Policy development in health literacy – a European perspective Kristine Sørensen

Konferenz der Österreichischen Plattform Gesundheitskompetenz 23 September 2015, Wien, Austria





Policy development in health literacy – a European perspective



New health challenges



Communicable diseases



Chronic diseases



Mental health problems



Health and well-being



Health literacy



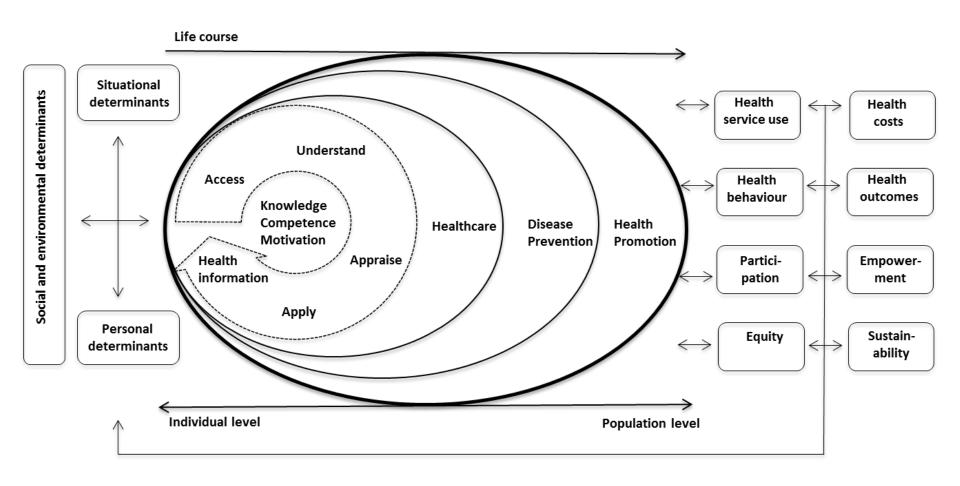
Defining health literacy

Health literacy is linked to literacy and entails people's knowledge, motivation and competences to access, understand, appraise and apply information to take decisions in everyday life

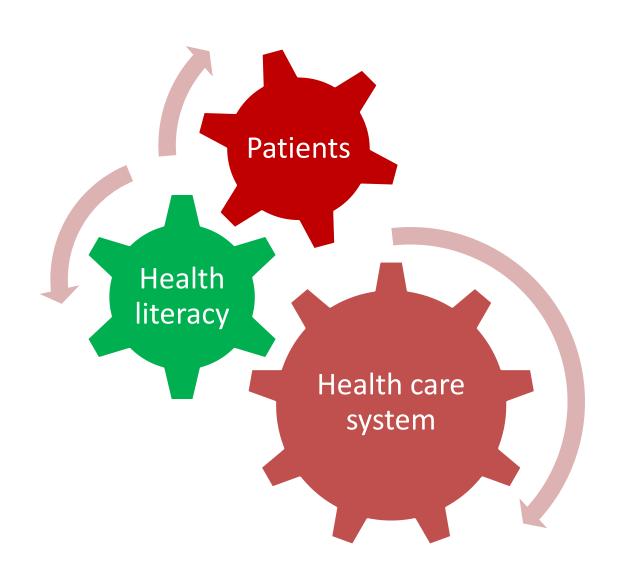
in terms of healthcare, disease prevention and health promotion

to maintain and improve quality of life during the life course.

