



Komiteen for Sundhedsoplysning

frauengesundheitszentrum



careum

GRUNDTVIG LEARNING PARTNERSHIP

Health literacy and health education fostering participation and improving women's and men's health

August 2011 – July 2013

A short report



This project has been funded with support from the European Commission.



Education and Culture DG

Lifelong Learning Programme

SUMMARY

Recent initiatives such as the first European Health Literacy Survey emphasized the relevance of advancing health literacy in all member states. Health literacy and health education are the prerequisites for patients and citizens to fully participate in health care and to communicate on eye level with their health professionals. Health literacy plays a key role in overcoming health inequalities caused by social determinants of health.

This learning partnership fostered health literacy as an important part of life long and continuous education.

The four partnership organizations involved in this project were:

- Frauengesundheitszentrum – Women’s Health Center – Graz, Austria, www.fgz.co.at, Christine Hirtl, christine.hirtl@fgz.co.at, coordinator
- Komiteet for Sundhedsoplysning – Danish Committee for Health Education – Copenhagen, Denmark, www.sundkom.dk, Charan Nelander, cn@sundkom.dk
- Careum Foundation – Zürich, Switzerland, www.careum.ch, Jörg Haslbeck, joerg.haslbeck@careum.ch
- Istituto Superiore di Sanità – National Institute of Health – Rome, Italy, www.iss.it, Murella Della Setta, maurella.dellasetta@iss.it

Four face to face meetings within the respective countries brought together patient representatives and experts from adult education organizations, non-governmental organisations (NGOs), public health and health care institutes from four European countries working on health literacy und health education. The meeting in Copenhagen in April 2012 additionally provided the opportunity to participate in the First European Conference on Patient Empowerment.

The learning partnership helped to increase participants knowledge and competencies on health literacy as a central issue in life long learning. It allowed participating practitioners, researchers and advocacy groups to exchange and discuss their understanding of health literacy and health education as well as to get to an in-depth insight into programs addressing health literacy across Europe. The dialogue also included challenges and strategies advancing health literacy on the respective national levels with colleagues, compare approaches and find solutions.

OBJECTIVES

The Learning Partnership objectives were:

- getting in touch with European adult education organizations, NGOs and public institutions experienced in health literacy;
- discussing different approaches, strategies and policies advancing health literacy across European countries;
- sharing skills, experiences and ideas;
- exchanging and discussing various national target group-specific training programs for improving health literacy;
- strengthening long-term partnerships and networks among European adult education organizations to build a critical mass of stakeholders promoting health literacy among European citizens.

RESULTS

The Learning Partnership was a perfect opportunity to delve into each other's approaches...

- Denmark and Switzerland: National implementation of Stanford's Chronic Disease Self-management Program CDSMP including experiences, data, and perspectives
- Denmark: Programs preventing young people from abusing alcohol and drugs and learning to avoid risky sexual practices, health information apps
- Italy: leaflets and brochures on various health problems, health information campaigns, project to strengthen the competences of women and men living with rare diseases
- Austria: training program to search, find, appraise and apply health information, health information brochures, Austrian health portal www.gesundheit.gv.at

... and to discuss quality criteria for good practice, the relevance of health information for strengthening health literacy, various media to provide people with good quality.

The Learning Partnership also discussed national strategies to improve health literacy:

While Denmark has a leading role in realizing many projects on health literacy the concept has not yet been well defined on the national level. The Swiss Federal Council recently passed “Health 2020”, a strategy providing a solid base to foster health literacy and active patients’ roles in health care. Italy’s national strategy is based on broad evidence and methodically diverse campaigns. Austria will conclude its process of developing national health goals and implementation strategies by the end of 2013, one goal being health literacy.

EUROPEAN ADDED VALUE

The Learning Partnership offered a unique opportunity to getting to know as well as working together with patient representatives and staff of European adult education organizations, NGOs, public health and health care institutions. It established connections between international experts, strengthened existing contacts, and developed new ones among the partners.

