



Overview of National Mental Health Situation

ARM, 2012 EC

Content

- ▶ Introduction
- ▶ Back ground
- ▶ Response
- ▶ Challenge
- ▶ Ways forward

Introduction cont....

Mental Health

- ▶ Mental health (WHO 2001 a).
- ▶ MNS conditions

Burden

Back Ground cont

Group	Mental Illness	Prevalence (%) Incidence in Ethiopia
Common Mental Disorders	Depression, Anxiety and Psychological distress	21.56%-27.9%(meta analysis 2018)
Severe Mental Disorders	Schizophrenia	0.5% ^(2012-2016)
	Bipolar disorder	0.63% ^(GBD,2017)
	Major Depression	6.8 (NCDI CR)

Back Ground cont...

Group	Mental Illness	Prevalence (%) Incidence in Ethiopia
Substance Use Disorders	Alcohol Use Disorders	1,86% (GBD, 2017)
	Khat Use Disorder	5 % (Michael O. et al, 2017)
	Drug Use (includes Opioids, Cannabis)	0.5% (GBD, 2017)
Neurologic	Epilepsy	1.0 % ⁹
		44.9% in the

Back Ground cont...

Group	Mental Illness	Prevalence (%) Incidence in Ethiopia
Childhood and Adolescent Mental Disorders	ADHD, Oppositional Defiant Disorders/Conduct Disorders, Anxiety Disorders, Mood Disorders, Elimination Disorders, Autism spectrum disorders	12 – 25% (1.5%, 1.5%, 1.6%, 1%, 0.8%) ⁴ and 0.63% ⁶

Back Ground cont...

- ▶ The 2017 GBD estimates the prevalence of alcohol and drug use disorders to be 1.9% and 0.5%, respectively. This show an increment from the level indicated in 2007.
- ▶ In the same report the rate of khat use disorders were reported to be 3.5% for males (Fekadu, et al, 2007) and 5% in another study(**Michael O. et al, 2017,**)

Back Ground cont

- ▶ The crude suicide rates in Ethiopia is reported to have increased from 7.9 to 8.4 per 100,000 population from 2005 to 2015 (WHO, 2017).
- ▶ The actual suicide rate is likely to be substantially higher because the stigma and taboos associated with suicide lead to under-reporting.

National Responses(Policy, Plan and Program

A) Health Policy , September 1993

1) PRIORITIES OF THE POLICY

- ▶ 3. Appropriate support shall be given to the curative and rehabilitative components of health including **mental health**.

2) GENERAL STRATEGIES

- ▶ 3. **Intersectoral collaboration shall be emphasized particularly**
- ▶ 3.6 Participating in the development of community based facilities for the care of the physically and **mentally disabled**, the abandoned, street children and the aged.

National Responses cont...

➤ 4. Health Education

- ▶ 4.6 Discouraging the acquisition of harmful habits such as cigarette smoking, alcohol consumption, drug abuse and irresponsible sexual behavior.
- ▶ The first Mental Health Strategy 2012-2016
- ▶ Mental Health Program was established under the NCD case team.

National Responses cont...

- ▶ Health Sector Transformation Program (HSTP).

Indicators (identified but not included in the HMIS or no data coming through) and targets

94. Proportion of eligible population who received mental health service disaggregated by disease type

95. Proportion of eligible population treated for substance use disorder disaggregated by substance type

96. Proportion of Woredas with mental health services

- ▶ The second National Mental Health Strategic Plan 2019-2025

National Responses cont...

- ▶ The mental health program is scaled up to mental health case team in the last quarter of 2011.
- ▶ **Integrating mental health in the PHCU** through implementing WHO's MH GAP programme.

National Response cont..

- ▶ **Integrating mental health with other programmes/initiatives**
 - **PHCG**- 400 HC covered and 1500 more will be involved
 - **MCH**-Mental health is included in the children and adolescent health strategic plan and training manuals prepared and training offered to selected health care workers in 2017 E.C
 - **HIV**-Training manuals prepared for HIV case manager, TOT and cascading of training conducted in 2017
 - **School Health Initiatives**-Mental health included in school health initiatives

MH service cont....

Inpatient Psychiatry Service

Institutions	Bed Capacity	Detail
Public Inpatient psychiatric units	547	Amanuel=268 beds, Yeka Kotebe= 150 ,Armed Forces = 50 beds
	76	Jimma= 26 beds, Ayder= 9 beds, UoG=21, Metu Karl Hospital= 4...Hiwot Fana =12,dilchora=7
Others	90	AF 50, Police 5 ,Prison 35
Total	713	

MH service cont...

