



## RESEARCH QUESTION

What systems are in place to address the mental health needs of the Kenyan population?

## METHODS

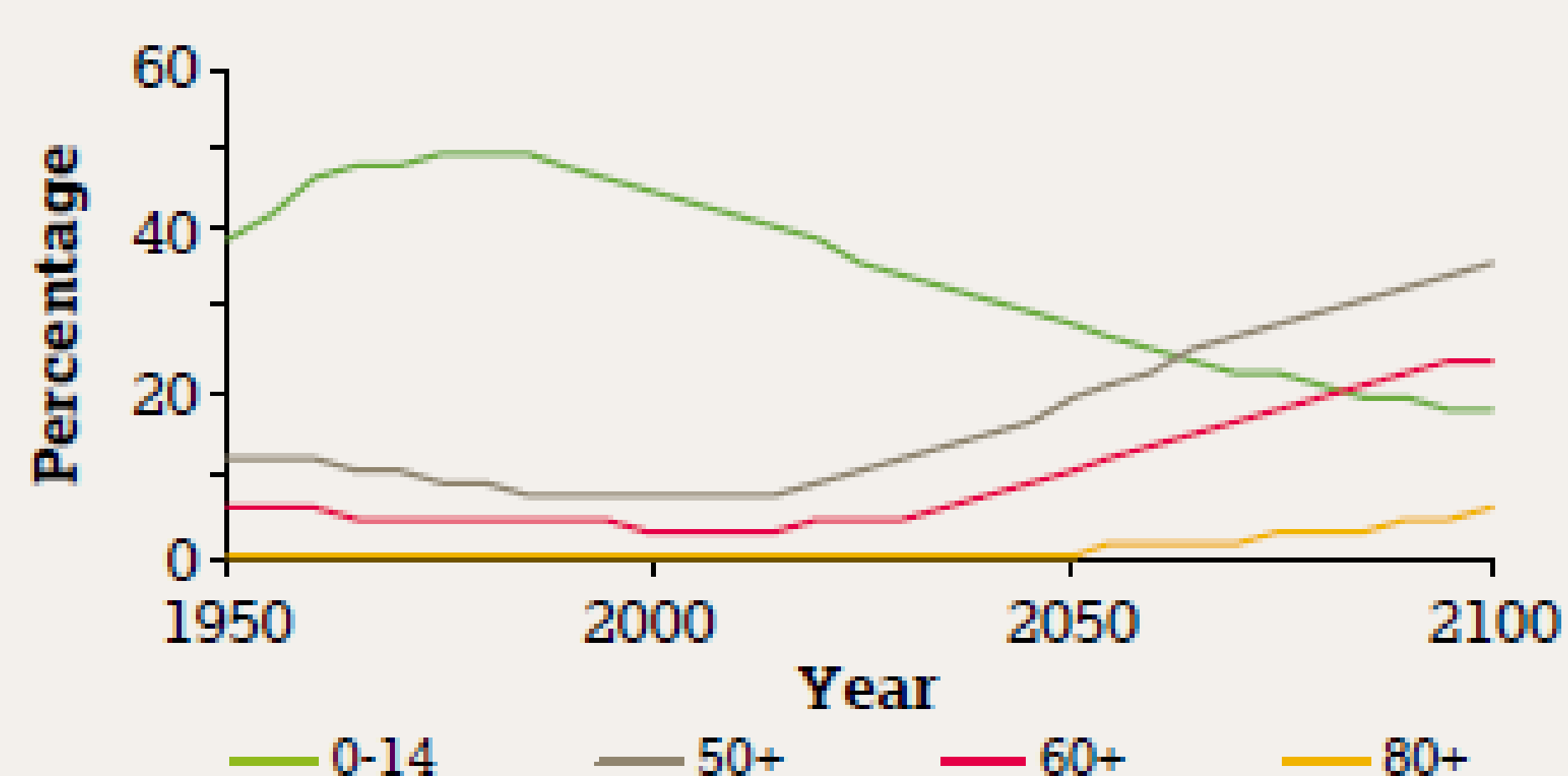
- Desk Review using Google Scholar, CLIO, and JSTOR to identify potential articles, papers and government documents.
- A search string was not developed but target phrases and relevant key words guided the search.
- Identified sources were narrowed down by reading the abstract and selecting the most relevant and applicable for inclusion.



