

# Developing the healthcare system, improving individual skills, and increasing awareness in the service and production sector for better health literacy in Austria – the role of the MoH

Colloquium: „Zdravotní gramotnost a zdravotní politika“, 4<sup>th</sup> October 2017

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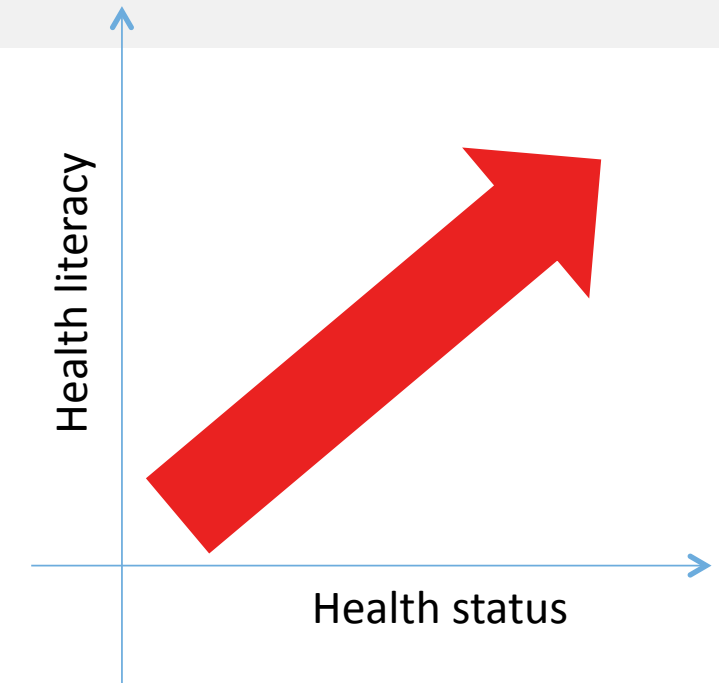
# Making the case: Why an Austrian policy on health literacy (in health care)?



## Why is health literacy important?

Positive effects concerning:

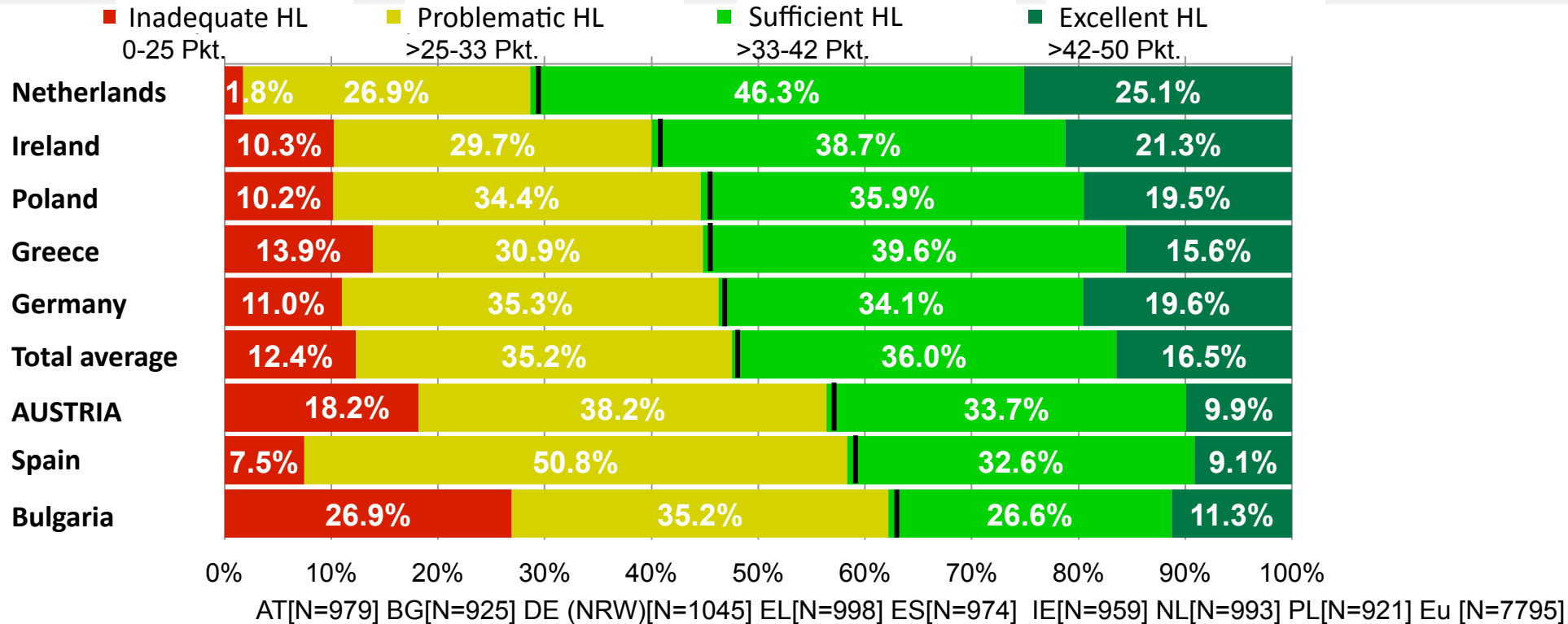
- Health-related **decisions** and **actions** in everyday life (e.g. more physical activity)
- Appropriate **usage** of **health care services** (e.g. more prevention, less emergency treatment)
- **Better health status**, less chronic diseases – especially for aged and highly-aged persons!