Out patient Psychiatry Services in hospitals

Adult Outpatient

3 Hospitals(Amanuel SMH, St Paul's H , Alert H)

100 Regional Hospitals (Primary and Secondary)

103/400 = 26%

3 (Army Hosp, Prison and Police)

Children and Adolescent Services

2 (Out-patient services in Addis Ababa (St Paul's, Yekatit 12)

MH Service cont...

Substance Use Treatment Center and Rehabilitation Center

Scope of Service	Number of Hospitals	Total Bed Capacity
Inpatient and Outpatient	5	30
Rehabilitation centres	For MI	Gefersa RC
	For SUD	???(Discussion)

MH service cont....

2) Health Center Level

- ▶ There are twenty four Health centres led by psychiatric nurse.
- ❖ Twenty one of these are in Addis Ababa.
- ▶ 2014 the mhGAP program a total of **244 health centers** were involved though their functional status is not well known.
- ▶ 2019 **Eighteen(80)** are recently involved by mhGAP V 2.0
- ▶ 2018 **400 PHCG**

3) HP

- ▶ HEW are not empowered to provide mental health service

MH service cont....

B) Private Mental Health Services

- ▶ The **national health policy encourages the promotion of participation of the private sector** and NGOs.
- ▶ In the past few years, the number of private mental health facilities providing mental health care is on the rise.
- ▶ The exact number and the capacity of these centers are not studied but around five of them are functioning in Addis Ababa and the rest in the regions.
- ▶ Most of them are owned and run by mental health specialists.

MH service cont....

- C) Informal Sectors** (NGOs, CSOs, CBOs, FBOs, traditional healers and others working on mental health conditions).
- ❖ But certainly this requires proper data collection to know how many they are where they are found, what types of mental health services they provide and what types of clients they serve.
 - ❖ Due consideration needs to be given in terms of building their capacity and linkage with the formal sector.

Human Resource

Ethiopia	Psychiatrist	Msc in ICCMH	Bsc in Psychiatry	Clinical Psych	Social Worker	Therapist
Current	0.067	0.094	0.175	0.02	0.003	0
WHO	Psychiatrist	Nurses		Psychosocial workers		
Recommend	0.898*	8.34*		7.85*		

Training Institutions and Number of MH Professional 2016 HRH

	PHD	Forensic P	ADD P	C&A P	Resy P	Msc	BSc	Cl. Psyc	Social w
Number of institutions	1	0	0	1	3	3	8	2	1
Number of Professionals	6(2017)	1	1	2	84(2018)	94(2016)	175(2016)	20(2016)	19(2016)

Health Products and Technologies

- ▶ One of the prominent challenge in mental health service is the **lack of sustainable availability of psychopharmacologic agents** in almost all setting.
- ▶ Besides, **affordability of these drugs** is also another challenge . So availing of safe, effective, cheap and generic medications with more options to address mental health issues and establishing a mechanism for fast tracking of procured drugs is a priority.
- ▶ **EEG and ECT availability** is also very limited to few mental health service settings.

Information, evidence and research

- ▶ A number of research studies have been undertaken in the field of mental health in Ethiopia. Most of the researches are conducted by A.A.U universities staffs through several projects (Butajira Research Projects, AFFIRM, PRIME and Emerald).
- ▶ The rest are from International partners, PhD students, Psychiatry residents and Msc psychiatry graduates.
- ▶ However, **yet we don't have a nationally representative studies on mental and some neurological disorders.**
- ▶ **Annual Facility Surveys, ISS, SARA and SPA donot include MH**

Challenges/constraints in the public sectors

- Ownership of mental health is not sufficient at many levels. No separate case team or focal point at regional levels.
- Partnership and collaboration in mental health services is still non-existent
- ▶ Budget share of for mental health still not commensurate with the need
- ▶ Number of public private and other organizations providing mental health services is still limited

Challenges cont....

- ▶ The number and mix of mental health professional required to provide full scale service is far below the minimum standard
- ▶ Technologies and pharmaceuticals inputs required for mental health services are not reliably available
- ▶ Research and evidence generation is limited
- ▶ No indicators for mental health included in the HMIS and no M and E tool developed

Way Forward



Way Forward cont...

1. National institute of Mental and neurological care

1.1 Operational Units

▶ 1.1 Gefersa:-

- a) Legalization process underway,
- b) National rehab center with branch's at regional level.25 Regional rehabs. The MSD has already signed MOU with MOLSA. They are planning to conduct national work shop in the presence of RHB, MoLSA staffs and others.
- c) 5 building will be constructed in the compound to provide rehab service through PPP

▶ 1.2 Ammanuel Mental specialized hospital

▶ 1.3 Kotebe Hospital

Care pathway

- ▶ Care pathway
- ▶ Care pathway