

Health Literacy National Trends in Switzerland

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Switzerland : Health Literacy policy

- The notion of Health Literacy is not a common concept in the Swiss Health Policy, neither on national nor on cantonal level.
- Basic concepts are more:
 - public services in health care and public health institutions
 - private services in health care provision and in health insurances
 - and individual responsibility of “citizens-patients-users-insured-parents”
- There are however some solid elements and new developments giving a basis for a Health Literacy policy.

Individual responsibility and Health

- Swiss Constitution: Art 41:

The Swiss Confederation (central state) and the 26 Cantons (federal states) together shall, as a complement to personal responsibility and private initiative, endeavour to ensure that:

(...)

- everyone has access to the health care that they require

Individual responsibility and Health

Best example of a cantonal Health Law: Cantone Ticino:

Art 2: The State promotes and safeguards the health of the population as a fundamental individual good and a collective interest in respect for freedom, dignity and integrity of the human person. In particular it promotes in a coordinated manner disease prevention and restoration of health of all citizens without distinction of individual and social status, favoring individual and collective responsibility of citizens.

Art 34: Health education must foster the autonomy and personal responsibility in safeguarding individual and collective health. It aims to give people the knowledge and skills to choose a healthy lifestyle, to critically evaluate the existence of health hazards and to use conveniently individual and collective resources necessary to the promotion and maintenance of health, and in particular the self-medication.

Individual responsibility and Health

Another good example : Canton du Jura, Health Law

Art. 1: This Law is intended to contribute to the promotion, protection and safeguarding of the health of the population, in respect for the freedom, dignity and integrity of the human person, and to encourage individual and collective responsibility in the field of health.

Art. 3: Personal responsibility: Each one strives to maintain and protect its health, insofar as it can control the factors that influence it. Nobody should be indifferent to others' health. The efforts made by the State and private institutions in promoting health and provision of adequate care services cannot relieve anyone from personal liability.

Art. 4: The State promotes the advancement of health, inter alia through measures of education, prevention and information.

Individual responsibility and Health

- Social Health Insurance :
 - Every inhabitant in Switzerland has to contract individually with one of the 60 private health insurers (private companies, but non for profit). It is possible to change the insurer every year. No « family package », no participation of employers, no community affiliation system.
 - All insured pay an individual health insurance premium, without respect for income level or family situation.

Individual responsibility and Health

- Dental Health :
 - is not included in the Social Health Insurance
- Health Promotion and Prevention:
 - is not included in the Social Health Insurance (with few exceptions: immunisation, pregnancy control...)

Health Literacy and Competences

- Swiss Federal Office of Public Health (SFOPH) started 2005 a conceptual and strategy process on the thematic of Health Literacy and Competences

Health Literacy and Competences

First step in strategic decision making :

- June 2007: the Federal government formally adopted the "e-Health-Strategy Switzerland», developed by the Confederation and the Cantons.
- In this strategy, Health Literacy and Competences are central in 2 processes :
 - electronic medical record (close to be discussed in Parliament)
 - internet web-portal on health of Swiss federal and cantonal health authorities (abandoned)

And then: Nothing or almost! Until 2013.