**Better health** is amongst other reasons important for ...

- Good performance in school
- Societal innovation, economic efficiency and sustainable development (e.g. *UN-Sustainable Development Goals*)

# Starting point: EU-HLS-Study 2009-2012: Austria very near to last in international comparison!



## HL of vulnerable groups even worse

- People with lower levels of education
- Chronically ill people
- People aged 65+

## Health literacy: Austrian impulses in the European context

- 2009-2012: Participation in first **cross-national, comparative assessment** of health literacy in **8 European countries** (EU-HLS-Study)
- 2016: Ministers of „**Gesundheits-Quintett**“ („Health-Quintet“, GER, CH, LUX, LIE, AUT) take up HL in their annual meeting:
  - Demand for international cooperation and regular international surveys on HL in **final declaration of meeting**
  - Formation of cross-national **working group on HL**
- 2016: Start of **exchange group of HL agents** from GER, AUT, CH, including representatives from policy, health insurance, science and education
- 2017: Launch of working group on health-literate healthcare organizations within the international WHO Network of Health Promoting Hospitals
- 2017: German-speaking countries jointly demand the inclusion of an indicator on HL in the WHO-Euro monitoring framework and launch an **action Network on HL measurement** at 67. WHO regional conference
  - ⇒ **Member states are warmly invited to join the network!!!**

# Health literacy in the Austrian (health) policy context



## Step 1 (2011-2012): Health literacy as a health target



**Target 1:** Health-promoting living and working conditions

**Target 2:** Health equity for all people living in Austria

**Target 3: Better health literacy in the population**

**Target 4:** Secured sustainable natural resources

**Target 5:** Strong social cohesion as a health enhancer

**Target 6:** Healthy conditions for children and young people

**Target 7:** Access to a healthy diet for all

**Target 8:** Active population through appropriate environments

**Target 9:** Good psychosocial health in all population groups



**Target 10:** Sustainable, efficient and high-quality  
health care for all

## Health target 3 „Better Health literacy of Austrians“ with 3 sub-targets:



### ST 1

- Developing the **healthcare system** towards more health literacy by involving relevant stakeholders.

### ST 2

- Enhancing **individual health literacy** with a special emphasis on vulnerable groups.

### ST 3

- Increasing awareness in the **service and production sector** for better health literacy.

## Step 2 (since 2013): Connections to the continuous healthcare reform process

- Health literacy on the **agenda** of the ongoing **healthcare reform process** („Zielsteuerung-Gesundheit“)
- **Measures** to enhance health literacy **in main federal contract** “Bundeszielsteuerungsvertrag 2013-2016” („Federal Contract on the Health Target Control System 2013-2016 “)
  - Health portal [www.gesundheit.gv.at](http://www.gesundheit.gv.at)
  - Electronic health file ELGA
  - TeWeb – Telephone- and web-based service line
  - Development of a „Strategy for better quality of communication in healthcare“
- **Measures** to enhance health literacy **in main federal contract** “Bundeszielsteuerungsvertrag 2017-2021”( „ Federal Contract on the Health Target Control System 2017-2021“)
  - Measures to enhance quality of communication in healthcare
  - Measures to enhance the quality of health information („Gute Gesundheitsinformation“)
  - „Health literate organizations“
  - Further assessment of health literacy on a population level

## Step 3 (since 2014) – Capacity building: Austrian Platform on Health Literacy

- **Aim:** Supporting the implementation of health target 3  
 „Better health literacy in the population“
  - Coordination and pooling of measures on a federal level
  - Raising awareness and spreading know-how („Agenda-Setting“) concerning implementing actors
  - Initiation of new measures
  - Advancement of the field
- **Range:** federal level, whole Austrian population
- **Duration:** 2014 – 2032



# Current implementation activities within the healthcare sector



# Why is health literacy important for healthcare services and systems?

People with limited health literacy ...

