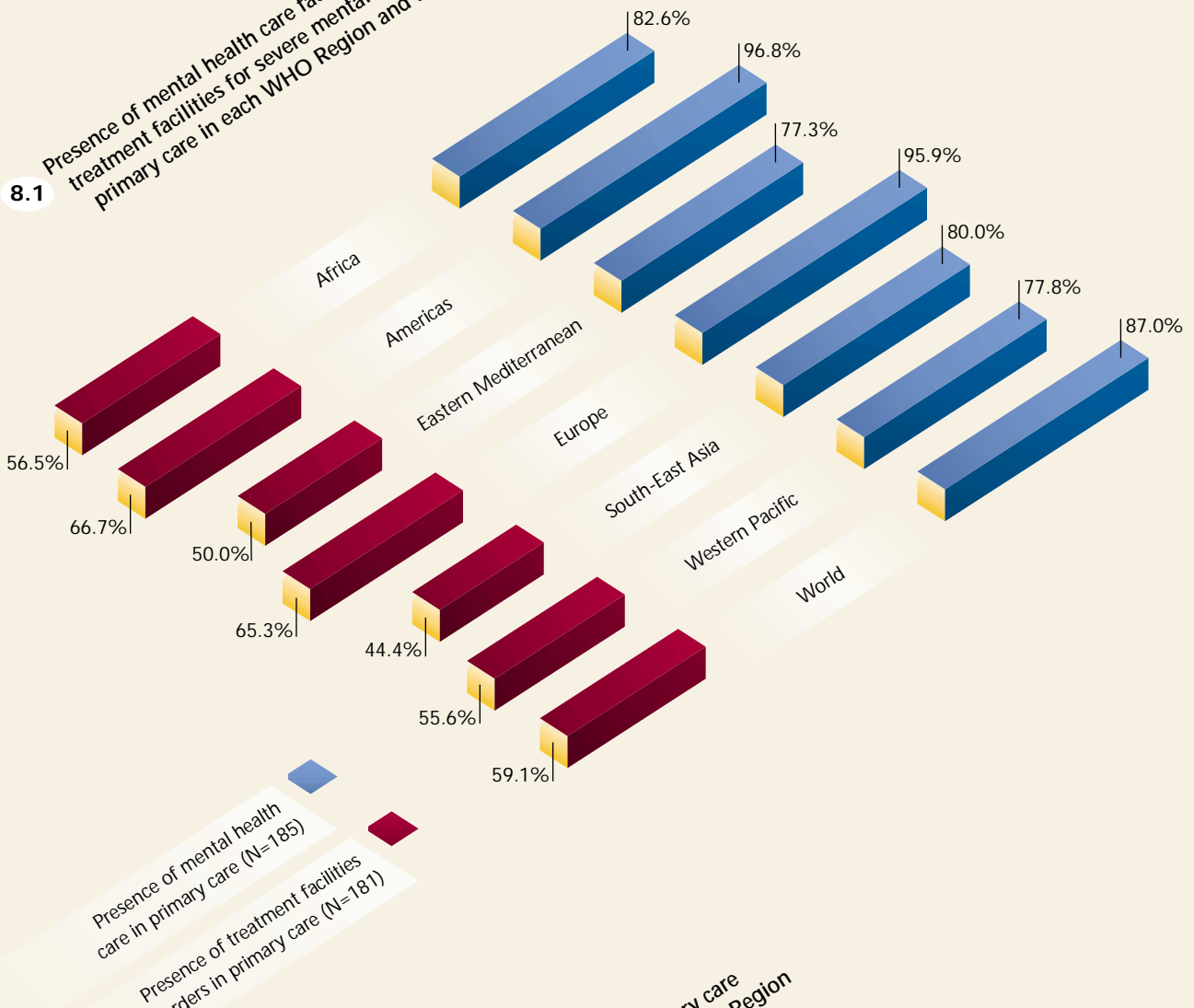
## ◆ Limitations

- ◆ Though a large number of countries have reported mental health to be an identified activity at primary care level, the actual implementation of this at ground level is highly variable. Often the facilities are restricted to specific areas where specific projects are in place and do not extend to the whole country.
- ◆ Training also varies across countries while some have regular and more comprehensive programmes for different types of personnel, others do not. However, the data do not reflect this difference in quality and coverage of training activities.

