

European Patient Education Conference

Barcelona, 14th-15th January, 2008

Conclusions



Topics (day 1)

- Meeting health literacy needs of patients and citizens
- Health literacy views
 - A holistic approach
 - Clinician, patient, and policy point of view
- Programs
 - UK Expert Patient Program
 - Stanford Self-Management Program



Topics (day 2)

- Other relevant experiences
 - The Patients' University
 - A technological approach
 - Health literacy in Switzerland
 - Patients' advocacy
 - European Patient Forum
 - Spanish Patients' Forum
 - Health literacy in Italy
 - A Swedish experience
 - An ADHD guideline for school teachers



Major themes

- Focus on:
 - The skills, rights, and responsibilities of patients
 - The skills, demands, and responsibilities of clinicians
 - The demands and assumptions/expectations of the health care institutions and public health sector



More thoughts on that ... (i)

- Apply rigorous formative research
- Apply a systematic process in developing materials for patients
- Problems related with health literacy are on both sides (professionals and patients)
- The importance of self-management
- Choice has to do with how you empower people
- Create networks
- Ask questions to make doctors think differently



More thoughts on that ... (ii)

- **Patient advocacy** is a fundamental concept within health care reform, and goes hand-in-hand with patient empowerment and patient education.
- **Patients' Organizations** are the relevant point of intersection between public health, health systems, health administrations, health agents and society.
- **Patient education** contributes to the improvement of the quality of health systems, and to the promotion of the modernization of health care.



Major findings as policy implications

- We must improve skills and competences in health of patients and citizens
- We must reduce the demand not needed of systems of care
- We must increase communication skills of providers, specifically health professionals



Innovations and promising practices

- Attention to print materials
 - Reduce complexity and jargon
 - Pilot test
- Attention to language and culture
- Move beyond reliance on print materials
 - Consider innovative media (but do not assume that internet is the answer)
 - Expand dialogue and discussion
 - Combine education with entertainment
- Work with lay public (e.g. the expert patient)
- Support active patient-build efficacy
- Change professional attitudes and stance