- Use less preventive services, have more emergency healthcare, are more often admitted to hospital and have more unplanned re-admissions
- Have a reduced understanding of health & disease-related information AND more limited abilities to talk about their conditions and needs
- Have higher risk of wrong or sub-optimal diagnoses and therefore of wrong or inadequate treatment
- Have more problems to take medications as prescribed and to contribute to treatment and care
- Have a higher risk of complications and, overall, profit less from healthcare than people with good HL
- Account for 3-5% of treatment expenses (Eichler, Wieser and Brügger 2009)

→ **Better health literacy is not only „nice to have“ but contributes to more effective and efficient healthcare!**

*(See Berkman et al. 2011 as well as cited studies in Brach et al. 2012)*

## Examples for measures in the healthcare sector by partners of the Austrian health target process

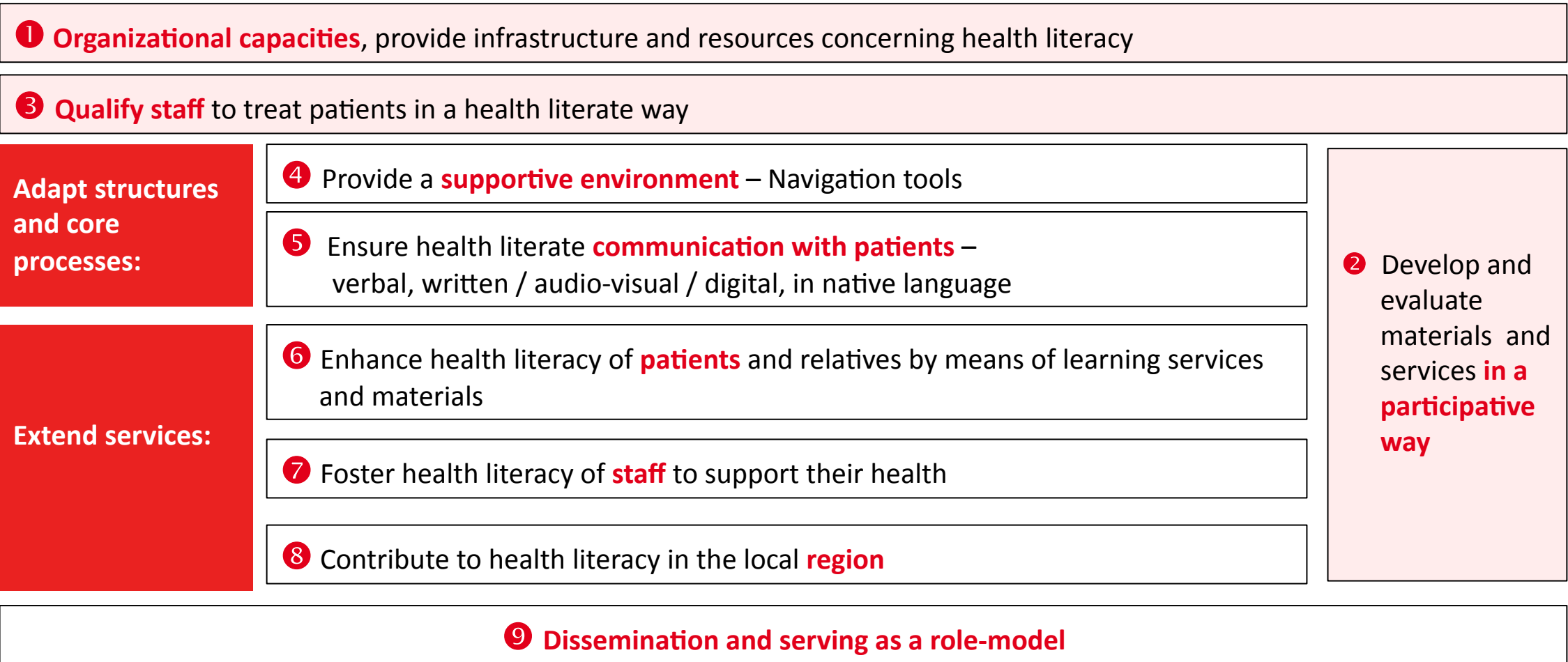
### Adapting health services:

- Health literate healthcare organization – Standards and self-assessment tool (LBIHPR in cooperation with ONGKG)
- Health literate social insurance institutions (Main Association of Austrian Social Security Institutions )
- Health literate ophthalmologists (Österreichische Ophthalmologische Gesellschaft)
- Video-interpreting in healthcare (Ministry of Health and Woman's Affairs and Institute for Ethics and Law in Medicine)
- Catalogue of criteria „Good health information Austria“ (Women's Health Center, Graz)

