



## Sweden

### GENERAL INFORMATION

Sweden is a country with an approximate area of 450 thousand square kilometers (UNO, 2008). The population is 9,293,026 and the sex ratio (men per hundred women) is 99 (UNO, 2009). The proportion of the population under the age of 18 years is 20% and the proportion above age 60 is 18% (UNO, 2009). The life expectancy at birth is 79 years for males and 83 years for females (UNO, 2005-2010). The healthy life expectancy at birth is 72 years for males and 83 years for females (UNPD, 2010). The country is in the high income group (based on 2010 World Bank criteria). The total expenditure on health as a percentage of gross domestic product is 9.77% and the per capita government expenditure on health (PPP int. \$) is \$2,583.0 (WHO, 2006). The suicide rate for males is 18.1 per 100,000 population and for females is 8.3 per 100,000 population. In Sweden, neuropsychiatric disorders are estimated to contribute to 35.6% of the global burden of disease (WHO, 2008).

### GOVERNANCE

An officially approved mental health policy exists and was approved, or most recently revised, in 2010. Mental health is also specifically mentioned in the general health policy.

A mental health plan exists and was approved or most recently revised in 2010. The mental health plan components include:

- Timelines for the implementation of the mental health plan.
- Funding allocation for the implementation of half or more of the items in the mental health plan.
- Shift of services and resources from mental hospitals to community mental health facilities.
- Integration of mental health services into primary care.

Dedicated mental health legislation exists and was initiated or most recently revised in 2009. Legal provisions concerning mental health are also covered in other laws (e.g., welfare, disability, general health legislation etc.).

Note: Health expenditures are decentralized and are channelled through the individual counties in Sweden. Mental health expenditures are divided equally between in- and out-patient services.

### FINANCING

Mental health expenditures by the government health department/ministry are 10.0% of the total health budget. Mental hospital expenditures are not available.

### MENTAL HEALTH CARE DELIVERY

#### Primary Care

Prescription regulations authorize primary health care doctors to prescribe and/or to continue prescription of psychotherapeutic medicines. In contrast, the department of health does not authorize primary health care nurses to prescribe and/or to continue prescription of psychotherapeutic medicines. Similarly, official policy does not permit primary health care nurses to independently diagnose and treat mental disorders within the primary care system.

Data collected in 2011

UN = information unavailable, NA = item not applicable

It is unknown whether the majority of primary health care doctors and nurses have received official in-service training on mental health within the last five years. Officially approved manuals on the management and treatment of mental disorders are available in the majority of primary health care clinics. Official referral procedures for referring persons from primary care to secondary/tertiary care exist as do referral procedures from tertiary/secondary to primary care.

## Mental Health Services

### Availability of mental health facilities

	Total number of facilities/beds	Rate per 100,000 Population	Number of facilities/beds reserved for children and adolescents only	Rate per 100,000 population
Mental health outpatient facilities	UN	UN	UN	UN
Day treatment facilities	UN	UN	UN	UN
Psychiatric beds in general hospitals	3,244	34.91	157	1.69
Community residential facilities	UN	UN	UN	UN
Beds/places in community residential facilities	UN	UN	UN	UN
Mental hospitals	0	0.00	NA	NA
Beds in mental hospitals	NA	NA	NA	NA

Note: The forensic facilities are sometimes located in separate areas sometimes in general hospitals. Number of beds in forensic facilities are 1113, they are not included in the number of psychiatric beds. Number of admissions to forensic psychiatry (A 404, B56, and C 2) are not included in the number of admissions to psychiatric beds.

### Access to care

	Rates per 100,000 population)	Females (%)	Under age 18 (%)
Persons treated in mental health outpatient facilities	2,683.85	47%	13%
Persons treated in mental health day treatment facilities	UN	UN	UN
Admissions to psychiatric beds in general hospitals	988.59	43%	4%
Persons staying in community residential facilities at the end of the year	UN	UN	UN
Admissions to mental hospitals	NA	NA	NA

Long term care in mental hospitals (% of persons staying):

Less than 1 year	NA
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Data collected in 2011

UN = information unavailable, NA = item not applicable

More than 1 and less than 5 years	NA
More than 5 years	NA

## HUMAN RESOURCES

### Workforce and training

	Health professionals working in the mental health sector Rate per 100,000	Training of health professions in educational institutions Rate per 100,000
Psychiatrists	3.55	1.32
Medical doctors, not specialized in psychiatry	1.98	10.66
Nurses	28.9	42.55
Psychologists	0.93	4.30
Social workers	18.42	18.42
Occupational therapists	0.54	4.11
Other health workers	59.83	NA

### Informal human resources (Family and User Associations)

	User	Family
Present in the country?	Yes	Yes
Number of members	50000	UN
Participation in the formulation/implementation of policy/plan/legislation?	frequently	frequently

Note: Work force data applies to inpatient services only. The number of trained psychiatrists reported above refers to the number of all licensed specialists in the country. Some of them have not had their training in Sweden. Together, there are 15 User and Family associations in Sweden.

## MEDICINES

Expenditures for medicines for mental and behavioral disorders at country level

Type of Medicines	Expenditures at country level per year and per 100,000 population (in USD)
All the psychotherapeutic medicines <sup>1</sup>	3,661,677
Medicines used for bipolar disorders <sup>2</sup>	138,588
Medicines for psychotic disorders <sup>3</sup>	1,497,271
Medicines used for general anxiety <sup>4</sup>	818,616

<sup>1</sup> N03AG01, N05A, N05B, N05C, N06A

<sup>2</sup> N03AG01, N05A, N05B, N05C, N06A

<sup>3</sup> N05A (excluding N05AN)

<sup>4</sup> N05B & N05C

Data collected in 2011

UN = information unavailable, NA = item not applicable

Medicines used for mood disorders <sup>5</sup>	1,207,202
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Note: Value added tax (VAT) is excluded from the above data.

## INFORMATION SYSTEMS

	Data on number of people/ activities are collected and reported	Data on age and gender are collected and reported	Data on patient's diagnosis are collected and reported
Persons with mental disorders treated in primary health care	No	No	No
Interventions (psychopharmacological and psychosocial) delivered in primary health care for people with mental disorders	No	No	No
Persons treated in mental health outpatient facilities	Yes	Yes	Yes
Contacts in mental health outpatient facilities	Yes	Yes	Yes
Persons treated in mental health day treatment facilities	No	No	No
Admissions in general hospitals with psychiatric beds	Yes	Yes	Yes
Admissions in mental hospitals	NA	NA	NA
Days spent in mental hospitals	NA	NA	NA
Admissions in community residential facilities	No	No	No

Note: A specific report focusing mental health activities in the has been published by the Health Department or any other responsible government unit in the last three years.

<sup>5</sup> N06A

Data collected in 2011

UN = information unavailable, NA = item not applicable