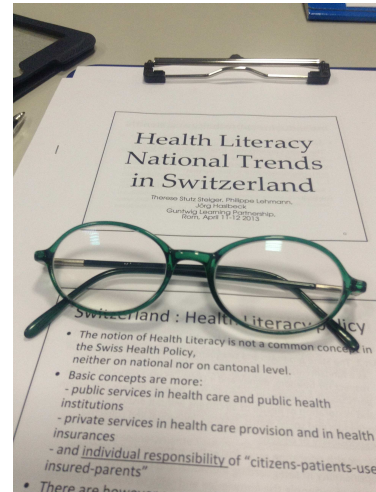
The participants got valuable impulses for their activities in their countries on a national level. Especially the findings of the European Health Literacy Survey and the discussions sharpened the awareness of a common understanding for this issue in Europe as different notions and concepts of health literacy existed within in the group. A participant is quoted as saying “the countries are not at the same level of dealing with health literacy but all are in action.”

The European idea guarantees learning from varying and differing approaches, strategies and models of good practice. It gives a very good impression of the mindset of different countries (culture, etc), the health and social systems they have and the strategies which could work in their context. European partnerships open opportunities to disseminate the work done by partners in one’s own country.

Meeting in person and over a period of almost two years helped to widen perspectives and strengthened the European aims and objectives of advancing health literacy and health education as a means of improving people’s health and empowering patients and citizens.

DISTRIBUTION OF RESULTS

The minutes of the meetings, the presentations and the short report are to be found on the website <http://www.fgz.co.at/EU-learning-partnership.755.0.html>.



To better spread the results of the learning partnership each partner organization publishes an article on national level. The English summaries are listed below.

Articolo Notiziario ISS Settembre 2013

UN PARTENARIATO EUROPEO PER L'ALFABETIZZAZIONE SANITARIA

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RIASSUNTO - Le recenti iniziative del Parlamento Europeo intendono promuovere l'importanza dell'alfabetizzazione sanitaria tra i cittadini di tutti gli Stati membri. Il Progetto *Health Literacy and health education fostering participation and improving women's and men's health* (Grundtvig Learning Partnership - Lifelong Learning Program) finanziato dalla Commissione Europea, opera in un contesto tra organizzazioni impegnate nel campo della formazione degli adulti. L'alfabetizzazione e l'educazione sanitaria consentono a pazienti e cittadini di partecipare attivamente alle decisioni in materia di assistenza alla salute e di comunicare direttamente con gli operatori del settore, nell'intento di superare le disuguaglianze nell'accesso ai servizi sanitari causate da determinanti sociali. Bibliotecari e documentalisti giocano un ruolo chiave nella ricerca, convalidando e diffondendo l'informazione sanitaria tra i cittadini.

Parole chiave: alfabetizzazione sanitaria, educazione sanitaria, Unione Europea, cooperazione internazionale

SUMMARY (*A European partnership for health literacy*) - Recent initiatives of the European Parliament foster the importance of advancing health literacy in all member states. The project *Health Literacy and health education fostering participation and improving women's and men's health* (Grundtvig Learning Partnership - Lifelong Learning Program) funded by the European Commission, is a framework for small-scale joint activities among organizations working in the field of adult education. Health literacy and health education empower patients and citizens to participate to the full in their health care and to communicate on eye level with their health professionals, making it possible to overcome disparities in health due to social causes. Librarians and information specialists are in a position to play a key role in searching, validating and disseminating health information for the general public.