## ECONOMIC AND GEOGRAPHIC DISPARITY IN HEALTHCARE ACCESS

- 75% of Kenyans live in rural areas yet the majority of health facilities are in urban areas<sup>1</sup>.
- 36% of people live below the poverty line and the Per Capita GDP is Ksh. 39970<sup>2</sup>.
- Per capita OOP Health Expenditure rose to \$52.5 in 2015<sup>2</sup>.
- Use of health care services is inequitable and hospitals services are increasingly pro-rich.
- More than half of the Older Members of Society live in absolute poverty<sup>3</sup>.

Figure D1: Population structure in Kenya

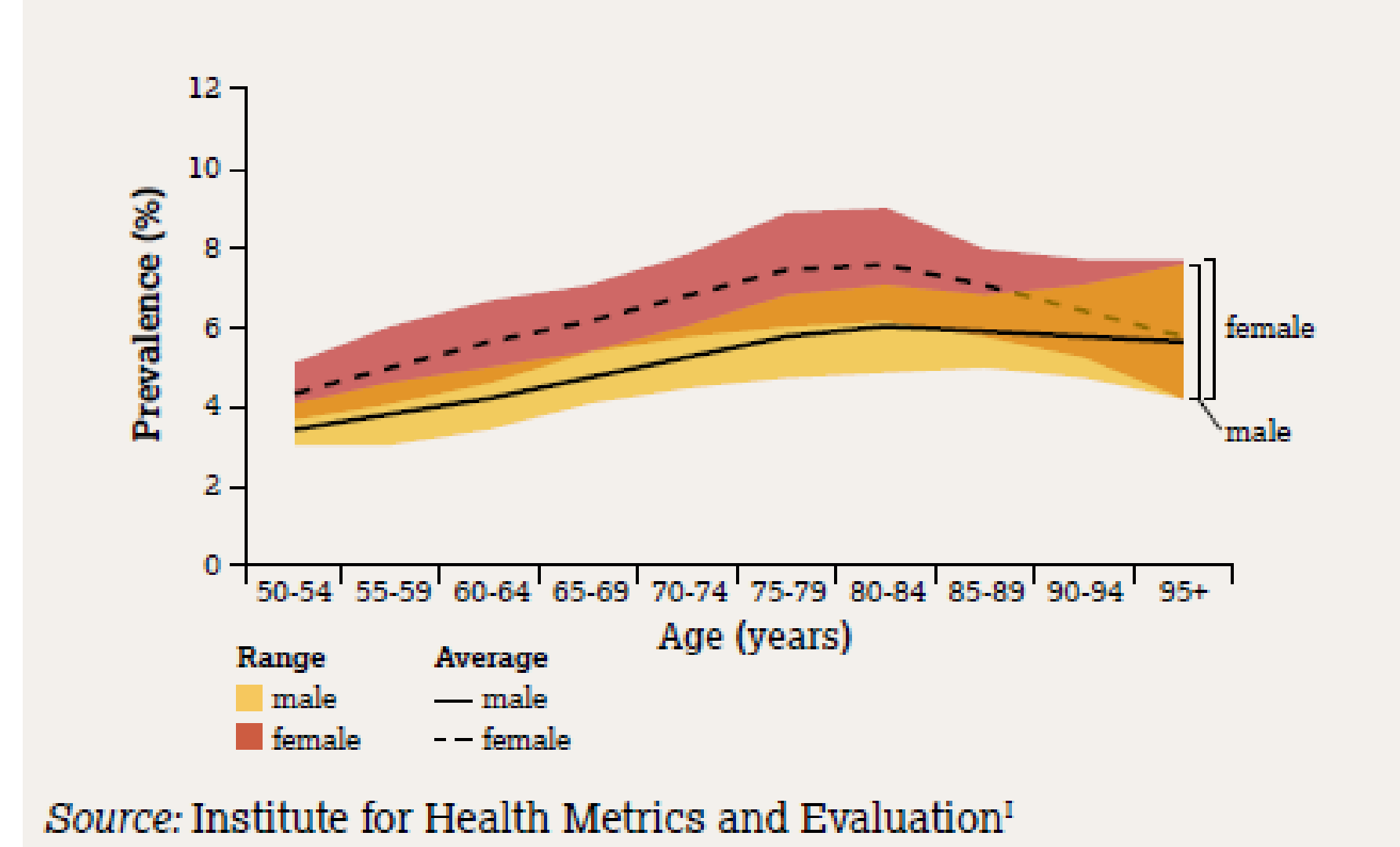


Source: United Nations, Department of Economic and Social Affairs, Population Division<sup>c</sup>

## HIGH PREVALENCE AND BURDEN OF DISEASE

- Combined Mental Illness prevalence of about 4%<sup>4</sup>.
- 56.3% of outpatients consulting their general practitioner presented one or more psychiatric disorders<sup>5</sup>.
- Affective, Anxiety and Somatoform disorders most prevalent<sup>5</sup>.
- Women have higher levels of Common Mental Disorders compared to men at any household income level<sup>6</sup>.
- Prevalence of depressive disorders is 4.4% and 3.1% for Anxiety disorders and attribute to 8.3% and 2.9% of total YLD respectively<sup>7</sup>.
- Multimorbidity occurred 10-15 years earlier in people living in deprived areas<sup>8</sup>.