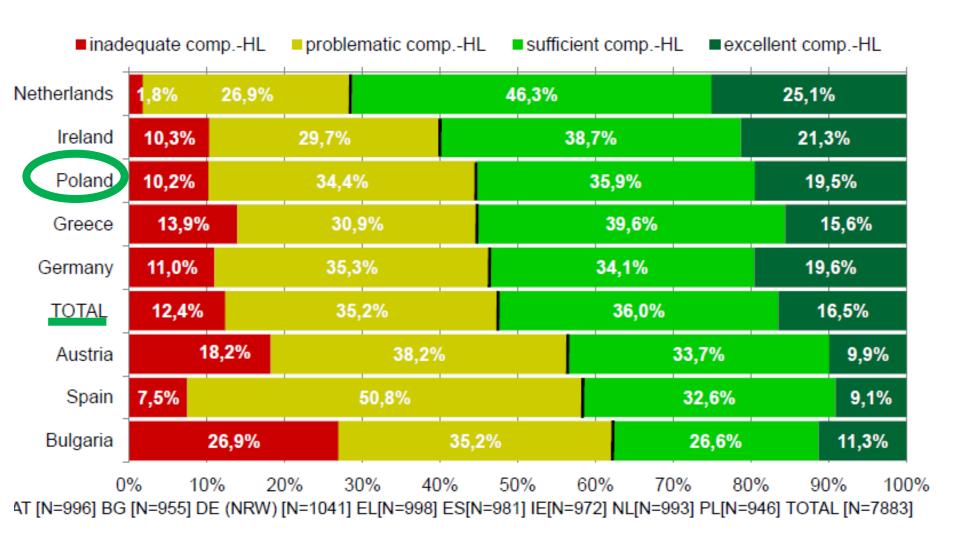
Key drivers for health literacy



Better match, more satisfaction



Health literacy – a neglected European public health challenge



Health literacy on the policy agenda





Study on sound evidence for a better understanding of health literacy in the European Union

Final Report

RfS Chafea/2014/health/01





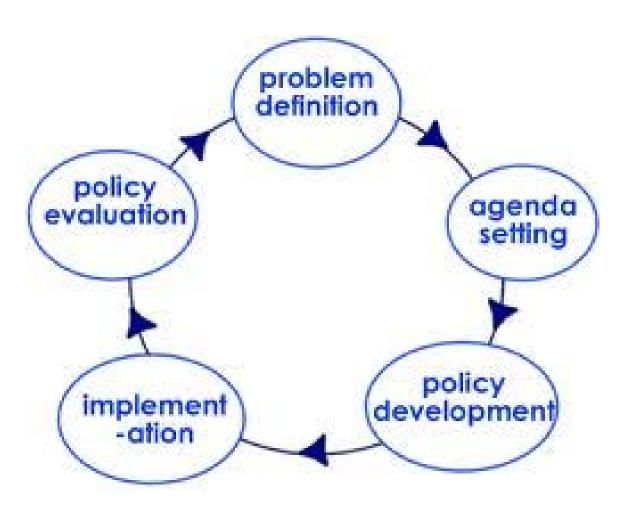


Written by:
Morrique Heijmens (NIVEL)
Ellen Utters (RIVM)
Tamsin Rose (EPHA)
Johen Holstode (NIVEL)
Walter Devillé (NIVEL)
Uts van der Heide (NIVEL/RIVM)
Hendrink Socialesen (RIVM)
Jany Rademakers (NIVEL)

June 2015

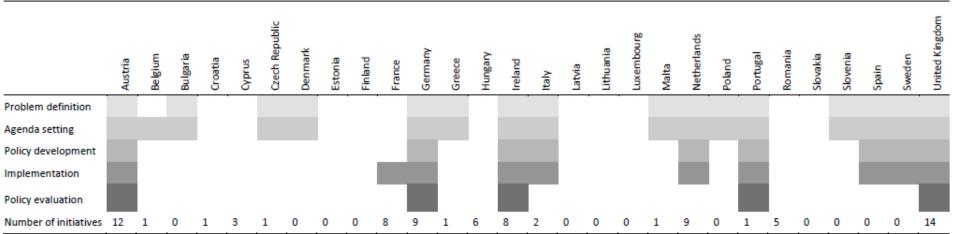


Policy cycle



Health literacy policy implementation





EU policy strategy

EU's Together for Health
 2008-2013



Competences needed for well-being

A core value is <u>Citizens' Empowerment</u>. Healthcare is becoming increasingly patient-centred and individualised, with the patient becoming an active subject rather than a mere object of healthcare. Building on the work on the <u>Citizen's Agenda</u>, Community health policy must take citizens' and patients' rights as a key starting point. This includes participation in and influence on decision-making, as well as competences needed for wellbeing, including 'health literacy'⁸, in line with the <u>European Framework of Key Competences for lifelong learning</u>⁹ e.g. looking at school and web-based programmes.

EN EN

EU health programme

3rd health programme of the European Union 2014-2020

health literacy, to manage their health and their healthcare more pro-actively, to prevent poor health and make informed choices. The transparency of healthcare activities and systems and the availability of Patient empower eliable independent and user-friendly information to optimised. Healthcare practices should be informed by feedback from, and communication with, patients. Support for Member States, patient organisations and stakeholders is essential and should be coordinated at Union level in order to help patients in an effective manner, in particular those affected by rare diseases, to benefit from cross-border healthcare

Patients need to be empowered, inter alia by enhancing

- 1.4. Support cooperation and networking in the Union in relation to preventing and improving the response to chronic Elsasse Including excess of the disease and personnel of the elsasse by sharing knowledge, good practices and developing joint activities on prevention, early detection and management including health literacy and self management). Follow up work on cancer which has already been undertaken, including relevant actions suggested by the European Parenership Action against Cancer.
 - (4) In order to facilitate access to better and safer healthcare for Union citizens: increase access to medical expertise and Improvement of health care in conditions beyond national borders, facilitate the application of the results of research quality and patientles after the improvement of healthcare quality and patient safety through, inter alia, actions contributing to the improvement of health literacy.

