

Kuwait

General Information

Kuwait is a country with an approximate area of 18 thousand sq. km. (UNO, 2001). Its population is 2.595 million, and the sex ratio (men per hundred women) is 151 (UNO, 2004). The proportion of population under the age of 15 years is 26% (UNO, 2004), and the proportion of population above the age of 60 years is 3% (WHO, 2004). The literacy rate is 84.7% for men and 81% for women (UNESCO/MoH, 2004).

The country is a high income group country (based on World Bank 2004 criteria). The proportion of health budget to GDP is 3.9%. The per capita total expenditure on health is 612 international \$, and the per capita government expenditure on health is 482 international \$ (WHO, 2004).

The main language(s) used in the country is (are) Arabic. The largest ethnic group(s) is (are) Kuwaiti, and the other ethnic group(s) are (is) other Arab. The largest religious group(s) is (are) Muslim (five-sixths).

The life expectancy at birth is 75.4 years for males and 77.7 years for females (WHO, 2004). The healthy life expectancy at birth is 67 years for males and 67 years for females (WHO, 2004).

Epidemiology

There is substantial epidemiological data on mental illnesses in Kuwait in internationally accessible literature. No attempt was made to include this information here.

Mental Health Resources

Mental Health Policy

A mental health policy is present. The policy was initially formulated in 1957.

The components of the policy are advocacy, promotion, prevention, treatment and rehabilitation.

Substance Abuse Policy

A substance abuse policy is present. The policy was initially formulated in 1983.

National Mental Health Programme

A national mental health programme is present. The programme was formulated in 1997.

National Therapeutic Drug Policy/Essential List of Drugs

A national therapeutic drug policy/essential list of drugs is present. It was formulated in 1980.

Mental Health Legislation

There is no written legislation. However, efforts had been made to formalize a legislation, though it has not been successful.

Details about the year of enactment of the mental health legislation are not available.

Mental Health Financing

There are budget allocations for mental health.

Details about expenditure on mental health are not available.

The primary sources of mental health financing in descending order are social insurance, private insurances and out of pocket expenditure by the patient or family.

The country has disability benefits for persons with mental disorders. Treatment is provided by the Government and social benefits by the Ministry of Social Affairs.

Mental Health Facilities

Mental health is a part of primary health care system. Actual treatment of severe mental disorders is available at the primary level. Primary care is provided by the family doctor. Facilities should be developed further.

Regular training of primary care professionals is carried out in the field of mental health. In the last two years, about 40 personnel were provided training. Primary care physicians and family physicians are attached to specialist mental health services for a 4 and 8 weeks period, respectively.

There are community care facilities for patients with mental disorders. Community care is provided through district and general hospitals and family doctors. Community care facilities are not well developed. However, there are 2 day care centres which cater to more than 30 clients and one half-way house that caters to 30 clients.

Psychiatric Beds and Professionals

Total psychiatric beds per 10 000 population	3.4
Psychiatric beds in mental hospitals per 10 000 population	3.4
Psychiatric beds in general hospitals per 10 000 population	0
Psychiatric beds in other settings per 10 000 population	0
Number of psychiatrists per 100 000 population	3.1
Number of neurosurgeons per 100 000 population	
Number of psychiatric nurses per 100 000 population	22.5
Number of neurologists per 100 000 population	
Number of psychologists per 100 000 population	1.4
Number of social workers per 100 000 population	0.4

There are 19 occupational therapists. There is a plan to increase the beds strength in mental hospital from the current level of 3.4 per 10 000 to 4.58 per 10 000 population in 2005. Some beds have been earmarked for the management of drug abusers (260), geriatric and forensic patients. There is a specialized unit for treating PTSD patients. Although there are more than 1000 psychologists and social workers, only a few work in the field of mental health. Thirty-one of them are employed by the psychiatric hospital which serves as the main psychiatric set-up for Kuwait.

Non-Governmental Organizations

NGOs are involved with mental health in the country. They are mainly involved in advocacy, promotion, prevention, treatment and rehabilitation.

Information Gathering System

There is mental health reporting system in the country. Only data from the psychiatric hospital is available.

The country has data collection system or epidemiological study on mental health.

Programmes for Special Population

The country has specific programmes for mental health for disaster affected population, elderly and children.

Therapeutic Drugs

The following therapeutic drugs are generally available at the primary health care level of the country: carbamazepine, ethosuximide, phenobarbital, phenytoin sodium, sodium valproate, amitriptyline, chlorpromazine, diazepam, fluphenazine, haloperidol, lithium, biperiden, carbidopa, levodopa.

Additional Sources of Information

•Bale, R. (2000) A project to develop quality improvements in the Kuwait mental health service. *Journal of Psychiatric Practice*, 24, 112-12.