## **MENTAL HEALTH ATLAS 2020**

**Member State Profile** 

## [Thailand]

Total population (UN official estimate): <sup>1</sup>	69 625 581			Upper-middle		
Total mental health expenditure per person (reported currency):	45.1 [baht]			SEARO		
Burden of mental disorders (WHO official estimates)						
Disability-adjusted life years (per 100 000 population): <sup>2</sup>	1 341.9		Age-standardized suicide mortality rate per 100 000 population, 2013, 2016 and 2019 10.00			
Age-standardized suicide mortality rate (per 100 000 population): <sup>4</sup>	7.95					
			8.00	7.59	7.95	
			6.00 6.59			
			4.00			
			2.00			
			0.00			
			2013	2016	2019	

### Mental health research and reporting

research output within country

health

region

Availability / status of mental health reporting:

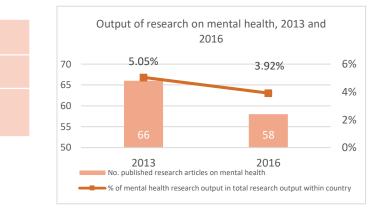
Number of published research articles on mental

Percentage of mental health research output in total

Percentage of mental health research output of the

country in total mental health research output in the

#### Mental Health specific data compiled in the last two years for public sector



MENTAL HEALTH SYSTEM GOVERNANCE					
Mental health policy / plan		Mental health legislation			
Stand-alone policy or plan for mental health:	Yes	Stand-alone law for mental healt	Yes		
(Year of policy / plan):	2020	(Year of law):	2019		
Policy / plan is in line with human rights covenants (self-rated 5-points checklist score; 5 = fully in line) <sup>5</sup>	5	Law is in line with human rights of rated 5-points checklist score; 5 =	5		
Human resources are estimated and allocated for implementation of the mental health policy/plan	Yes	The existence of a dedicated authority or independent body to assess compliance of mental	regular inspectio	· ·	
Financial resources are estimated and allocated for implementation of the mental health policy/plan	Yes	health legislation with international human rights			
The mental health policy / plan contains specified	Indicators were a	vailable and used in the last two ve	ears in most comr	opents of current	

indicators or targets against which its implementation can be monitored

Indicators were available and used in the last two years in most components of current mental health policies

Child and/or adolescent mental health policy/plan					
Stand-alone or integrated policy or plan for child mental health	Yes	Stand-alone or integrated policy or plan for adolescent mental health	Yes		
(Year of child mental health policy / plan):	2018	(Year of adolescent mental health policy / plan):	2018		
Suicide prevention strategy/policy/plan					
Stand-alone or integrated strategy/policy/plan for suicide prevention	Yes	(Year of strategy/policy/plan)	2020		

RESOURCES FOR MENTAL HEALTH				
Mental health financing				
The government's total expenditure on mental health as % of total government health expenditure	2.3%	The government's total expenditure on mental hospitals as % of total government mental health expenditure	81.2%	

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#### Insurance for mental health

How the majority of persons with mental health conditions pay for mental health services

Persons pay at least 20% towards the cost of services

How the majority of persons with mental health conditions pay for psychotropic medicines

Persons pay at least 20% towards the cost of medicines

Yes

The care and treatment of persons with mental health conditions (psychosis, bipolar disorder, depression) is included in national health insurance or reimbursement schemes in your country

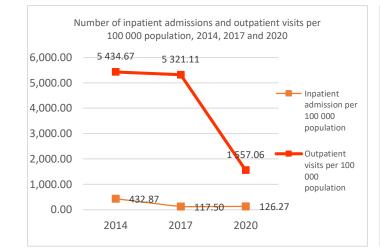


## MENTAL HEALTH SERVICE AVAILABILITY AND UPTAKE (Mental health services include care for mental health,

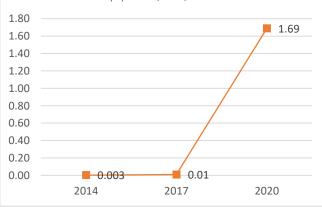
neurological and substance use disorders)						
	Integration of mental health into primary health care					
Integration of mental health into primary care is considered functional (self-rated 5 points checklist score; $\geq 4$ = functional				3		
integration) <sup>8</sup>					. 9	
Outpatient care (total facilities)		Outpatient care			on)	
Mental health outpatient facilities attached to a hospital		Number of visits made by service users in the last				
	20	year in mental hea	12 838.23			
"Community-based / non-hospital" mental health outpatient facility	720	attached to a hospital Number of visits made by service users in the last				
			year in "Community-based / non-hospital" mental			
			nealth outpatient facility			
		Number of visits made by service users in the last				
Other outpatient facility (e.g. Mental health day care or treatment facility)	378	year in other outpatient facility (e.g. Mental			-	
of treatment facility)		health day care or	treatment faci	lity)		
Total number of outpatient facilities specifically for	6	Number of visits n	umber of visits made by service users in the last			
children and adolescents			year in outpatient facility specifically for children			
		and adolescents				
Inpatient care (total facilities)		Inpatient care (beds/admissions per 100 000			population)	
Mental hospitals	20	Mental hospital beds / annual admissions		6.26 / 126.27		
Psychiatric units in general hospitals	18		General hospital psychiatric unit beds / annual			
		admissions	- / -			
Community residential facilities	116	Community residential beds / annual admissions			1.67 / -	
Inpatient facilities specifically for children and	4	Child and adolescent specific inpatient beds /			2.98 / 106.65	
adolescents		annual admissions Mental hospitals (length of stay)			,	
Mental hospitals						
Total number of admissions	-	Inpatients staying less than 1 year			97 720	
Admissions that are involuntary	-	Inpatients staying 1-5 years			-	
Follow-up of people with mental health condition		Inpatients staying more than 5 years			-	
discharged from hospital in the last year (discharged	26%-50%	Percentage of inpatients staying less than 1 year		75.25%		
persons seen within a month)		in the total number of inpatients			73.2370	
Inpatients receiving timely diagnosis, treatment and follow-up for physical health conditions(e.g. cancer, diabetes or TB) 25% or less						
Community based mental health services <sup>10</sup>						
Total number of community based mental health	Number of community-based mental health			ental health		
facilities	1 179	facilities per 100 000 population			1.69	
Treated prevalence of psychosis and by sex			Total cases	Male	Female	
Treated cases of psychosis (inpatient and outpatient)			-	-	-	

