Title: How far country context influences different capability domains in vulnerable mental health populations? Comparison between Hungary and the Austrian federal state of Carinthia.

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ABSTRACT

Background: The impact of living in particular socio-economic, environmental and cultural contexts on quality of life and wellbeing can be considerable. Recent research showed that life satisfaction highly depends on factors beyond wealth and income equality and is determined by feeling of control of one’s live and freedom of choice. While the relationship between various societal conditions have been extensively researched and several frameworks assessing differences between the countries in terms of quality of life and wellbeing exist, little is known about the differences in personal capabilities across countries. Furthermore, such comparisons are often presented at the general population level, leaving a gap for an investigation of capabilities/wellbeing in vulnerable populations, such as people suffering from mental disorders. This study explores the differences in the level of different capability domains between the residents in Hungary and Austrian federal state of Carinthia suffering from mental disorders.

Methods: Capabilities were assessed with the Oxford Capability questionnaire-Mental Health (OxCAP-MH, score range:0-100) in two samples: in a sample from the general population in Hungary with a Patient Health Questionnaire (PHQ9) score ≥10 (n=419) (data collected in August 2021), and a sample of mental health patients (n=468) in the Austrian federal state of Carinthia (data collected between 3rd Quarter 2020 and 1st Quarter 2022). Propensity score matching was used to construct two patient cohorts that are comparable in terms of demographic characteristics (age, gender, education level, marital status), health-related quality of life (EQ-5D-5L, score range:-0.848-1) and self-assessed health (EQ-VAS, score range:0-100). Linear regressions investigated factors associated with the overall capability score in both countries.

Results: Before matching, respondents in Hungary showed on average higher score of self-assessed health, and on average lower capability score compared to the Austrian sample. After matching, a large gap in the capability score was observed between the two samples with Hungarian respondents having a score lower by roughly 10 points, compared to the matched Austrian sample. The largest differences between the two samples were found in the domains “Suitable accommodation”, “Appreciating nature”, “Feeling safe”, “Respecting and valuing people”, “Freedom of expression”, and “Likelihood of assault” with Hungarian participants showing significant
reductions in capabilities in these domains. Further analysis revealed that, while health-related quality of life had a strong association with the capability score in both countries, it had much more prominence in the Austrian sample than in Hungary, suggesting that there are more unobserved or contextual factors beyond health influencing individual capabilities in Hungary as compared to Austria.

**Conclusions:** Our findings suggest that quality of life and health status indicators might not fully describe the wellbeing of people living in a country. From the Sen’s “freedom of choice” perspective, mental health patients in the Austrian state of Carinthia have more opportunities to achieve functionings they have reason to value, compared to their counterparts in Hungary. From the policy perspective, our results point at specific capability domains with largest differences between the two countries. Further analysis should investigate the impact of the Covid-19 pandemic on the observed differences in capabilities in the two samples.