Official Journal of the European Union 21.3.2014 EN REGULATIONS REGULATION (EU) No. 282/2014 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL on the establishment of a third Programme for the Union's action in the field of health (2014-2020) and repealing Decizion No 1350/2007/EC (Test with EEA relevance) THE EUROPEAN PARLIAMENT AND THE COUNCIL OF THE of the Member States for the definition of their health policies and the organization and delivery of health services and medical care. SUROFIAN UNION. Having regard to the Treaty on the Functioning of the European Union, and in particular Article 168(5) thereof, (2) Continued effort is required in order to meet the requirements set out in Article 168 TFEU. The promotion of good health at Union level is also an integral part of Thirope 2020: A strategy for smart, Having regard to the proposal from the European Commission, zuztalnable and inclusive growth' ("the Europe 2020 Strategy"). Keeping people healthy and active longer and empowering them to take an active role in managing their health, will have positive overall effects on health, including a reduction of health inequalities, and a positive impact on quality of life, on productivity After transmission of the draft legislative act to the national and competitiveness, while reducing pressures on national budgets. Support for, and recognition of, innovation, which has an impact on health, helps to take up the challenge of sustainability in the health sector in the Having regard to the opinion of the European Economic and Social Committee $(^{1})$, the challenge of nitratinability in the neatm sector in un-context of demographic change; and action to reduce inequalities in health is important for the purposes of achieving 'Inclusive growth'. It is appropriate in that Having regard to the opinion of the Committee of the context to establish the third Programme for the Union's action in the field of health (2014-2020) (the

Acting in accordance with the ordinary legislative procedure (*),

In accordance with Article 168 of the Treaty on the

Functioning of the European Union (TFEU), a high level of human health protection is to be ensured in the defi-nition and implementation of all Union policies and

activities. The Union is to complement and support national health policies, encourage cooperation between Member States and promote the coordination between their programmes, in full respect of the responsibilities

(*) Position of the European Parliament of 26 February 2014 (not yet published in the Official Journal) and decision of the Council of 11 March 2014.

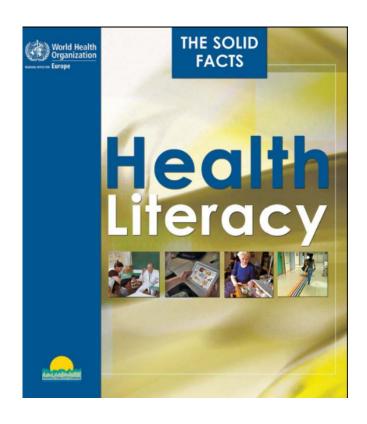
According to the definition of the World Health Organization (WHO), "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infermity." In order to improve the health of the population in the Union and reduce health inequalities, it is essential not to focus only on physical health. According to the WHO, mental health problems account for almost 40 % of years lived with disability. Mental health problems are also wide-ranging, long-Mental nearm procuents are also wise-trapping tong-lasting and a source of discrimination, and contribute significantly to inequality in health. Moreover, the economic critic affects factors determining mental health, as prosective factors are weakened and risk

L 86/1

The previous programmes of Community action in the field of public health (2003-2008) and in the field of health (2008-2013), adopted respectively by Decisions

WHO Europe's policy framework and recommendations





WHO Europe's Health 2020

WHO Europe's Health 2020



Regional Committee for Europe Suby-second season

state, to-colorabe note.

Engagement and empowerment

- 28. Health promotion programmes based on principles of engagement and empowerment offer real benefits. These include: creating better conditions for health, improving health literacy, supporting independent living and making the healthier choice the easier choice. Furthermore, it means making pregnancies safe; giving
- 31. A strategic focus on healthy living for both young and older people is particularly valuable. A broad range of stakeholders can contribute to programmes that support their health, including intergenerational activities. For young people, these can include peer-to-peer education, involvement of youth organizations and school-based health literacy programmes. Integrating work on mental and sexual health is particularly important. For older people, active and healthy ageing initiatives can benefit health and quality of life.