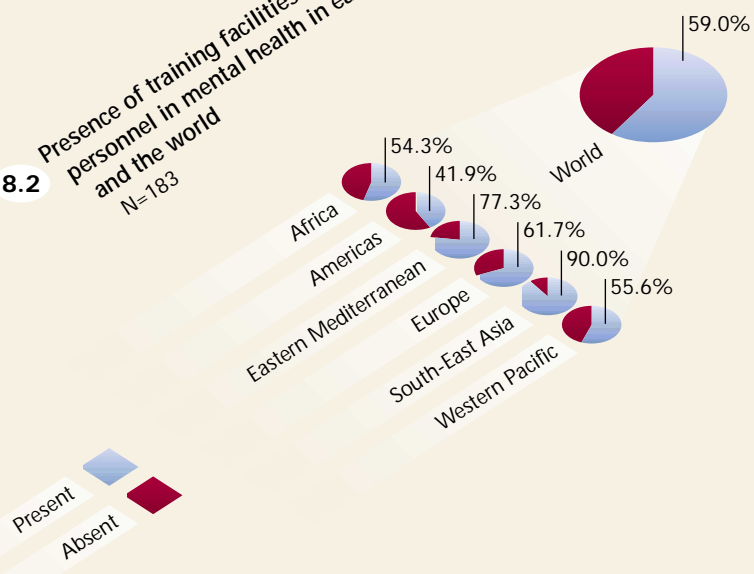
## ◆ Implications

- ◆ Since a significant proportion of patients at the primary health care level have mental disorders, availability of mental health care in these settings is very important.
- ◆ Integration of mental health care into primary care is essential for extending services to underserved areas in both developing and developed countries.
- ◆ Though most countries have identified mental health care as being an activity at primary care level, efforts should now focus on making it available and extending its coverage to larger areas.
- ◆ Treatment facilities for mental disorders at primary health care level should be improved.
- ◆ When adequate training is provided, the identification and treatment rates of common mental disorders in primary health care can be increased substantially.

**8.1** Presence of mental health care facilities and treatment facilities for severe mental disorders in primary care in each WHO Region and the world



**8.2** Presence of training facilities for primary care personnel in mental health in each WHO Region and the world



## ◆ Definitions

- ◆ *Psychiatric bed*: bed maintained for continuous use by patients with mental disorders for 24 hours. These beds

are located in public and private psychiatric hospitals, general hospitals and hospitals for elderly and children.