Health Literacy and Competences

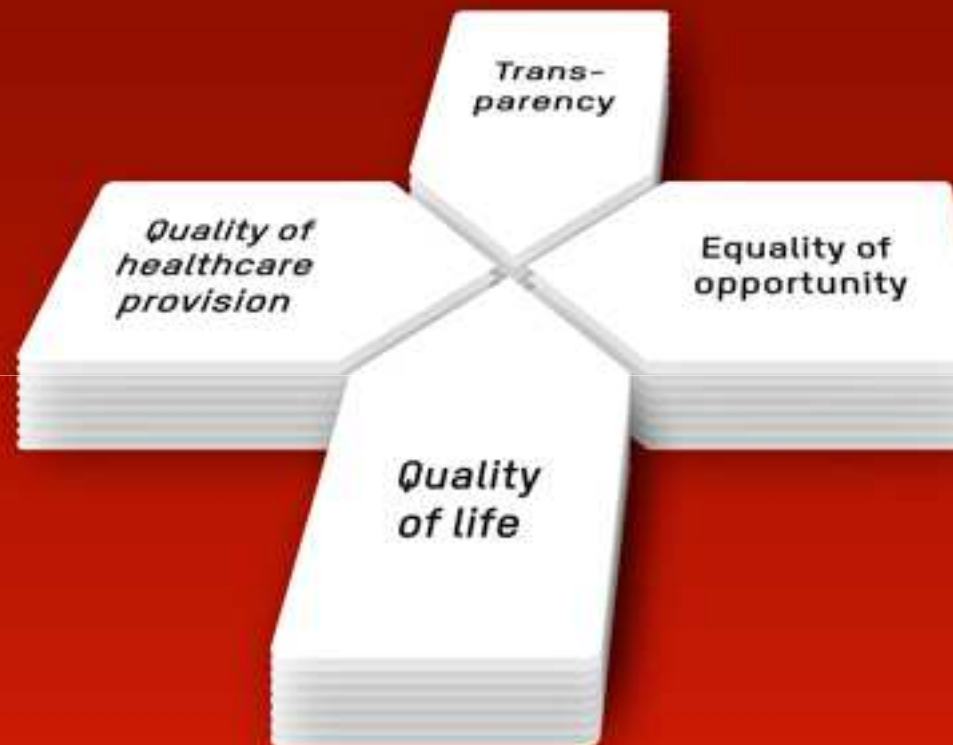
Other health actors play important roles:

- Health Promotion Switzerland (Foundation):
2005: Denkanstösse für ein Rahmenkonzept zu Health Literacy
- Merck Sharp & Dohme-Chibret (MSD):
with Picker Europe, 2003-2007 “Future Patient Study”.
“The Swiss Health Literacy Survey: development and psychometric properties of a multidimensional instrument to assess competencies for health” 2006-2012 (Health Expectations)
- Both institutions together:
2008: economic study: Health Literacy – An economic perspective and data for Switzerland; and dialog with health policy makers
- And, together with the Swiss Medical Association, the Swiss Society for Public Health, and Careum Foundation and Health Profession Training Institution :
they create the **Swiss Alliance for Health Literacy and Competence**

New Developments in Health Policy

- In January 2013, the Federal Council approved a comprehensive strategy entitled "Gesundheit2020" (Health 2020).
"A total of 36 measures across all areas of the health system.
- Self-competence in health issues in all sections of the population needs to be raised, unnecessary treatments and complications need to be avoided, and the current system made as efficient as possible by implementing transparent structures and introducing better and more clearly regulated controls.
"Patients and the population must be given a stronger role as stakeholders in the health system. Their self-management skills must be reinforced and used to care for individuals in their personal surroundings."

The four priority areas for policy action



Source: IOM, 2011, VI

Gesundheit | Santé
Sanità | Sanadad

2020

Priority area 1: Ensure Quality of Life

- Objective 1.1: Promote modern forms of healthcare delivery
- Objective 1.2: Complement health protection
- Objective 1.3: Intensify health promotion and disease prevention

“Public and private stakeholders should coordinate and intensify activities aimed at promoting health and preventing and screening for diseases against the background of the growing prevalence of chronic diseases. The aim is to prevent or mitigate disease wherever possible. This will also reduce the economic costs incurred through an unbalanced diet and lack of physical activity, excessive consumption of alcohol, tobacco and drugs, the spread of sexually transmitted diseases and the in some instances poor level of immunization (against measles, etc.). The aim here should be to both strengthen and call on people’s sense of individual responsibility. Adequate financial resources must be provided...”