Healthy living



Health 2020: a European policy framework supporting action across government and society for health and well-being







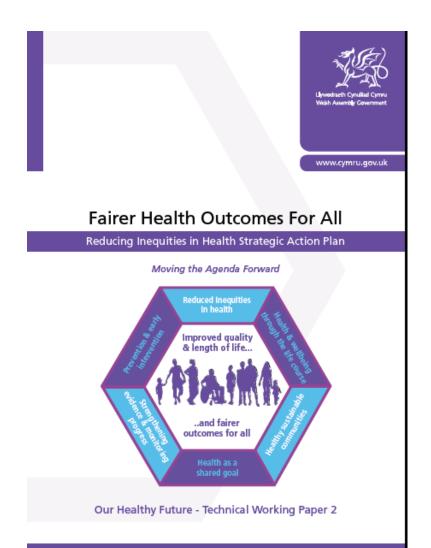




A Healt Literacy Action Plan for Scotland



Wales: scoping study and action area



This plan

In the current economic climate, it is not possible to start a broad range of new initiatives. However, the seven action areas identified for this plan provide a framework for making progress in achieving our vision. These seven areas reflect our principles and are:

- building health into all policies and all policies into health
- giving every child a healthy start
- developing health assets in communities
- improving health literacy
- making health and social services more equitable
- developing a healthy working Wales
- strengthening the evidence base.

Minimum standards for health literacy proposed by Scott K. Simonds, 1974

Let me suggest policy goals for health education — goals to be attained hopefully in this decade:

- National health insurance should be available to all Americans to secure the health care they need, and it should be required that the providers of health care have health education as an integral component of care. They should be reimbursed by the insurance system for provision of health education as a component of that care.
- 2. Hospitals should serve as centers for coordinating total health care and should take a major role in the provision of services for health promotion and health maintenance, including the provision of health education to all who use the hospital or are within its geographic area.
- 3. Minimum standards for "health literacy" should be established for all grade levels K through 12. Those school districts that fall below standard should be provided with Federal aid to develop programs with teachers qualified to teach health education.

In conclusion, it is my belief that health education is on the cutting edge of social responsibility and that the three institutions — health, education, and mass communication — share major responsibility for the forward movement in this field. Policies need to be made and implemented in all these areas, for they would provide mutual reinforcement with the likely end that we will have a healthier population — a population that takes a greater responsibility for protecting and maintaining its own health, that utilizes the health care system as effectively as possible, and that takes an active role in shaping the health care system of the future.

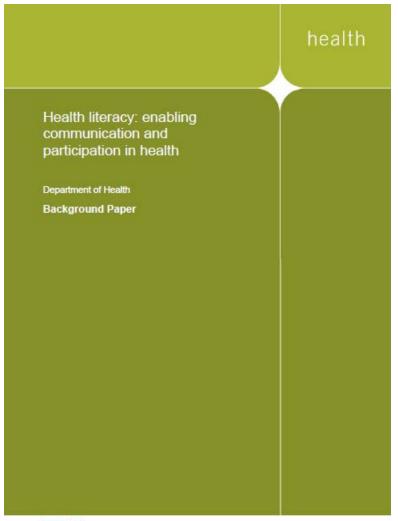
The National Action Plan to Improve Health Literacy

National Action Plan to Improve Health Literacy

"We should address in a sustained manner the problem of health literacy in our Nation with a goal of improving health status witin and across populations".



Health literacy: an action area for Victoria, Australia



Summary

Health literacy is identified as a key priority area in the Victorian Government's Victorian Health Priorities; Framework 2012-2022. Better health literacy improves access to a range of programs to help maintain; good health, manage health better and achieve the best health care service outcomes possible.



European health literacy consensus













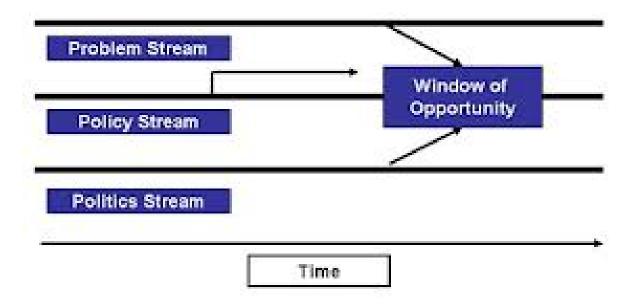


Making health literacy a priority in EU policy

DG SANCO's 2013 Annual Work Plan for the Health Programme emphasises the need to empower patients in the management of chronic diseases, and the importance of "[generating] and [disseminating] health information and knowledge". Moreover, the European Commission's Health Strategy "Together for Health" links health literacy with the core principle of Citizens' Empowerment, highlighting that "healthcare is becoming increasingly patient-centred and individualised, with the patient becoming an active subject rather than a mere object of healthcare".