## ◆ Salient Findings

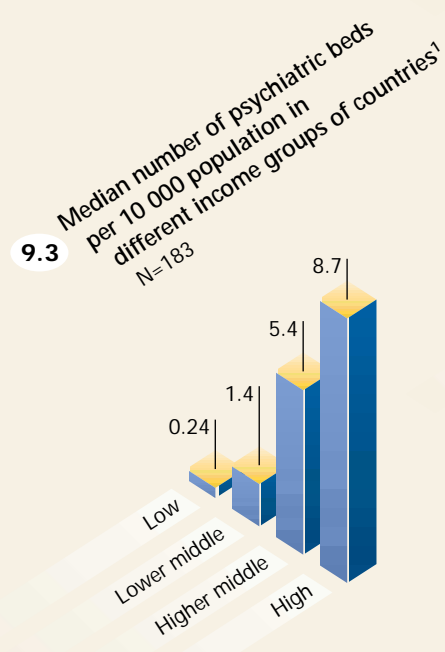
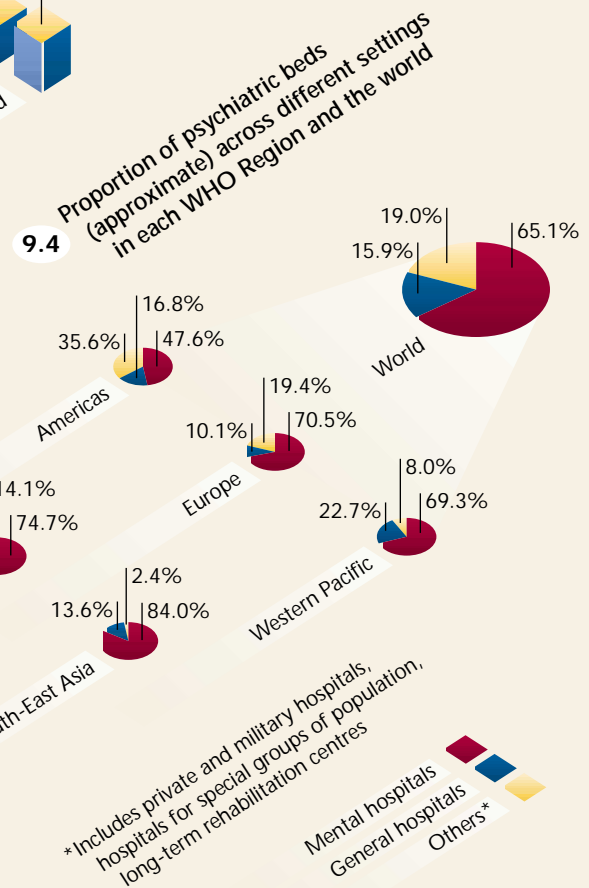
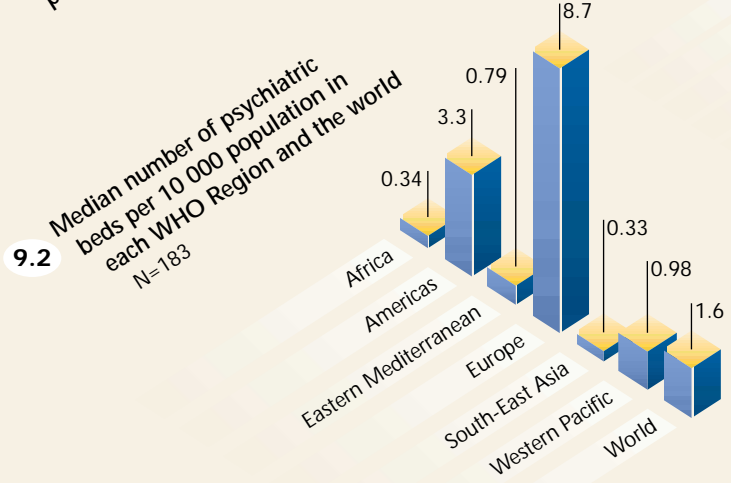
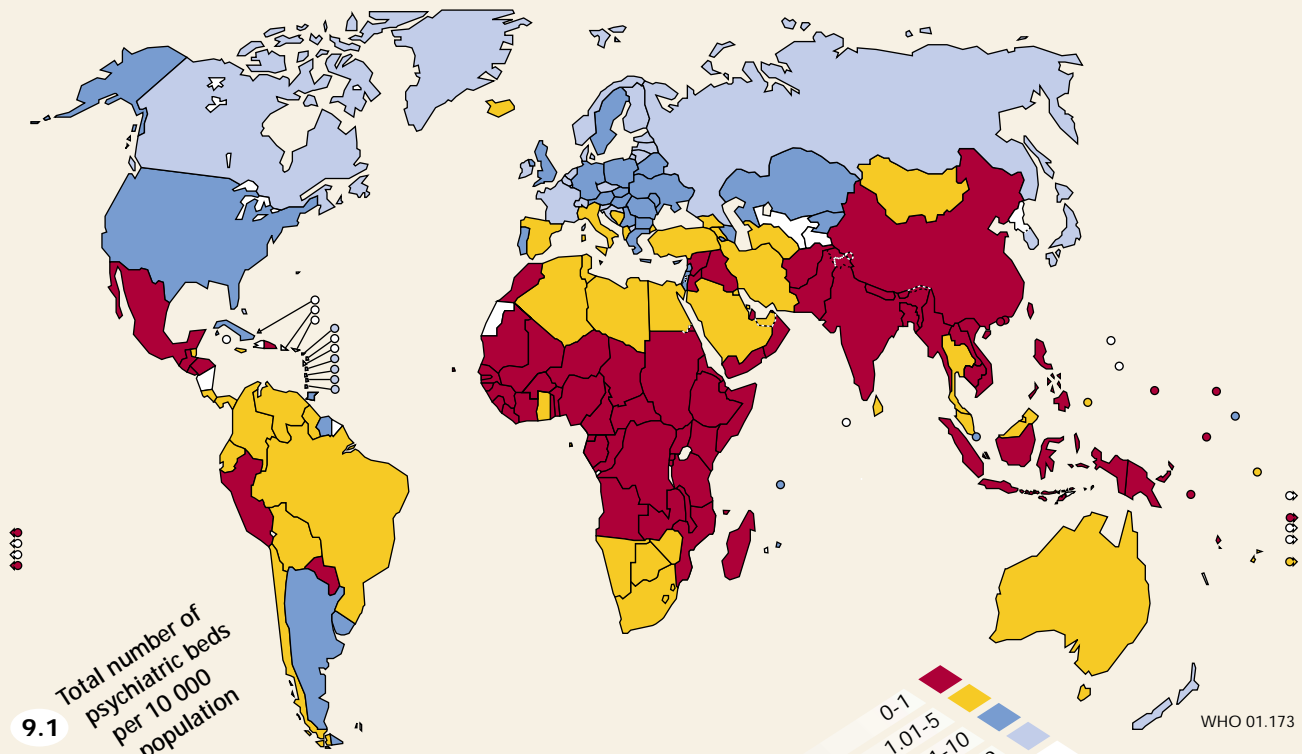
- ◆ The mean number of psychiatric beds in the world per 10 000 population is 4.36 (Standard Deviation (S.D.) 5.47, Median 1.6)
- ◆ There are about 1.85 million psychiatric beds in the world, of which 65% are in mental hospitals.
- ◆ In more than 40% of the countries, covering about 65% of the world's population, individuals have access to less than one psychiatric bed per 10 000 population.
- ◆ The mean number of psychiatric beds varies widely across regions. It is only 0.57 per 10 000 population in the South-East Asia Region compared to 8.93 per 10 000 in the European Region.
- ◆ The median figures per 10 000 population for the Regions are even lower: 0.33 in the South-East Asia Region, 0.34 in the African Region, 0.79 in the Eastern Mediterranean Region, 0.98 in the Western Pacific Region, 3.3 in the Americas and 8.7 in the European Region.
- ◆ In the African Region there are about 41 236 psychiatric beds for 626 million people. There are about 689 642 psychiatric beds for 841 million people in the European Region.
- ◆ The mean and median number of psychiatric beds per 10 000 population across different income group countries also vary. Whereas for the low income countries the mean and median are 1.03 and 0.24, respectively, the numbers for the high income countries are 9.48 and 8.7 respectively.
- ◆ The proportion of psychiatric beds in mental hospitals exceeds the proportion of beds in general hospitals by a wide margin in all the regions. The South-East Asia Region has 84% of psychiatric beds in mental hospitals compared to the Americas, which has 47.6% of beds in mental hospitals.