Key words: health literacy, health education, European Union, international cooperation
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SWITZERLAND

August 26th 2013

English summary

Manuscript to be submitted in November 2013 for publication in the Swiss journal education permanente (as agreed with the editor Therese Roth-Hunkeler)

Authors: Jörg Haslbeck (Careum Foundation, Zurich), Susanna Haller (dialog gesundheit Schweiz), Philippe Lehmann (Haute Ecole de Santé Vaud HESAV, Lausanne), Therese Stutz Steiger (Public Health Consultant, Bern)

Health literacy and life-long learning – strategies, approaches and experiences in four European countries (working title)

Even though there appear to be considerable estimated costs because of low health literacy in Switzerland (Spycher 2006; Wieser et al. 2008) as in other countries, the topic hasn't been a political priority for quite a while. However, Swiss activities in health policy and research at the beginning of the 21st century had underlined the need for new approach on health and called for a mutual understanding of health literacy within Switzerland (Abel/Sommerhalder 2007). According to Sørensen et al. (2012) health literacy is linked to literacy and entails people's knowledge, motivation and competences to access, understand, appraise, and apply health information in order to make judgments and take decisions in everyday life concerning healthcare, disease prevention and health promotion to maintain or improve quality of life during the life course. This definition guided the European Health Literacy Survey (HLS-EU) and clearly encompasses the public health perspective; it can easily be specified to accommodate an individual approach by substituting the three domains of health "healthcare, disease prevention and health promotion" with "being ill, being at risk and staying healthy".

Recent national as well as international developments build on the previous debate about health literacy in Switzerland (see e.g. Wang et al. 2003) and may contribute to a solid base for a health literacy-driven national policy. The HLS-EU from 2011 clearly underlined the importance of health literacy on the outcomes of health care and health promotion, also for Switzerland; it provided evidence that almost every second person lives with low or inadequate health-related knowledge and skills, especially amongst vulnerable respectively deprived groups, people with comorbidities and a great part of the aged population. These challenges are addressed by the new comprehensive strategy "Health2020" the Swiss Federal Council has released in January 2013 (www.gesundheit2020.ch): at the centre of all measures within the strategy are people and their well-being. Thus, to foster their health literacy and enable their participation in medical and health policy decisions are considered as core elements to ensure amongst others quality of life, to address health inequalities, to increase the quality of care delivery or to improve transparency within the Swiss health care system.

Paralleling these developments, a European Grundtvig learning partnership focused on health literacy with an emphasis on life-long learning and continuing education in the population. Between 2011 and 2013 the partnership's objective was to link European organizations, NGOs and public institutions working on health literacy as well as to identify different approaches, strategies, and policies for fostering health literacy. It was funded by the European Commission as a Grundtvig Learning

Partnership and brought together experts from Austria (Women's Health Center Graz; Main Association of Austrian Social Security Institutions, Gesundheit Österreich GmbH), Denmark (The Danish Committee for Health Education), Italy (Istituto Superiore di Sanita) and Switzerland (Careum Foundation Zurich, dialog gesundheit Schweiz, Public Health Consultant Bern and HESAV Lausanne). The Swiss participation was supported by the ch Foundation for federal co-operation. The participants organized four two-day meetings filled with presentations, discussions, program and method demonstrations as well as networking opportunities.

Learning from and with each other – health literacy approaches and strategies

Dialogue at partnership meetings enabled the participants an in-depth understanding as well as to discuss usability, benefits and challenges concerning