Figure D5: Prevalence of major depressive disorders in Kenya, 2016



Source: Institute for Health Metrics and Evaluation<sup>1</sup>

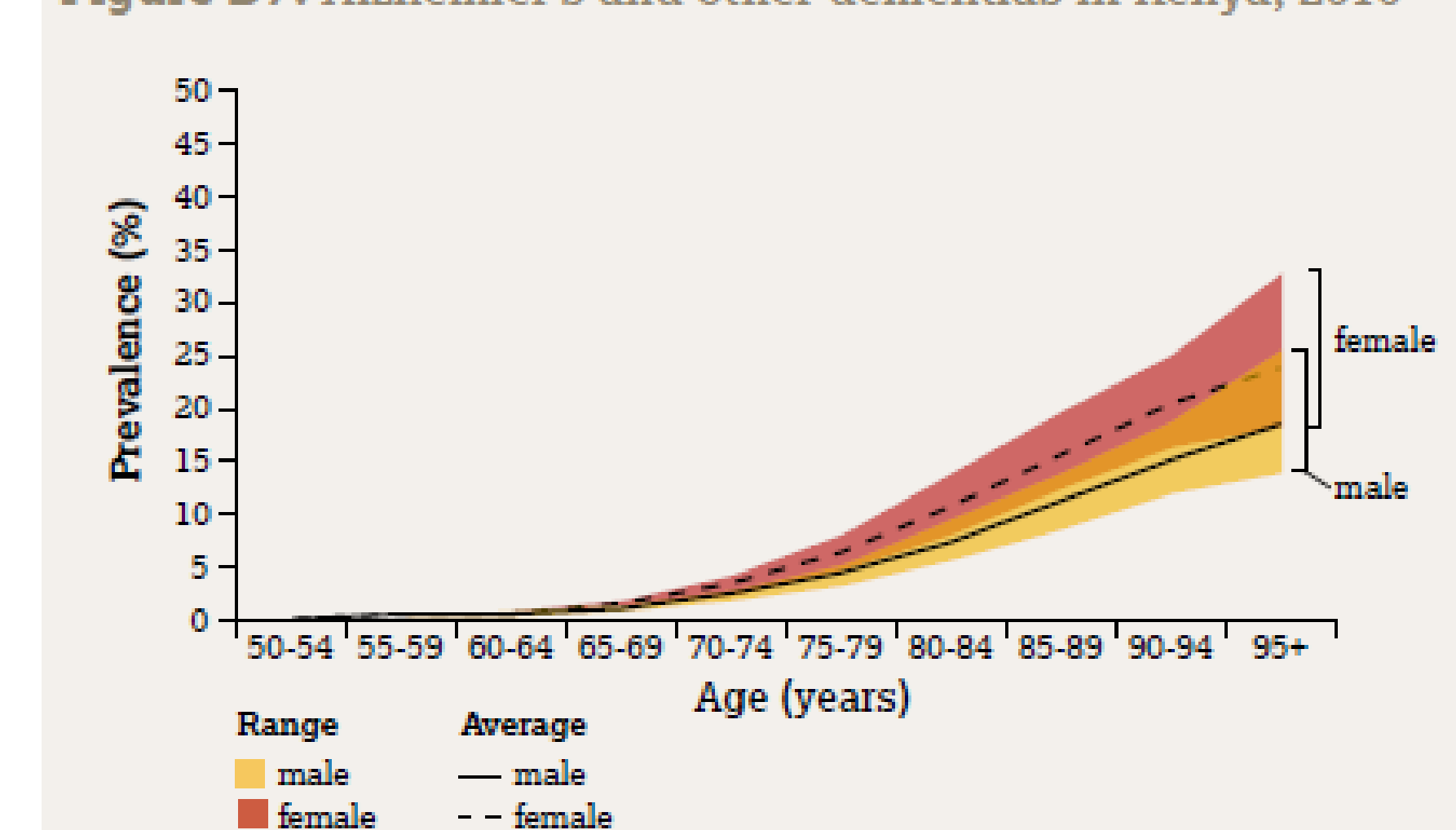
## SHORTAGE OF MENTAL HEALTH FACILITIES

- Chiromo is a 30-bed private psychiatric hospital in Nairobi and it is one of the largest of its kind in East Africa<sup>9</sup>.
- Public psychiatric patients are attended by the 600-bed Mathari psychiatric hospital also in Nairobi and seven provincial and six district hospitals with about 20 beds each across the country<sup>9</sup>.
- There are only 35 registered rehab centers and only 3 are public<sup>9</sup>.