## ◆ Limitations

- ◆ Some countries were unable to provide an estimate of the number of beds in private hospitals.
- ◆ The category of "other beds", include beds in private hospitals, military hospitals, hospitals for special population and long-term rehabilitation centres.
- ◆ No information was available on beds in chronic care versus acute care.

## ◆ Implications

- ◆ Though mental hospitals with a large number of beds are not desirable, a minimum number of inpatient places are necessary for patients who cannot be treated while staying in the community.
- ◆ Overall, the number of psychiatric beds in developing countries is inadequate. The beds that are available, are most often in mental hospitals. Patients stay in highly unsatisfactory conditions.
- ◆ Inpatient places should be moved from mental hospitals to general hospitals and community rehabilitation services.
- ◆ Considering the paucity of beds in some countries, new inpatient services dedicated solely to management of mental disorders should be established in general hospitals. These new services along with the development of community services will help de-institutionalize mental health services.



<sup>1</sup> See page 41

## ◆ Definitions

- ◆ *Psychiatrist*: a medical doctor who has had at least two years of post-graduate training in psychiatry at a recog-

nized teaching institution. This period may include training in any sub-speciality of psychiatry.

## ◆ Salient Findings

- ◆ The mean number of psychiatrists in the world per 100 000 population is 3.96 (S.D. 5.94, Median 1.0).
- ◆ 52.7% of countries covering 69.2% of the world's population have access to less than one psychiatrist per 100 000 population.
- ◆ All countries in the South-East Asia Region and almost 96% of countries in the African Region accounting for 89% of the population have less than one psychiatrist per 100 000 population.
- ◆ The distribution of psychiatrists across regions is irregular. The median number of psychiatrists per 100 000 popula-

tion varies from 0.05 in the African to 9.0 in the European Region. There are 1195 psychiatrists in the African Region for 626 million people compared to 77 242 psychiatrists for 841 million people in the European Region.

- ◆ The median distribution per 100 000 population is 0.06 in the low income countries and 9.0 in the high income countries.
- ◆ Even among high income countries about 26% have less than 5 psychiatrists per 100 000 population.