- *promotion of health-related knowledge*: Partners introduced various examples to strengthen health literacy amongst specific groups. These would include the general public, e.g. a book with life-long health information (CH), a national campaign on safer driving (IT), generic chronic disease-related information (CH), public version of medical guidelines (IT), online platforms (A) or even mobile applications addressing the needs and challenges of parents with newborns (DK).
- *skills training and self-management support*: personal skills are imperative not only to access and understand health information but to be able to use it personally as a support of healthy behaviours, to participate in decision making as well as to successfully self-manage chronic conditions. Here, practice examples included programs addressing alcohol, drugs and STDs amongst adolescents (DK) and chronic disease self-management (CH). Both programs are based on a «peer»-approach, a principle that also plays a key role in a Swiss community program (dialog gesundheit) characterized by a bottom-up process of lifelong learning that embraces storytelling, theme-centred interaction and sustained shared thinking between patients, family members, community and health professionals. Other programs trained patient representatives to search, access, evaluate and apply health-related evidence and information (A).
- *teaching and training methods*: In particular, this included the use of «brainstorming» as a powerful way of accessing existing knowledge within a group, also the «mini-lab-technique», a time-limited sequential group activity for dealing with and improving complex processes. Furthermore, «take a stand» was introduced as a special activity to express and pool individual views on a topic.
- *national strategies on health literacy*: Even though only four European countries were represented in this partnership a variety of concepts and national as well as local activities were presented and discussed. Denmark appears to be in a pole position in terms of nationally disseminated programs to foster health literacy, however, the concept itself still has to be defined. In Italy, the emphasis is on delivering national campaigns based on evidence. Austria has recently included health literacy amongst its top health-related priorities and currently is moving towards implementing programs on the subject of matter. Here in Switzerland, the already mentioned current health priorities of the Federal Council both implicitly and explicitly emphasize the importance of health literacy, although so far only few activities exist (e.g. national activities towards eHealth). An overview of the activities to foster health literacy in the cantons (Lehmann/Stutz Steiger 2011) gives an idea of the diversity of the models and actions already implemented.

Conclusions and implications

A variety of definitions and concepts on health literacy exist, which appears to be a still not well defined concept. The partnership process enabled an in-depth understand and insights in to intercultural concepts and up-to-date evidence on the subject of matter. There is also a plethora of programs and methods at hand ready to be used for fostering health literacy. The participants in particular emphasized the importance of going beyond knowledge dissemination – fostering and enhancing skills of citizens and patients is imperative, especially amongst those who are socially deprived and/or living with one or more chronic conditions. Another imperative appears to be commitment and a national health literacy policy along with the commitment to implement it. For Switzerland there has been a promising start at beginning of this century. Now there is the question «Quo vadis?». Insights into experiences from other countries may contribute to move towards a national health literacy policy including concrete actions.

Bibliography [to be included in the final manuscript]

Zurich, August 26th 2013/jh



AUSTRIA

Health Literacy. A Grundtvig - Learning Partnership

An English Abstract

Stephan Fousek, Gesundheit Österreich GmbH; Christine Hirtl, Women's Health Center, Graz; Stefan Spitzbart, Main Association of Austrian Social Security Institutions

At the end of 2011 the results of the European Health Literacy Survey drew a wide range of Austrian experts' attention to the issue of health literacy. Austria is one of the countries studied with the lowest level of health literacy. Subsequently, a joint effort was made by politicians and experts to prioritize health literacy as one of the Austrian Health Goals in a process to be concluded by the end of 2013. In 2011, initiated by the Women's Health Center in Graz, a Learning Partnership on Health Literacy started – funded by the European Commission, Grundtvig Learning Partnership-Lifelong Learning Program. Four face to face meetings were held between 2011 and 2013. They brought together experts from non profit organizations, the public health and health education sectors as well as from the health care systems of four participating countries, Denmark (The Danish Committee for Health Education), Switzerland (Careum Foundation, Dialog Gesundheit), Italy (Italian National Health Service) and Austria (The Women's Health Center, Main Association of Austrian Social Security Institutions, Gesundheit Österreich GmbH).

Understanding of Health Literacy and Health Education

The Learning Partnership made participants aware of the wide range of concepts and notions of health literacy and health education shared. Vivid discussions helped to better understand and explore the potential of health literacy and how to take action on improving it.

Examples of Good Practice - Training Programs, Health Information, Projects and Campaigns

Might it be possible to transfer those approaches working well in Switzerland to Austria? What may Denmark learn from Italy? The Learning Partnership was a perfect opportunity to delve into each other's approaches...

