

## INDICATORS FOR ROUTINE MONITORING OF EFFECTIVE MENTAL HEALTH CARE COVERAGE IN LOW AND MIDDLE INCOME SETTINGS

In low and middle-income countries (LMIC) **the treatment gap for people with mental health problems**, defined as the difference between the number of people needing care and those receiving such care, **is especially pronounced**.

Global initiatives to scale up mental health services are under way. These efforts require an adequate information system, which includes **mental health metrics to estimate changes in treatment coverage and to monitor quality of care**.

### OBJECTIVES

- ✦ The present research tries to identify **indicators** that can be used within routine health information systems **to measure effective coverage, including financial protection, for treatment of people with mental illness**.

### METHODOLOGY

The researchers conducted a two-round Delphi study with 93 experts from primarily LMIC countries (Ethiopia, India, Nepal, Nigeria, South Africa and Uganda), in order to generate and prioritize a set of indicators.



### FINDINGS

This study has resulted in **a stable list of most frequently endorsed indicators that cover different domains of measuring mental health care coverage**, including treatment needs, treatment utilization, treatment quality and financial protection for service users.

The **fifteen most highly ranked indicators** by the experts were:

- 1  Number of people diagnosed with **severe mental disorders**.
- 2  Number of days in last one month that **psychotropic medicines were out of stock**.
- 3  Proportion of **national health budget** allocated to mental health services.
- 4  Number of **trained mental health workers** at inpatient and outpatient service.
- 5  Number of people with severe mental disorder **who received mental health treatment**.
- 6  Rate of **suicide deaths** and attempts.
- 7  Number of people diagnosed with **any mental disorder** (all health system).
- 8  Number of people receiving mental health care **who are lost to follow-up** (drop-out rate).
- 9  Number of people with any mental disorder **who received mental health treatment** (among diagnosed people).
- 10  Number of patients **re-admitted** to in-patient mental health care.
- 11  Number of persons taking **psychotropic drugs**.
- 12  Number of patients and caregivers expressing **satisfaction with received services**.
- 13  Number of people with mental disorders who have some kind of **financial protection or insurance** against the cost of mental health care treatment.
- 14  Number of beneficiaries who are **better, worse or unchanged** post-treatment compared to pre-treatment, or at standard intervals after starting treatment.
- 15  Number of serious **complications or incidents** associated with treatment.

## CONCLUSIONS

- ✦ In order to evaluate the scaling up of mental health care in LMIC, there is an urgent need to have **an adequate information system**. Good quality data on a number of key indicators can support the process of making decisions and improvements related to mental health care.
- ✦ The strong consensus reached in this study for the identified key indicators provides **a platform for their consideration and inclusion within national health information systems**, which in turn can improve monitoring and reporting of mental health system performance at the global level.

### REFERENCES

Jordans, M. J., Chisholm, D., Semrau, M., Upadhaya, N., Abdulmalik, J., Ahuja, S., & Petersen, I. (2016). Indicators for routine monitoring of effective mental healthcare coverage in low-and middle-income settings: a Delphi study. *Health policy and planning*, czw040.