

School Mental Health Services in Egypt: Current State and Future Needs

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Introduction:

Currently, the vast majority of children with mental health needs in developing countries do not receive any treatment or care. The immediate challenge in these countries is generating sufficient resources for primary health care to ensure early identification and treatment of mental disorders among children. These disorders are included as priority conditions in WHO's Mental Health Gap Action Program 2008–2013, which was launched in 2008.

"A prioritized agenda for autism and other mental disorders in children should generate and strengthen the evidence base for cost-effective prevention and control strategies. Scaling up of services is the real need. This will also improve educational attainments and will contribute to a better informed and healthier generation of children," said Dr Benedetto Saraceno, Director, Mental Health and Substance Abuse at WHO.

There is good evidence to demonstrate that it is preferable to treat children and adolescents in the least restrictive environment as close to their communities as possible. This principle requires that a range of services should be available to meet the needs of seriously emotionally disturbed children as outpatients, in partial care programs and in hospital settings. In addition parents need the opportunity for respite and appropriate education must be provided (Grimes, 2004).

Aim of the work:

Present research described analytically the current state of School mental health service in Egypt and put future needs in consideration.

Method:

Data were collected from 'Child and Adolescent Administration' (General Secretary of Mental Health) and Cairo branch of school mental sector (Health Insurance Organization) to describe:

- 1- Method of referral of Psychiatric cases.
- 2- Cases referred.
- 3- Services provided
- 4- Service providers.

Results:

| Governorate | Year | Hospital | Service |
|-------------|------|----------|-------------|
| Cairo | 2002 | Abassia | Children |
| | 2004 | | Adolescence |
| | 2007 | Helwan | Children |
| | New | | Adolescence |
| | | | Inpatients |

| | | | |
|------------|------|-----------|-------------|
| Alexandria | 2005 | Mamoura | Children |
| | 2011 | | Adolescence |
| Qalubeya | 2004 | Khanka | Children |
| Asuit | 2007 | Asuit | Children |
| | | | Adolescence |
| Port-Said | 2008 | Port-Said | Children |
| Banha | 2011 | Banha | Children |
| Bani-Swif | 2012 | Bani-Swif | Children |

8 hospitals belonging to General Secretary of Mental Health provide its services to Child and Adolescents all over Egypt (2002-2012). They provide child and adolescent services in 4 hospitals, Childhood mental health units in 4 hospitals and 1 inpatient unit in Helwan Hospital (Table-1).

| Service | Procedures |
|------------|--|
| Assessment | 1- Social profile 2- Medical assessment and Differential Diagnosis 3- Psychological Assessment |
| Management | 1- Medical 2- Psychological 3- Social 4- Psych-education |

Mental Health Hospitals provides assessment and management for referred cases with comprehensive assessment and management (Table-2)

| Therapy | Diagnosis | Hospital |
|---------|-------------------|--|
| 1 | Outpatient clinic | All |
| 2 | Specific Clinics | ADHD |
| | | Addiction |
| | | Abasia Hospital Abasia Hospital Helwan Hospital Maamoura Hospital |

| | | | |
|--|----------------------------|--|--|
| 3 | Individual sessions | All | All |
| 3 | Group therapy | All | All |
| | | Enuresis | Khanka Hospital |
| 4 | Open Group | (Open subject) (e.g. Self-confidence) | Abasia Hospital |
| 5 | Parentin(8 sessions)(2012) | All | Abasia Hospital |
| 6 | Day care | Autism(2012) | Abasia Hospital (7 days/week) (New Service (April-2013) |
| | | | Port-Said Hospital(one day/week) |
| | | Conduct Disorder | Helwan Hospital |
| All Mental Health hospitals provides its services for all diagnosis. Commonly ADHD, Enuresis, Mental Retardation, Autism and conduct disorder. | | | |

| Table(4): Service/Educational stage School Health Sector Services-Health Insurance Organization | | |
|--|--|--|
| Service | Stage | |
| Prevention | Comprehensive Medical Assessment and Examination | Beginning of each educational stage |
| | | Kindergarten (1) |
| | Screening for disability(Learning Disability):Assessment for the followingabilities:Mental/Social/Motor/Behavioral/Emotional/Language/Vision/Hearing | Primary (1) |
| | | Primary(2) |
| Assessment | 10 Medical specialties+ Psychiatry and Neurology | Comprehensive Medical Assessment and Examination |
| | | Preparatory (1) Secondary (1) |
| Intervention | Acute and chronic physical illnesses | -Provided to all cases under |
| | Specific mental illness: | |

| | | |
|--|--|--|
| | <ol style="list-style-type: none"> 1- Epilepsy 2- Mental Retardation 3- Cerebral Palsy 4- Learning problems 5- Behavioral problems (ADHD) 6- Autism 7- others | umbrella of Health Insurance Organization. -Services for commonly referred Mental health disorders are provided according to system of referral. |
|--|--|--|