- Denmark and Switzerland: Chronic Disease Self management Program, CDSMP
- Denmark: Programs preventing young people from abusing alcohol and drugs and learning to avoid risky sexual practices, health information apps

- Italy: leaflets and brochures on various health problems, health information campaigns, project to strengthen the competences of women and men living with rare diseases
- Austria: training programs to search, find, appraise and apply health information, health information brochures, Austrian health portal www.gesundheit.gv.at

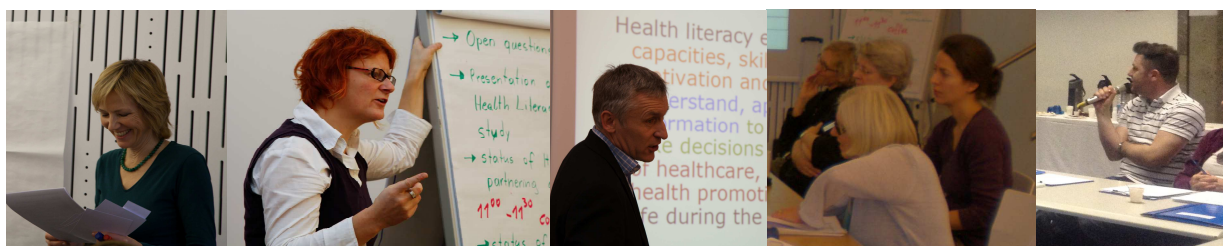
... to discuss quality criteria for good practice, the relevance of health information for strengthening health literacy, various media to provide people with good quality health information (print, tv, online, web tools, apps) and to share expertise to make health systems more health literate.

National Strategies and Initiatives – Four countries, four health systems and diverse strategies

While Denmark has a leading role in realizing many projects on health literacy the concept has not yet been well defined on the national level. The Swiss Federal Council recently passed “Health 2020”, a strategy providing a solid base to foster health literacy and active patients’ roles in health care. Italy’s national strategy is based on broad evidence and methodically diverse campaigns. Austria will conclude its process of developing national health goals and implementation strategies by the end of 2013, one goal being health literacy.

For more information see <http://www.fgz.co.at/EU-learning-partnership.755.0.html>

English summary of an article to be published in the September or October 2013 issue of the journal Soziale Sicherheit, by the Main Association of Austrian Social Security Institutions.



DENMARK

Health Literacy, prevention and health promotion

Rune Schmidt, Danish Committee for Health Education

Good communication between health professionals and patients or citizens is always important but rarely easy and a leaflet alone might not always be the best answer to the rising need of understanding and acting upon health problems.

In Denmark, attention to health literacy is often somewhat present in prevention and health promotion, but not often the focal point of an intervention.

In order to gain experience both on a theoretical and a practical level The Danish Committee for Health Education joined a learning partnership on health literacy funded by the European Commission, Grundtvig Learning Partnership-Lifelong Learning Program in 2011. Besides The Danish Committee for Health Education, three other organizations, and countries, were represented in the learning partnership: Careum Foundation (Switzerland), Italian National Health Service (Italy) and The Women's Health Center (Austria).

Through the partnership an array of approaches, examples of best practice, theoretical and ethical considerations unearthed, points of views were challenged and arguments were tested both on a theoretical and practical level. The discussions of the learning partnership yielded a broader understanding not only of how health literacy was used in the different countries, but also of the approach to prevention and health promotion.

In addition to gaining insights on the approach of other European countries in working with health literacy the experience gave way to an international collaboration between The Danish Committee for Health Education and the Italian National Health Service, in the form of a translation of the Danish mobile application 'My Baby'. The application makes it easy for new parents to access valuable knowledge about e.g. development, crying, nutrition and sleep. 'My Baby' is currently being translated.

Last but not least the learning partnership tightened the relationship between the organisations. An example of this is advanced knowledge sharing between The Danish Committee for Health Education and Careum of Switzerland who in their respective countries both holds licence of the Chronic Disease Self Management Program (CDSMP)