## ◆ Limitations

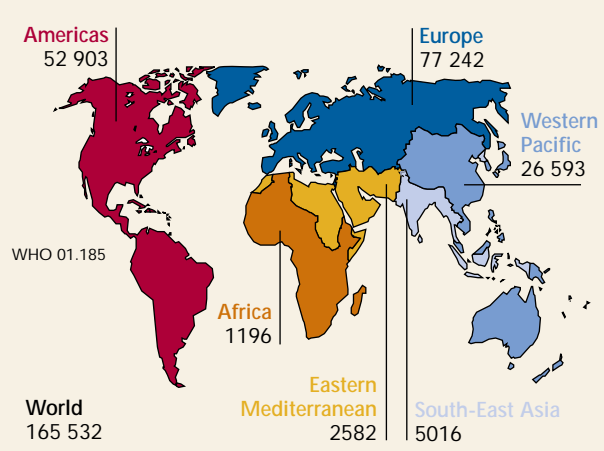
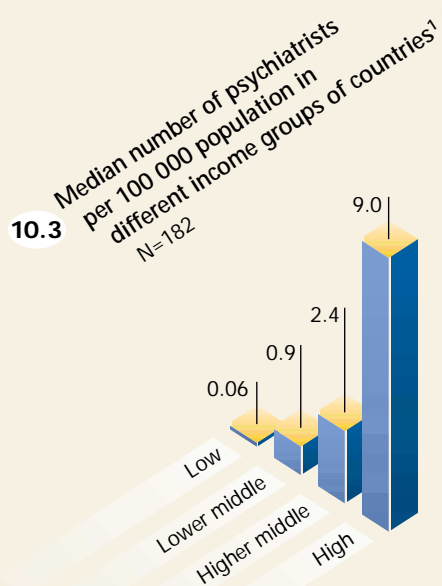
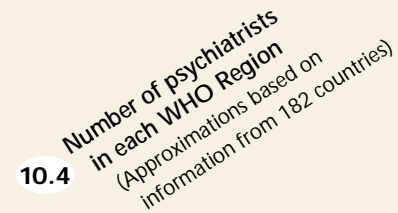
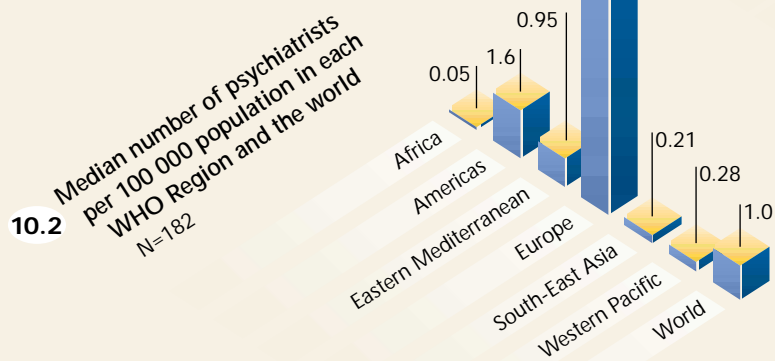
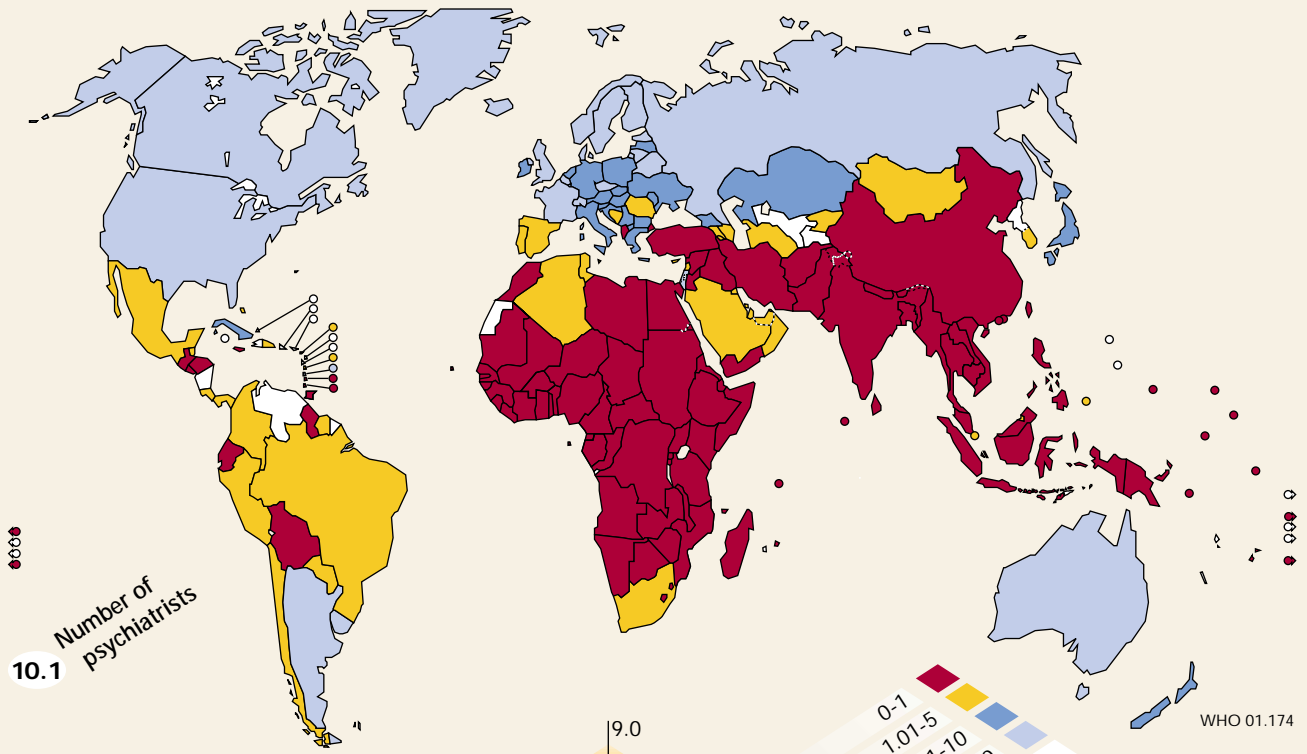
- ◆ Some countries were unable to provide an accurate number of psychiatrists working in the private sector.
- ◆ Since the source of information in some countries was the national association for psychiatrists, it is possible that the psychiatrists who are not members of these associations have not been counted.