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Priority area 2: Reinforce Equality of opportunity and individual responsibility

- Objective 2.1: Reinforce fair funding and access

“All groups in the population should have an equal opportunity to enjoy a healthy life and optimum life expectancy. Particular attention is focused in this regard on children and adolescents, people with a low income or level of education, the elderly and migrants. These vulnerable groups need to be able to find their way around the health system more effectively, and to this end their ability to deal with health issues needs to be increased.”

- Objective 2.2: Keep health affordable by increasing efficiency

- Objective 2.3: Empower insurees and patients

“The focal point of health-policy is the individual. The purpose of the “Health2020” agenda is to improve the well-being of insurees and patients. At the same time, though, insurees and patients need to be involved in health policy if reforms are to succeed. Citizens also need to be taken seriously in their role as voluntary service providers in the domestic setting and in the context of organized voluntary work. In addition, patients should play a full, equal and self-determined role in their relationship with healthcare professionals in the future...

- Take greater account of patients and insurees in health policy processes (by means of delegated co-determination, for example).
- Increase the health skills and individual responsibility of insurees and patients so that they can navigate the health system more efficiently, prevent diseases more effectively and pay more appropriate attention to their medical conditions.
- Place greater emphasis on patients’ rights (i.e. the rights of directly affected patients such as the right to complain, protection against violation of data protection provisions, etc.).”

Priority area 3: Safeguard and increase the Quality of healthcare provision

- Objective 3.1: Promote quality in services and healthcare delivery

“The quality of healthcare provision in Switzerland is neither systematically recorded nor uniformly quantified. Important data is not recorded or is not accessible to the authorities. This makes it impossible to quantify both potential for improvement and improvements that have been made. Patients do not have enough information about the choice of service providers. ...”
- Objective 3.2: Make greater use of e-health

“E-Health tools can improve the quality of healthcare provision and patient safety by giving all healthcare professionals access to relevant information and patients’ records at all locations and times. (...) E-Health can intensify the coordination between all stakeholders in the treatment process. This benefits patients, particularly those with complex chronic diseases.

-> Introduce and actively promote the electronic patient dossier in order to increase the quality of healthcare provision and patient safety and to support treatment processes and collaboration... ”
- Objective 3.3: More and well-qualified healthcare workers

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Priority area 4: Create Transparency, better control and coordination

- Objective 4.1: Simplify the system and create transparency

“Although Switzerland has a very good health system, the transparency of services provided, their benefits and their costs is poor. This makes it more difficult to direct the system and prevents or impedes improvements. At present it is difficult for both individuals and stakeholders to navigate the health system. On the one hand the health insurance system and the numerous types of cover it offers have become complicated, while at the same time the system is largely intransparent. Orientation and transparency within the health system need to be improved for all stakeholders, and for citizens in particular.”

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- Objective 4.2: Improve management of health policy
- Objective 4.3: Reinforce international integration

Swiss Academies of Arts and Sciences



A Sustainable Health System for Switzerland
Roadmap, december 2012

[http://www.academies-
suisses.ch/en/index/Publikationen/Berichte.html](http://www.academies-suisse.ch/en/index/Publikationen/Berichte.html)

A Sustainable Health System for Switzerland

A Sustainable Health System for Switzerland

Roadmap Objective 7:

Public health and individual responsibility of citizens are reinforced.

2013

Improving the level of health literacy of the population in Switzerland (preliminary work)

Establishment of an expert commission 'Public health' at federal level

2014

Planning interventions aimed at improving the health literacy of the Swiss population (including the implementation of the partial "Health Literacy" project of the national eHealth strategy)

2015

Realization of interventions to strengthen the health literacy of the Swiss population

2016

Realization of interventions to strengthen the health literacy of the Swiss population
Legal regulation of prevention and health promotion

Some conclusions

- Does the topic of Health Literacy (Competencies) only lead to „declarations of intention“? (is it rather a password than a programme)?
- Does it cause scepticism at the the national and professional level?
- Do we provoke „projectitis“ without any clear vision?