School Health sector (Health Insurance rganization) provides its comprehensive prevention and intervention services for all educational stages especially for physical illness. Intervention of Mental problems includes Epilepsy, Mental Retardation, and Cerebral Palsy. Less commonly mental disorders like ADHD, Learning disabilities and Autism (Table-4)

| Table(5): Referred Cases and referral system in both Mental Health Hospitals and School Health Sector (Cairo Branch)(2012) | | | | |
|--|--------------------|-----------|---------------|---------------------------|
| Ministry of Health | | | | |
| Group | Age | Number | All hospitals | Referred by Parents |
| 1 | Children(5-12) | 21,820 | | |
| 2 | Adolescents(12-18) | 24,359 | | |
| Total | | 46,179 | | |
| Health Insurance Organization(Cairo Governorate)(2012/2013) | | | | |
| | Psychiatry | Neurology | Total | Referred by school Doctor |
| Total | 851 | 241 | 1092 | |
| Total population for screening in academic year 2012/2013(672,095) | | | | |
| % referred for mental assessment= (0.162%) | | | | |
| 46,179 child and adolescent psychiatric case were referred to all mental health hospitals in 2012. On the other hand 1092 child out of | | | | |

(672.095 school student) were referred for mental disorders in comprehensive assessment (2012)(Table-5).

| Table(6): School Health Sector Services-Health Insurance Organization | | | |
|--|--------------|---------------|---|
| 1 | Assessment | Medical | Inside schools under supervision of Ministry of Education |
| | | Psycho-Social | |
| 2 | Intervention | Medical | |
| | | Behavioral | |
| | | Educational | |
| School Health sector provides its intervention inside schools with referral of cases in need for language therapy or Individualized interventions to special units all over Egypt(Table-6) | | | |

| Table(6): School Health Team | | | |
|--|---------------|---|---|
| 1 | Medical Staff | Medical Doctor | 1/ more than one school |
| | | Nurse | 1/school |
| 2 | Others | School Psychologist | 1/school Usually in secondary schools and cover all educational stages |
| | | School Social worker | 1/school-may be more |
| | | Teachers School administration Students | Should have established service according to Ministry of Education and Health Insurance Organization policy |
| School Health Team involves medical doctor mostly GP or having medical specialty related to pediatrics or other medical professions. 1 medical doctor /more than one school is the current state and mostly working with daily physical illness and routine follow up and vaccination program of Health Insurance Organization. School nurse helps in medical intervention and reporting. Other staff like school administration and teachers are involved according to school policy/academic year (Table-6). | | | |

Discussion:

Childhood Mental Health Services Providers in Egypt includes: (1) Ministry of Health services in Mental Health Hospitals (General Secretary of Mental Health and Other Hospitals (General hospitals and Outpatient clinics), (2) Health Insurance Organization (School Health Sector) and Other services in Universities, Private sector (Hospitals–Clinics), NGOs...etc.

Ministry of Health have 18 Mental Health Hospital in 18 Governorate, in 2012 there are 8 Mental Health Hospitals having Child and adolescent psychiatric units :8 Childhood Mental Health Care Unit (8 Hospitals) and 4 Adolescent Mental Health Care Unit (4 Hospitals) and 1 Inpatient Unit (1 Hospital)

8 Child Psychiatric units and 4 for adolescents were developed in Mental Health hospitals all over Egypt starting 2002 till 2012. Only one inpatient unit is present in one mental hospital and it was developed in Helwan mental hospital in 2007. They accept all diagnoses for assessment and intervention.

On the other hand School Health Sector of Health Insurance Organization covers schools all over Egypt. It presents its prevention and intervention services for children starting Kindergarten stage I till 3rd secondary. It is also responsible for comprehensive medical assessment of children, referral and management under Umbrella of Health Insurance in Egypt.

Referred cases by Cairo branch of school health sector (2012) is not representing the actual mental health problems in Egypt. Reporting system in schools, referral and service quality needs to be developed.

According to Egyptian Child Law (2010), Schools should provide its health services to children in all grades including Mental Health.

Saraceno et al. (2007) described 3 major barriers to development of Mental Health Services that is also obvious in Egypt:

- 1- Absence of mental health from the public health priority agenda:

This has serious implications for financing mental health care, since governments have allocated meagre amounts for mental health within their health budgets, and donor interest has been lacking . Such problem is a major problem in Egypt especially among governmental schools and mental health services provided within school context.

- 2- Organization of services:

Mental health resources are centralized in and near big cities and in large institutions. Such institutions frequently use a large proportion of scarce mental health resources; isolate people from vital family and community support systems; cost more than care in the community; and are associated with undignified life conditions, violations of human rights, and stigma. However, both downsizing mental hospitals and making care available in the community will entail challenges.

Although such problem is not very applicable in Egypt due to presence of 18 mental health hospital all over Egypt representing mental health hospitals of

ministry of health (General secretary of mental health) and almost similar service in each university which covers all Egyptian governorates. But Child psychiatric problems needs more development.

3- Complexity of integrating mental health care effectively with primary care services:

The systems that provide primary health care are overburdened; they have multiple tasks and high patient loads ,little supervision and few functional referral systems, and a discontinuous supply of essential medicines. Limitations in human resources also contribute to this barrier, because low numbers and types of health professionals have been trained and supervised in mental health care .

In Egypt such problem needs great work especially for prevention and early diagnosis and referral.

Public schools were identified almost universally as a primary site for the delivery of child and adolescent mental health services. Where the public sector did not provide the services it was indicated that the private sector provided such services. Services provided to children in Egypt especially within schools needs to be developed according to age and cultural needs.

In 18 of 66 countries there are designated child and adolescent mental health beds in pediatric hospitals. Pediatric hospitals that provide both primary care and mental health care are viewed as preferable to care in a mental institution for children

and adolescents. There are no pediatric beds for mental health identified in low income countries.

Conclusion:

Child and Adolescent Mental health services in Egypt needs further development especially school mental health services as a primary site for early detection and better intervention.

References:

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