- ◆ The distribution of psychiatrists within countries is also very uneven with majority concentrated in urban areas. This distribution creates even more disparity in their availability than is apparent from the average figures.

## ◆ Implications

- ◆ A psychiatrist is an essential member, often the leader, of the mental health care team. Mental health care suffers in the absence of an adequate number of psychiatrists.
- ◆ Psychiatrists are also essential for training and providing support and supervision to primary health providers in mental health care.

- ◆ Overall, the number of psychiatrists is grossly deficient, especially in the developing and low income countries. The lack of psychiatrists in many countries is a result of not only a lack of training facilities but also of the low priority and preference given to this medical specialization.
- ◆ Systematic efforts to train psychiatrists and to retain them within countries are needed for a large number of developing countries.



<sup>1</sup> See page 41

## ◆ Definitions

- ◆ *Psychiatric Nurse*: a graduate from a recognized, university level nursing school with specialization in mental health. Psychiatric nurses are registered at the local nurs-

ing board (or equivalent) and work in a mental health care setting.

## ◆ Salient Findings

- ◆ The mean number of psychiatric nurses per 100 000 population is 12.63 (S.D. 26.58, Median 2.0).
- ◆ About 45.7% of the countries constituting about 43.8% of the world's population, have access to less than one psychiatric nurse per 100 000 population.
- ◆ In the South-East Asia Region almost 95% of the population have access to less than one psychiatric nurse per 100 000 population. In the Eastern Mediterranean Region more than 73% people have access to less than one psychiatric nurse per 100 000 population.
- ◆ The median number of psychiatric nurses in the South-East Asia Region of the WHO is 0.16 per 100 000 population, whereas, in the European Region it is 27.5 per 100 000 population. The distribution of psychiatric nurses across regions is not even. There are about 7955 psychi-

atric nurses for 485 million people in the Eastern Mediterranean Region compared to 285 604 psychiatric nurses for 841 million people in the European Region.

- ◆ The median varies from 0.16 per 100 000 population among the low income countries to 33.5 per 100 000 population among the high income countries.
- ◆ Though more than 93% of the low income countries have less than 10 psychiatric nurses for every 100 000 population, even in high income countries about a third of them have less than 10 psychiatric nurses for 100 000 population.
- ◆ Whereas, there are 3 psychiatric nurses for every psychiatrist in the Americas and the European Region, there are 8 psychiatric nurses for each psychiatrist in the African and South-East Asia Regions.