Kingdon's policy stream model

Figure 3 - Kingdon's Streams Model

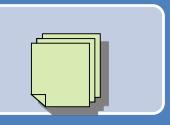


Hindering factors



Confusion about the concept

• Different definitions



Unclear action strategies

- Lack of evidence
- Lack of involved stakeholders



Lack of political involvement

Lack of ownership

Enabling factors



Budget and fundings

- EU sources
- Public and private fundings



Data

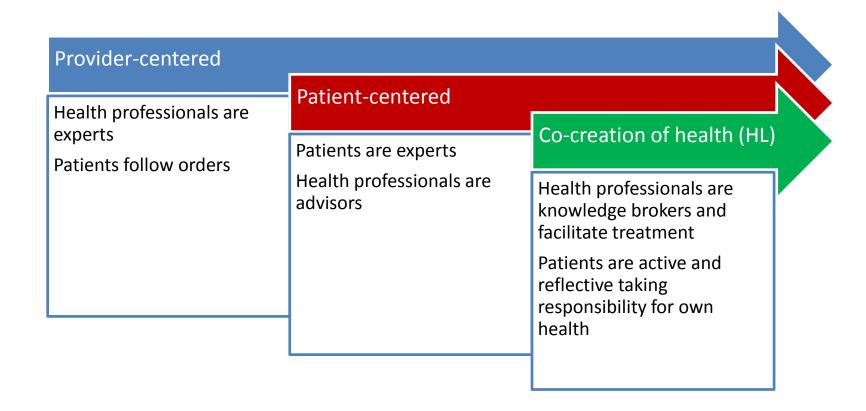
- HLS-EU project: Population Survey
- National studies in target groups



Consultations and partnerships

- Networks
- Multi-stakeholder approach

Paradigm shift



Common values: equal access to health, solidarity and universality



Health literacy policy check-list

Monitoring system

- HLS-EU baseline follow-up
- Regional analysis

Health literate organisations

- Organisational change integrating health literacy in daily routines
- 10 attributes

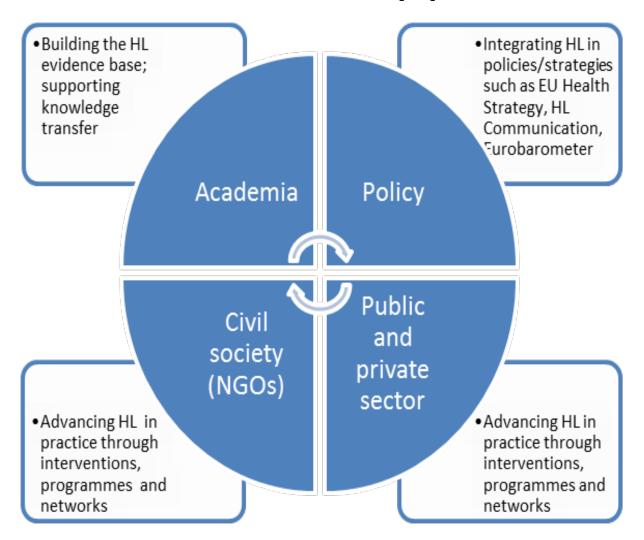
Professional training

- Clear communication, teach-back, informed decision-making etc.
- HL integrated in curriculum

- Patients: Self-management courses
- Citizens: shool and adult learning

Education

Intersectoral approach

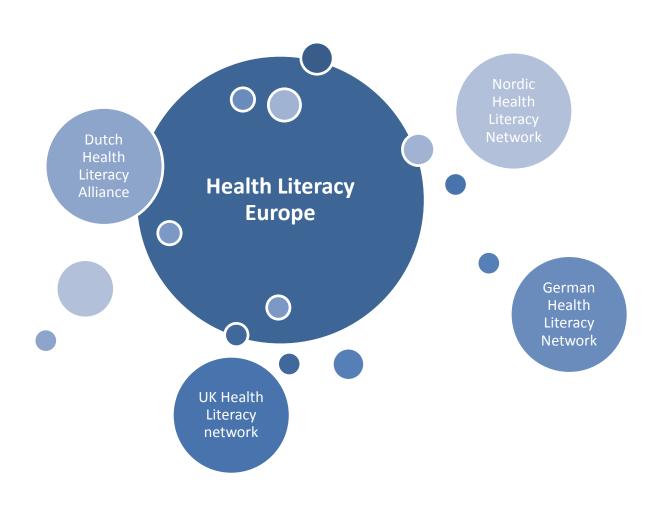


European Health Literacy Conferences





Welcome to the European health literacy community



Thank you!

K.Sorensen@maastrichtuniversity.nl

