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Financing mental health care in Europe

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Abstract

Background: Some of the most heated discussions about health policy concern financing and the funding base for services. How have west European countries approached the financing of their mental health systems?

Aims: To describe the financing arrangements for mental health care in 17 European countries, and to identify the consequences for system efficiency, access and development.

Method: A structured questionnaire was completed by partners in the Mental Health Economics European Network (MHEEN) to describe funding levels and financing arrangements in their countries. Responses were interpreted in the context of the wider literature on health care financing.

Results: All participating countries are committed to collective pre-payment modes of financing of health care in general, and mental health care in particular. However, there is growing reliance on voluntary (private) health insurance, at the margins at least, with implications for targeting and equity. The movement of some support responsibilities

into social care and housing sectors could further shift funding burdens onto individuals and families.

Conclusions: Europe's long-term commitment to social solidarity and mutuality must not be threatened by changes to funding arrangements that could undermine recent efficiency and equity achievements in mental health systems. Efforts to contain health care expenditure may have adverse consequences for mental health care access and utilization.

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