## ◆ Limitations

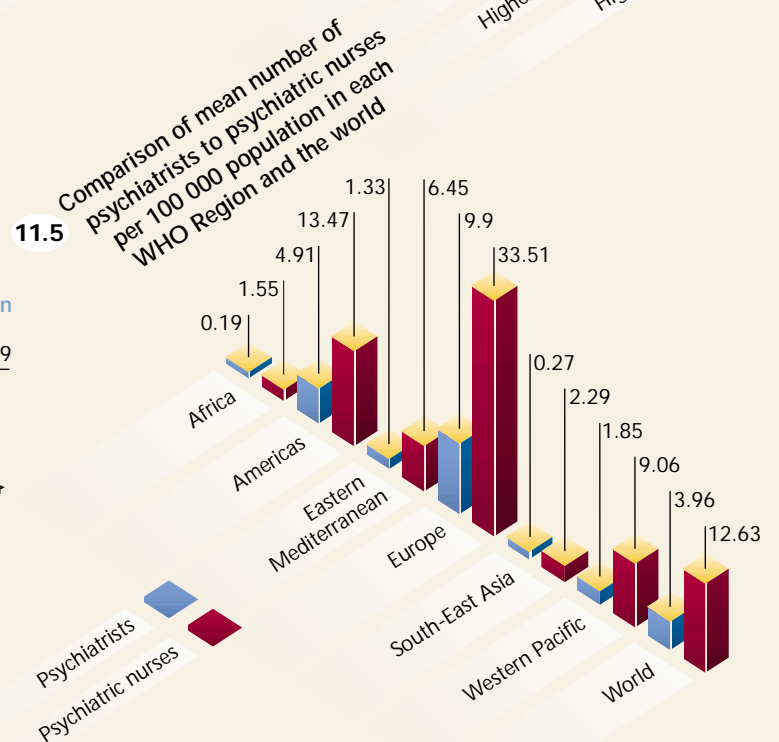
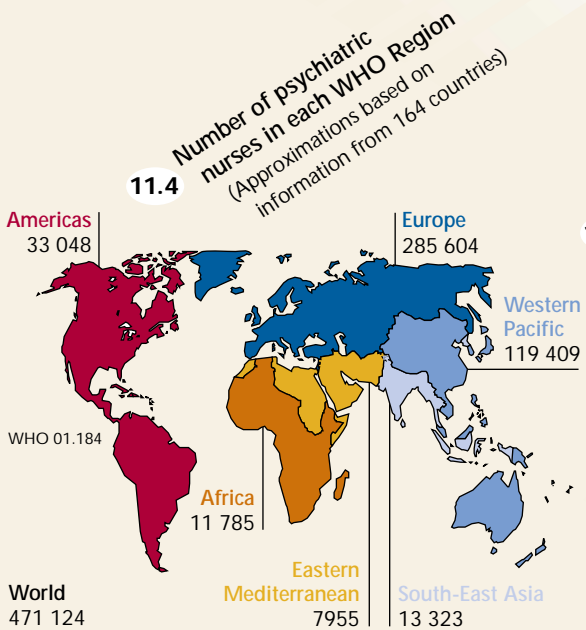
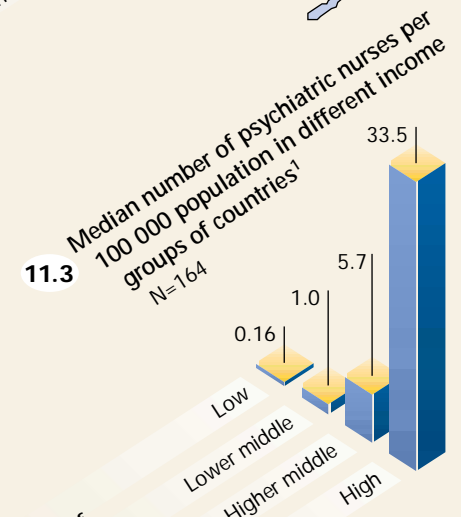
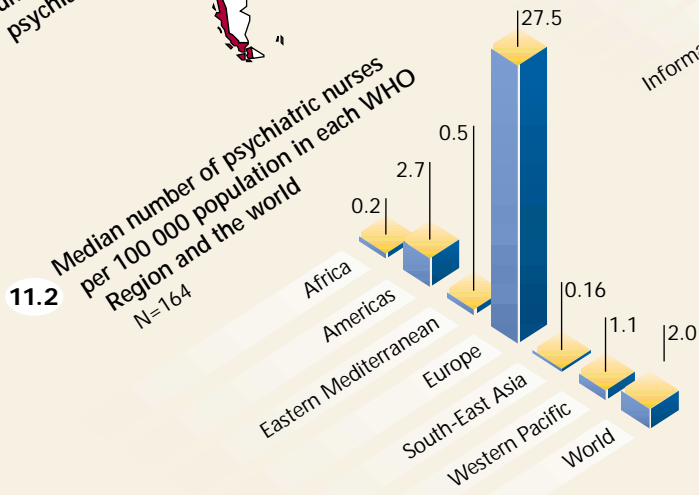
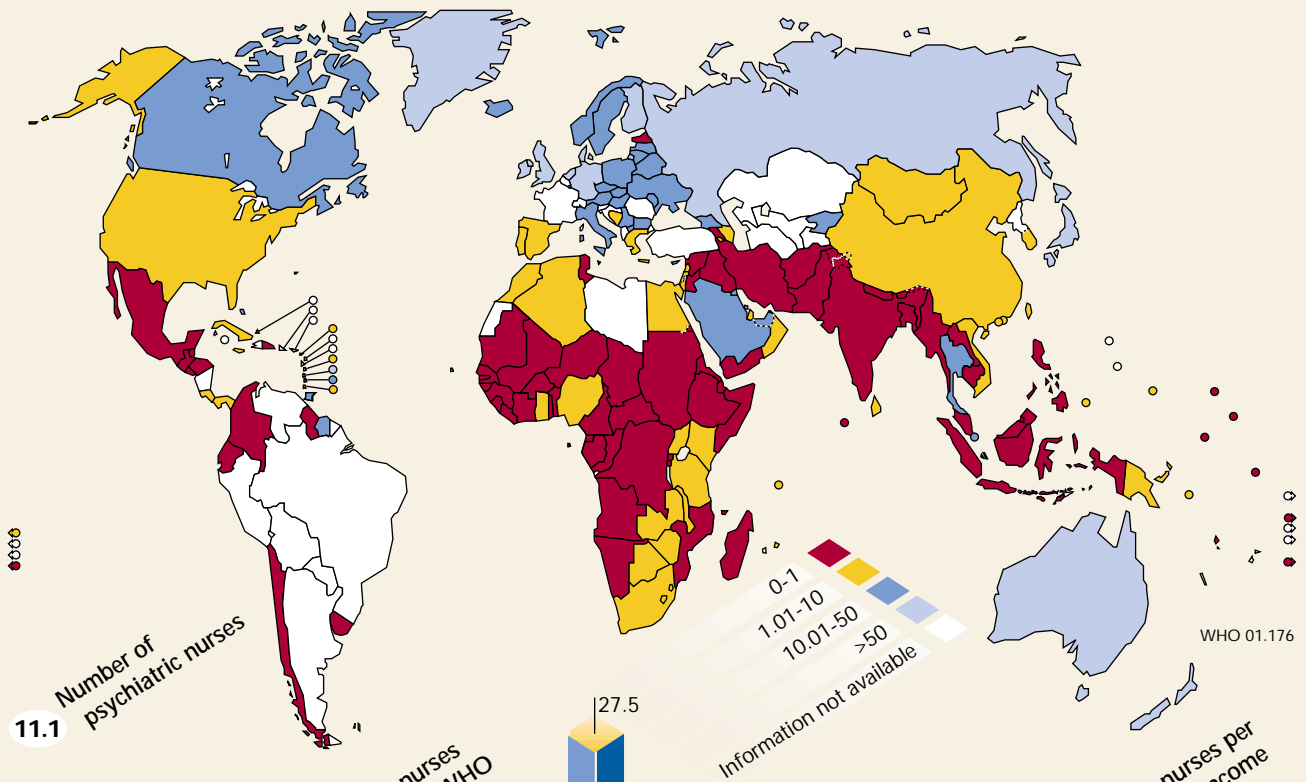
- ◆ The total number of psychiatric nurses in some countries may actually be less as some countries may have reported general nurses who work in psychiatric facilities as psychiatric nurses, even though they may not have psychiatric nursing training.

- ◆ Some countries were unable to provide data on psychiatric nurses as they do not have any separate register for different kinds of nurses.

## ◆ Implications

- ◆ Psychiatric nurses are important members of mental health care teams. They are also essential for community care services. With a growing emphasis on community-based care in mental health care, there will be a need for more psychiatric nurses.
- ◆ Overall, the number of psychiatric nurses in most developing and low income countries is extremely inadequate.

- ◆ While training facilities for psychiatrists have been developed, many countries have neglected creating training facilities for psychiatric nurses. This lack of facilities will be a limiting factor for establishing comprehensive mental health care teams.



<sup>1</sup> See page 41