Atlas

MENTAL HEALTH RESOURCES IN THE WORLD 2001

World Health Organization
Geneva

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Mental Health Determinants and Populations
Department of Mental Health and Substance Dependence
World Health Organization

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Atlas is a project of WHO Headquarters, Geneva, supervised and co-ordinated by Dr Shekhar Saxena. Technical support is provided by Dr Pallab K. Maulik (overall project management) and Ms Kathryn O'Connell (data analyses). Dr Derek Yach and Dr Benedetto Saraceno provide the vision and guidance to this project.

Key collaborators from WHO Regional Offices include: Dr Custodia Mandlhate, African Regional Office; Dr Caldas de Almeida and Dr Claudio Miranda, Regional Office for the Americas; Dr Ahmad Mohit and Dr Khalid Said, Eastern Mediterranean Regional Office; Dr Wolfgang Rutz, European Regional Office; Dr Vijay Chandra, South-East Asia Regional Office; and Dr Helen Herrman and Dr Gauden Galea, Western Pacific Regional Office. They have contributed in planning the project, obtaining and validating the information from Member States and reviewing the results.

WHO Representatives and Liaison Officers in WHO Country Offices were responsible for collecting and validating information received from governments.

Ministry of Health officials in Member States provided the information and responded to the many requests for clarifications arising from the data.

A number of experts in countries assisted the ministries in locating and providing the information. They also provided relevant literature and reports to support the data.

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As the world becomes increasingly aware of the massive burden associated with mental disorders and takes steps to expand and improve mental health care, the need for accurate and up-to-date information is crucial. Information is required in two distinct areas: the disease burden and the available resources.

Many decades of work have resulted in substantial information on the extent and burden of mental diseases. This includes information on how to obtain reliable and valid diagnoses; studies on the incidence, prevalence and course of disorders; national and international classification systems; and estimates of associated disability. However, very little is known about the resources available to respond to this burden. What resources exist within countries for mental health care? How do the resources compare to the needs? Where are the significant gaps? What are the differences across regions and income groups of countries? While these questions are asked frequently, there have been no clear answers. What is known about mental health resources pertains only to a few developed countries. There is almost no information from the vast majority of countries. Because studies have used different units of measurement, the information that is available is not comparable across countries.

The World Health Organization launched Project Atlas in 2000 to address this gap. The objectives of this project include collection, compilation and dissemination of relevant information on mental health resources in countries. The project is designed to obtain real information from each country rather than to extrapolate based on what is known from a few countries. Within one year of its conception, we are pleased to present the first product of this project. This volume contains the initial set of data collected by the Atlas project. It provides global and regional analyses on mental health resources data collected from 185 countries, covering 99.3% of the world population. This information has been gathered primarily from governmental sources within each country, making this one of the most comprehensive and authoritative compilations of mental health resources ever attempted.

Atlas data confirm what many mental health professionals have known for a long time– that mental health services are grossly inadequate compared to the need for mental health care in most countries. The value of Atlas however is to replace impressions and opinions with facts and figures. Atlas data not only give a clear picture of the existing resources and crucial needs in countries around the world, but also provides a baseline for monitoring changes over time. By following uniform definitions and units it allows for comparisons across countries and regions.

How can the Atlas data be used? Atlas data should drive the global and national mental health programmes. At the global level, the data will help make the world more aware of exactly how deficient mental health resources are and provide an impetus to international efforts to enhance these resources. At the national level, the analyses identify areas that need urgent attention by health planners and policy-makers within countries. Atlas also sets realistic targets by allowing comparison across countries. WHO hopes that the stark realities depicted by Atlas will motivate all those who value mental health to act now for improving mental health resources. The picture is clear and the goal is entirely within reach.

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Mental disorders account for a substantial proportion of disease disability and burden, yet current resources for mental health are not adequate. The burden associated with mental disorders is projected to increase over the coming years. The quality and quantity of mental health resources need to improve to meet the current and future needs. Accurate information on existing resources is essential to bring about this improvement.

It is indeed a paradox that though substantial information is available on the incidence, prevalence, course, diagnosis, classification, disability and burden of mental disorders, hardly any information is available on the resources that exist to respond to this burden. The information that does exist cannot be compared across countries because reports use varying definitions and units of measurement. This imbalance between "disease information" and "resources information" is a major impediment to planning mental health services. Lack of information on resources also hampers efforts made by non-governmental organizations, professional associations and consumer groups to demand improvement of mental health care services and to highlight specific needs.

In order to fill this crucial gap, the World Health Organization launched Project Atlas in 2000. Atlas aims to collect, compile and disseminate relevant information on mental health resources in the world.

In the first phase of this work, relevant information has been obtained from the Member States of WHO and is being presented in this volume "Atlas: Mental Health Resources in the World". The information was collected in a stepwise method. In the first step, consultations were held with Regional Offices to identify areas where there was a need to collect information. A questionnaire was then drafted along with a glossary of terms. This draft questionnaire and the glossary were reviewed by selected experts. The questionnaire was piloted in one developed country and one developing country, and necessary changes made. The English questionnaire and glossary were then translated into four languages – Arabic, French, Russian and Spanish.

In the third step, all the available information was entered into an electronic database using suitable codes. Analysis of the data was then conducted using SPSS version 9.0. Values for continuous variables were grouped into categories based on distribution. Frequency distributions and measures of central tendency (mean, medians and standard deviations) were calculated as appropriate. Countries have been categorised by WHO Regions and by World Bank income groups based on GNP per capita (World Bank, 2000). Population figures were taken from The World Health Report 2000, (WHO, 2000).

This publication gives analyses of data for 185 countries. The data is organized by 16 broad themes. These themes are presented in the following pages. Each theme occupies two pages. The right page gives a graphic display of the available data. The accompanying left page gives the related text. Graphic displays include maps of the world that give the relevant country data coded by colour. Bar and pie charts are given to illustrate frequencies, medians and means as appropriate. Regional maps show aggregate figures by WHO Regions. Definitions for the terms used while collecting the information are provided for each theme. Selected findings from analysis of data around that theme are described. No attempt has been made to describe all the possible results arising out of data analyses presented; only the salient findings are mentioned. Limitations to be kept in mind when interpreting the data and their analyses are described. Some implications of the findings for further development of mental health resources are given.

The annex to this publication contains summary tables of country specific data for selected variables. A separate table gives data from Associate Members and Areas of WHO; these data are not included in the aggregate analyses.

While all attempts have been made to obtain the required information from all countries, some countries have not been able to give information on certain themes. The extent of missing data on each theme is indicated by giving the number of countries whose data are included (N) with the individual charts against the total number of 191. The most

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