

IIMHL Match - Financing and Economic Modelling to Incentivize Better Mental Health Outcomes

Notes from the match

The match took place on June 28-29th 2018, in Stockholm. Participants: Karla Bergquist (NZ), Tomas Bokström (SE), Inna Feldman (SE), Rasmus Höjbjerg Jacobsen (DK), Catherine Lourey (AU), David McDaid (UK), Shari McDaid (IE), Camilla Nystrand (SE), Mattias Persson (SE), Dita Protopopova (CZ), Mirjam Stender (NL), Elin Vimefall (SE)

General theme

Discussions centred on how economic modelling, inter sectoral outcomes and operational models for financing can drive investment and resource allocation for better mental health outcomes. Processes and experiences of de-institutionalisation of mental health services was also covered in the discussion.

Concrete modelling work was presented from the English, Danish and Swedish contexts. Common for the models was the aim to assist decision makers in visualising potential benefits (both social and financial) of investing in prevention and early intervention. A list of suggested outcomes which are not only associated to mental health was produced and the issue of how to present a business case for treasury/financing departments in order to highlight the connection between mental health and other sectors was also discussed.

Some conclusions from the discussion

To achieve a systematic approach to informing policy and connect mental health to the wider development of a society that promotes health and well-being, a holistic view of the different drivers for change are necessary. The many different topics and perspectives that was raised in the match reflected this in a good way.

It seems as economic modelling can be a useful tool to visualise the potential of investing in interventions and services both on a macro and micro level and that there are already quite a few examples of such models. As the evidence base is growing and more data is analysed and put to use in modelling, development can be expected to continue.

Economic models should be complemented by an approach where the inter sectoral perspective is highlighted. This can be done for instance by forming alliances with other sectors, ideally defining as many sector specific benefits as possible, and by emphasising a public health perspective. It is also necessary to address capacity and competence issues in organizations on how to form business cases and in the next step implement interventions and services. Another factor is to find ways of incentivising systems to use evidence and the case for investment to really change practises towards

better outcomes. The examples of Social Impact Bonds and Social Outcomes Contracts to clarify intervention and incentives models were lifted as cases where this is tested.

There may be a case for reviewing planning documents and policies already formulated in different contexts, for example as concerns de-institutionalisation, to make best use of cumulative knowledge and with one goal being to try to define what does high quality care means and what do we believe are the current costs of providing this.

There is a collection of outcomes that are closely connected to mental health and well-being, but which are also useful for a more holistic assessment of how society works for individuals in different circumstances of life. The workshop identified a preliminary list of such outcomes. More work on definitions and linking outcomes between short and long term as well as to costs (when possible) is needed.

The figure below tries to summarize some of the content of the workshop and to structure the topics in a high level logical framework. On the left-hand side of the figure a set of contextual factors and resources for input are listed. The top circle in the middle indicates operational (micro level) activities while the lower circle indicates more strategic (macro level) activities. To the right of the figure is the outcomes that activities could seek to improve.

