



Comparison of Healthcare Systems and Public Mental Health in Scandinavia

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Trip Overview & Objectives

- Trip Overview:
 - Spent six weeks abroad: three weeks in Stockholm, Sweden; two in Copenhagen, Denmark; and one in Amsterdam, The Netherlands
- Key Objectives:
 - Understand the impact of common mental disorders, e.g., depression, anxiety and stress, by visiting two hospitals providing mental health care
 - Assess the extent of stigmas, and challenges to timely screening of mental illnesses
 - Explain the organization and financing of the Danish and Dutch healthcare systems

Healthcare System: Denmark

- National government provides block grants from tax revenues to fund healthcare services in individual municipalities and regions
- Doctors in public hospitals are salaried, patients cannot choose freely among doctors, and doctors do not need malpractice insurance
- Characterized by trust in fundamental institutions, low corruption, and high political stability

Healthcare System: Netherlands

- Decision-making authority is placed on GPs since they need to form their decisions based on what is best for the patient *and* the healthcare system
- People are required to buy either public or private insurance, and insurers are required to accept all individuals
- Public and private health insurances co-exist

Mental Health: Sweden

- Stockholm Region Psychiatric Hospital
 - Psychiatric doctors have balanced work-life schedules and feel safe working with patients
 - Doctors focus providing care based on prevention and fixing the "root cause" of illness

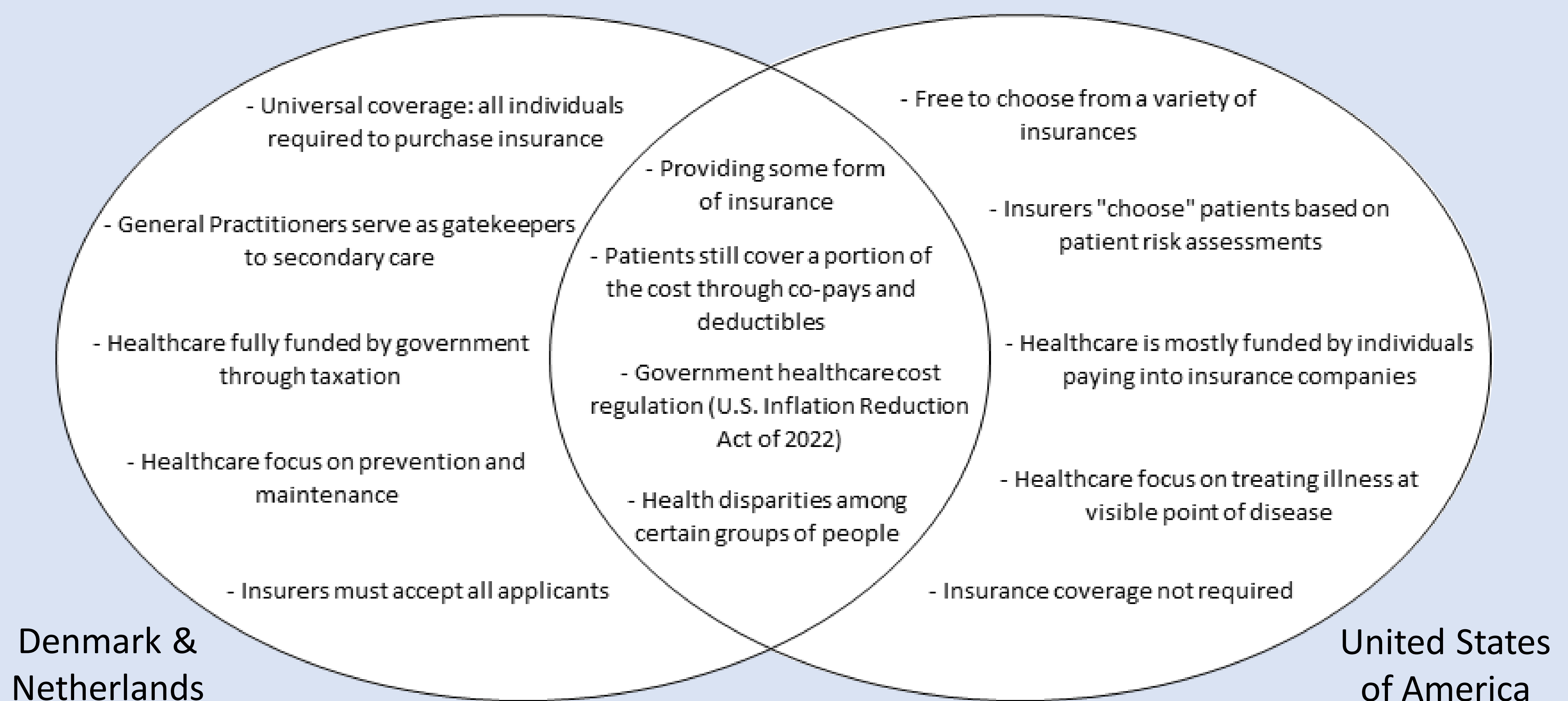


- Karolinska Institute

- Observed Sweden's National Patient Register (NPR), a national database that contains information on all care services provided



Comparison of U.S. and Scandinavian Healthcare Systems



Personal Takeaways

- The U.S. needs to address many challenges before universal healthcare can be achieved, including expanding insurance coverage
- People in Scandinavian countries are individualistic, yet they collectively "take care of each other" in ways which hold their healthcare systems together
- It is possible to be a specialty doctor and live a low-stress, balanced, and happy life—as I observed in Sweden