### Table 1 Proposed mental health indicators for the Eastern Mediterranean Region

<table>
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<tr>
<th>Periodic survey</th>
<th>Routine national HMIS</th>
<th>Routine national information system other than HMIS</th>
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| - Country has an operational multisectoral national mental health policy/plan in line with international/regional human rights instruments.  
- Country has an updated national mental health legislation in line with international/regional human rights instruments.  
- Inclusion of specific priority to mental health conditions in basic packages of health care, of public and private insurance/reimbursement schemes.  
- Mental health and psychosocial support provision is integrated into the national emergency preparedness plans.  
- A proportion of mental health facilities are monitored annually to ensure protection of human rights of persons with mental conditions using quality and rights standards.  
- Functioning programmes of multisectoral mental health promotion and prevention in existence. | - Routine data and reports at national level available on a core set of mental health indicators.  
- Proportion of persons with mental health conditions utilizing health services (disaggregated by age, sex, diagnosis and setting).  
- Proportion of general hospitals which have mental health units including inpatient and outpatient units.  
- Proportion of PHC facilities having regular availability of essential psychotropic medicines.  
- Proportion of PHC facilities with at least one staff member trained to deliver non-pharmacological interventions.  
- Proportion of health-care workers trained in recognition and management of priority mental conditions during emergencies.  
- Proportion of community workers trained in early recognition and management of maternal depression and to provide early childhood care and development and parenting skills to mothers and families. | - Proportion of schools implementing the whole-school approach to promote life skills.  
- Annual reporting of national data on numbers of deaths by suicide. |

- Financial resources: government health expenditure on mental health  
- Stakeholder involvement: participation of associations of persons with mental disorders and family members in service planning and development.  

- Human resources: number of mental health workers.  
- Capacity building: number and proportion of primary care staff trained in mental health.  
- Service availability: number of mental health care facilities at different levels of service delivery.  
- Inpatient care: number and proportion of admissions for severe mental disorders to inpatient mental health facilities that a) exceed one year and b) are involuntary  
- Service continuity: number of persons with a severe mental disorder discharged from a mental or general hospital in the last year who were followed up within one month by community-based health services.  

- Social support: number of persons with a severe mental disorder who receive disability payments or income support.  

*Based on the World Health Organization Comprehensive Mental Health Action Plan (1) and the Eastern Mediterranean Region Regional Framework (2); and additional mental health service development indicators identified by the WHO Secretariat.*

*PHC = primary health care; HMIS = health management information system.*