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# Evolution of public and non-profit funding for mental health research in France between 2007 and 2011



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#### **KEYWORDS**

Mental health research; Funding; Burden; Policies

#### Abstract

Since 2007, actions have been undertaken in France to foster mental health research. Our objective was to assess their utility by estimating the evolution of public and non-profit funding for mental health research between 2007 and 2011, both in terms of total funding and the share of health research budgets. Public and non-profit funding was considered. Core funding from public research institutions was determined through a top-down approach by multiplying their total budget by the ratio of the number of psychiatry-related publications to the total number of publications focusing on health issues. A bottom-up method was used to estimate the amount of project-based grants and funding by non-profit organizations, which were directly contacted to obtain this information. Public and non-profit funding for mental health research increased by a factor of 3.4 between 2007 and 2011 reaching €84.8 million, while the share of health research funding allocated to mental health research nearly doubled from 2.2% to 4.1%. Public sources were the main contributors representing 94% of the total funding. Our results have important implications for policy makers, as they suggest that actions specifically aimed at prioritizing mental health research are effective in increasing research funding. There is therefore an urgent need to further undertake such actions as funding in France remains

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particularly low compared to the United Kingdom and the United States, despite the fact that the epidemiological and economic burden represented by mental disorders is expected to grow rapidly in the coming years.

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#### 1. Introduction

Worldwide, it is estimated that one in three individuals will experience a mental disorder. In addition, these disorders represent the second cause of loss of quality of life just after cardiovascular diseases (World Health Organization, 2005) and they are responsible for increased somatic comorbidities and mortality (Viron and Stern, 2010). In Europe, 38.2% of the population suffer from mental illnesses each year (Wittchen et al., 2011) and France is among the countries with the highest prevalence of mood disorders, percentage of individuals suffering from psychological distress, consumption of psychotropic drugs and suicide rate in the European Union (European Commission, 2004; Organization for economic co-operation and development, 2011). It is also estimated that mental disorders account for 14% of the overall disease burden in France (World Health Organization, 2012). Moreover, the global burden of mental illnesses seems to increase worldwide, in terms of raw incidence, prevalence, as well as total burden of diseases, and mental disorders are expected to represent the main cause of disability by 2020 (Murray et al., 2012; Vos et al., 2015; World Health Organization, 2002). The World Health Organization Mental Health Action Plan 2013-2020 has therefore underscored the need to generate new knowledge through research to ensure that policies and actions are based on evidence and best practices (World Health Organization, 2013).

Nevertheless, mental disorders currently do not seem to be a priority for public policy makers with little support expressed by political leaders, a limited number of policies enacted to address their specific issues, and insufficient resources allocated both for the care of those disorders and to related research (Kingdon, 2006; Tomlinson and Lund, 2012). In France, research on mental disorders has been estimated to be relatively underfunded: a first study showed that the share of public and non-profit funding allocated to mental health research in 2007 represented only 2% of health research budgets, compared to 7% in the United Kingdom and 16% in the United States (Chevreul et al., 2012). Indeed mental health research in France is particularly under-developed and does not attract sufficient numbers of strong prominent researchers and clinicians (Gorwood, 2009). However, the political will to encourage mental health research and researchers has been apparent in France since 2007. Two successive national action plans for psychiatry and mental health underscored the necessity to develop adequate research (Ministère de la santé et de la cohésion sociale, 2005; Ministère du travail, de l'emploi et de la santé, 2012). Furthermore, a network for scientific collaboration in mental health, the FondaMental foundation (www.fondation-fondamental.org), was created in 2007 by the French Ministry of Higher Education and Research to accelerate the development of mental health research in France through cooperative networks between basic neuroscience and expert centers to foster translational research, to communicate with policy makers and to raise private funds for financing mental health research. In addition, specific public calls for proposals to fund mental health research were developed.

In order to assess the effectiveness of those actions, the objectives of our study were to estimate the evolution of public and non-profit funding for mental health research in France between 2007 and 2011, both in terms of total funding and the share of health research budgets.

#### 2. Experimental procedures

#### 2.1. Scope of the study

We used the scope and method first defined for the 2007 study assessing the French mental health research funding level (Chevreul et al., 2012) as the basis for measuring such funding for 2009 and 2011 in order to ensure comparability.

Our study was restricted to public and charitable funding allocated to mental health research. Private sources of funding such as pharmaceutical industries were not included in the analysis for two reasons. First, their investment in research is mostly global and cannot be allocated to a specific country. In addition, they consider information on research budgets to be proprietary thus they do not wish to communicate such data. Moreover, private funds invested in mental health research are estimated to be both relatively low and decreasing, as the pharmaceutical industry has withdrawn from the major areas of neuroscience research and in particular psychiatry-related research (Kingdon, 2006; Nutt and Goodwin, 2011).

In considering the mental health field, we included mental disorders from the chapter V of the International Classification of Diseases, tenth revision (ICD-10) (World Health Organization, 2010) except for intellectual disability and dementia such as Alzheimer's disease (Haro et al., 2014), which receive specific care that differs from psychiatric care and have dedicated research funding programs.

#### 2.2. Public funding

Public funding includes both core budgets attributed to research institutions and public project-based grants.

#### 2.3. Core funding

Core funding refers to financial support that covers the basic organizational and administrative costs of an organization. This includes salaries of permanent staff, facilities, equipment, communications, and the direct expenses of day-to-day work. In order to determine how much of such funding is allocated to mental health research, we identified public research institutions conducting health research in France. They include public institutions for sciences and technologies, such as the French National Institute of Health and Medical Research (INSERM), the French National Center for Scientific Research (CNRS) and the French Atomic Energy and Alternative Energies Commission (CEA), as well as

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