

Better financing for mental healthcare

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In 2008, the EU officially recognised mental health is a human right, while describing the overall level of mental health and well-being in Europe as a key resource for its success as a knowledge-based society and economy.



Good mental health means learning, working and participating in society. Unfortunately, mental disorders are still on the rise in the EU, with tens of millions of sufferers representing first and foremost an immeasurable human tragedy, but also vast burden on healthcare resources.

The EU-funded project REFINEMENT ('Financing systems effects on the quality of mental health care in Europe') is conducting the first-ever comprehensive overview of the relationship between the financing and the outcome of mental healthcare in Europe.

Led by researchers at the University of Verona and spanning nine European countries, the project brings together an experienced team of health economists, mental health service researchers and public health specialists.

They want to know how the goals of high quality, equity, efficiency and better long-term care can be achieved through combinations of public funding, social and <u>private health insurance</u> and out-of-pocket payments.

They first had to assess the different systems of financing and different performance measures of mental healthcare in different European countries.

Although the project has not yet completed its work, some key results have already been produced, including a report on the project's systematic review of financing models. The review encompasses both conventional and more innovative financing models for healthcare in general and for mental healthcare in particular.

Equity and efficiency concerns were also taken into account, including reimbursement mechanisms, different contractual arrangements, resource allocation mechanisms and consumer-directed payments.



Among its preliminary findings, REFINEMENT reports that mental healthcare service delivery and quality seem to be influenced to a greater degree than other healthcare services by both financial and non-financial incentives.

Also, it appears that empirical studies of the efficiency of mental health service delivery are less frequently performed than studies of services delivered by general hospitals, nursing homes and primary healthcare units. The project has also produced an atlas of mental healthcare in the nine REFINEMENT countries (Italy, Austria, UK, Spain, Finland, Norway, France, Estonia and Romania).

Project partners believe the results of their work will help European policy makers and care providers to understand the complexity of <u>financing</u> the mental healthcare system, including primary and social care services in different national and community settings.

The REFINEMENT project has received EUR 3 million in EU funding and will run through to December 2013.

More information: REFINEMENT website www.refinementproject.eu

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