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#### Number of community-based mental health services per 100 000 population, 2014, 2017 and 2020



### MENTAL HEALTH PROMOTION AND PREVENTION Existence of at least two functioning programmes

Yes (self-rated 3 points checklist score;  $\geq 2 =$ functioning programme)<sup>11</sup> cope of Functionality of Programme **Programme examples** management programme programme Suicide prevention programme Suicide prevention National Government Yes Mental Health Awareness /Anti-Strengthen knowledge and develop mental health National Government Yes stigma Holistic Approach for Addressing Child Development Early Child Development National Government Yes and Mental Health Strengthen child mental health and prevent risk School based mental health National Government Yes prevention and promotion behaviors Parental / Maternal mental health Depression Screening and Treatment Integrative with National Government Yes promotion and prevention mother during pregnant and postpartum Work-related mental health Strengthen work-related mental health National Government Yes prevention and promotion Mental health and psychosocial component of disaster preparedness, Development of mental health crisis National Government Yes disaster risk reduction

#### Endnotes

<sup>1</sup> UN, 2019. World Population Prospects. https://population.un.org/wpp/

<sup>2</sup> GBD, 2019. Global Health Estimates. https://www.who.int/data/gho/data/themes/mortality-and-global-health-estimates/global-health-estimates-leadingcauses-of-dalys. Value represent DALY rate per 100,000 and for mental disorders only.

<sup>3</sup> World Bank, 2019. Country classification. https://datahelpdesk.worldbank.org/knowledgebase/topics/19280-country-classification

<sup>4</sup> WHO, 2019. Global Health Observatory. http://www.who.int/gho/en/. Suicide mortality rates are computed using standard categories, definitions and methods are reported to facilitate comparisons over time and between countries and may not be the same as official national estimates.

<sup>5</sup> Policy/plan compliance with human rights instruments self-rated 5 points checklist items: 1) Policy/plan promotes transition towards mental health services based in the community (including mental health care integrated into general hospitals and primary care); 2) Policy/plan pays explicit attention to respect of the rights of people with mental health conditions and psychosocial disabilities as well as at-risk populations; 3) Policy/plan promotes a full range of services and supports to enable people to live independently and be included in the community (including rehabilitation services, social services, educational, vocational and employment opportunities, housing services and supports, etc.); 4) Policy/plan promotes a recovery approach to mental health care, which emphasizes support for individuals to achieve their aspirations and goals, with mental health service users driving the development of their treatment and recovery plans; 5) Policy/plan promotes the participation of persons with mental health conditions and psychosocial disabilities in decision-making processes about issues affecting them (e.g. policies, laws, service reform, service delivery). (5 = fully in line)

<sup>6</sup> Law compliance with human rights instruments self-rated 5 points checklist items: 1) Law promotes transition towards community-based mental health services (including mental health integrated into general hospitals and primary care); 2) Law promotes the rights of people with mental health conditions and psychosocial disabilities to exercise their legal capacity; 3) Law promotes alternatives to coercive practice; 4) Law provides for procedures to enable people with mental health conditions and psychosocial disabilities to protect their rights and file appeals and complaints to an independent legal body; 5) Law provides for regular inspections of human rights conditions in mental health facilities by an independent body (79% of responding countries). (5 = fully in line)

<sup>7</sup> The number of mental health nurse, social worker, mental health workers and other specialized mental health worker is the number of the Department of Mental Health only. <sup>8</sup> Integration of mental health in primary care self-rated 5 points checklist items: 1) guidelines for mental health integration into primary health care are available

and adopted at the national level; 2) pharmacological interventions for mental health conditions are available and provided at the primary care level; 3) psychosocial interventions for mental health conditions are available and provided at the primary care level; 4) health workers at primary care level receive training on the management of mental health conditions: 5) mental health specialists are involved in the training and supervision of primary care professionals. (> 4 = functional integration).

<sup>9</sup> Outpatient care (per 100 000 population) is number of psychiatric outpatients who received services under the Department of Mental Health and the Office of

the Permanent Secretary, Ministry of Public Health. <sup>10</sup> Community-based mental health services are defined as services that are provided in the community, outside a hospital setting. Data for this indicator include countries' reported number of community-based outpatient facilities (e.g. community mental health centres), other outpatient services (e.g. day treatment facilities) and mental health community residential facilities for adults.

<sup>11</sup> Functional mental health promotion and prevention programmes self-rated 3 points checklist items: 1) Dedicated financial & human resources; 2) A defined plan of implementation; and 3) Documented evidence of progress and/or impact. (≥ 2 = functioning programme)