## DEMENTIA IN KENYA

- Prevalence is similar for both men and women under the age of 70<sup>2</sup>.
- Dementia affects women aged 70+ more than men of the same demographic<sup>2</sup>.

Figure D7: Alzheimer's and other dementias in Kenya, 2016



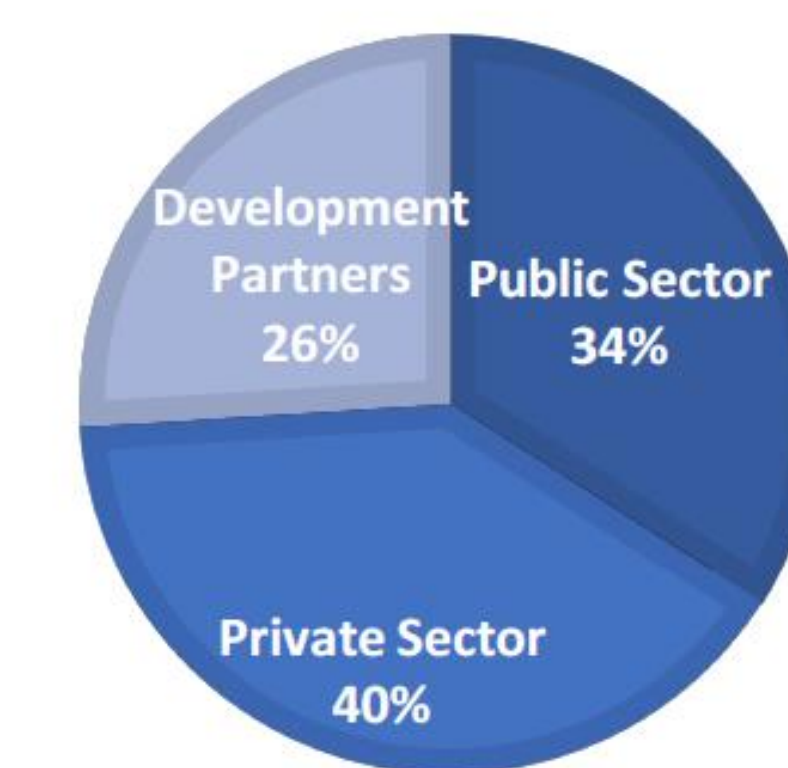
Source: Institute for Health Metrics and Evaluation<sup>9</sup>

## REGRESSIVE HEALTHCARE FINANCING SYSTEM

- Rising income is matched with a falling fraction of income being paid to the healthcare system<sup>10</sup>.
- Government allocations account for only 1/3 of the Total Health Expenditure<sup>9</sup>.
- User fees contributed to increasing out of pocket expenditure and decreasing service use<sup>10</sup>.
- Wages contributed to about 70% of public spending on health in 2015-2016<sup>11</sup>.
- Mental Health accounts for less than 1% of the health budget<sup>9</sup>.
- Private voluntary health insurance is about 1%, but contributes to 10% of the Total Health Expenditure<sup>11</sup>.

### KENYA TOTAL HEALTH EXPENDITURE 2012/2013

Public Sector Private Sector Development Partners



Graph 1: Kenya Total Health Expenditure 2012/2013

## DISCUSSION

- Competing priorities include infectious disease, malnutrition, unsafe drinking water, malaria, and increasing rates of chronic diseases like diabetes and hypertension<sup>4</sup>.
- Higher positive attitudes was the only significant predictor of higher MH knowledge<sup>12</sup>.
- Self-rating of belonging to the community and MH knowledge were the main predictors of positive attitudes; people who valued belonging in the community did not want to jeopardize their social status by associating with people with mental illness<sup>12</sup>.
- Focus on psychosis has caused signs of depression and anxiety to not be recognized as mental illness<sup>12</sup>.
- Non-profit organizations are the most promising stakeholders in the effort to improve mental health.

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