### Enhancing individual competences in relation to health and social care:

- Health literacy-Coaching (Social insurance institutions)
- My Way to health literacy (Klinikum Wels-Grieskirchen)
- Enhancing health literacy in cardiologic patients (KAV-Vienna)
- Capacity building regarding patients and users of health care services (Women's Health Center, Graz)
- MiMi – Health and health literacy from migrants for migrants (Volkshilfe Wien)

# National activity area 1: Health literate healthcare organizations: The „Viennese concept of health literate healthcare organizations“ – Self-assessment tool with 9 Standards (22 Sub-Standards, 160 Indicators) – since 2013

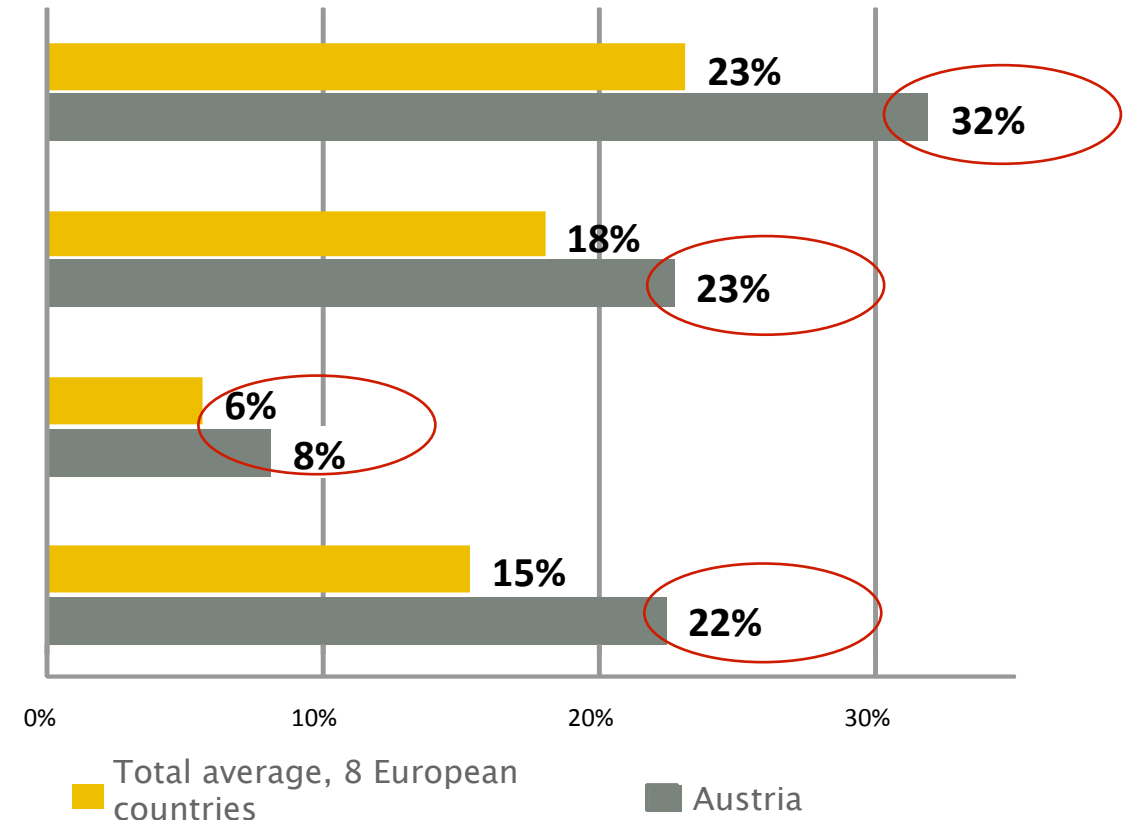


# National activity area 2: Quality of communication in healthcare (since 2015)

How easy is it for you ...

- ... take **decisions concerning your disease** on the basis of information from your doctor?
- ... to **assess** whether the **information** given by your doctor **is relevant for you?**
- ... to **follow the advice** of your doctor or pharmacist?
- ... to **understand what your doctor says?**

Proportion of people having difficulty to ...



Source: HLS-EU 2012 – Credits to Dr. Peter Nowak, GÖG

## „Strategy towards better quality of communication in healthcare“

- Junior doctors are well-trained – but find it difficult to apply their know-how in real life conditions!
- The implementation of good quality of communication needs organizational development!

Studies indicate:  
Good communication quality  
saves time!

Zielsteuerung-Gesundheit  
Bund · Länder · Sozialversicherung

### Verbesserung der Gesprächsqualität in der Krankenversorgung

Strategie zur Etablierung einer  
patientenzentrierten  
Kommunikationskultur

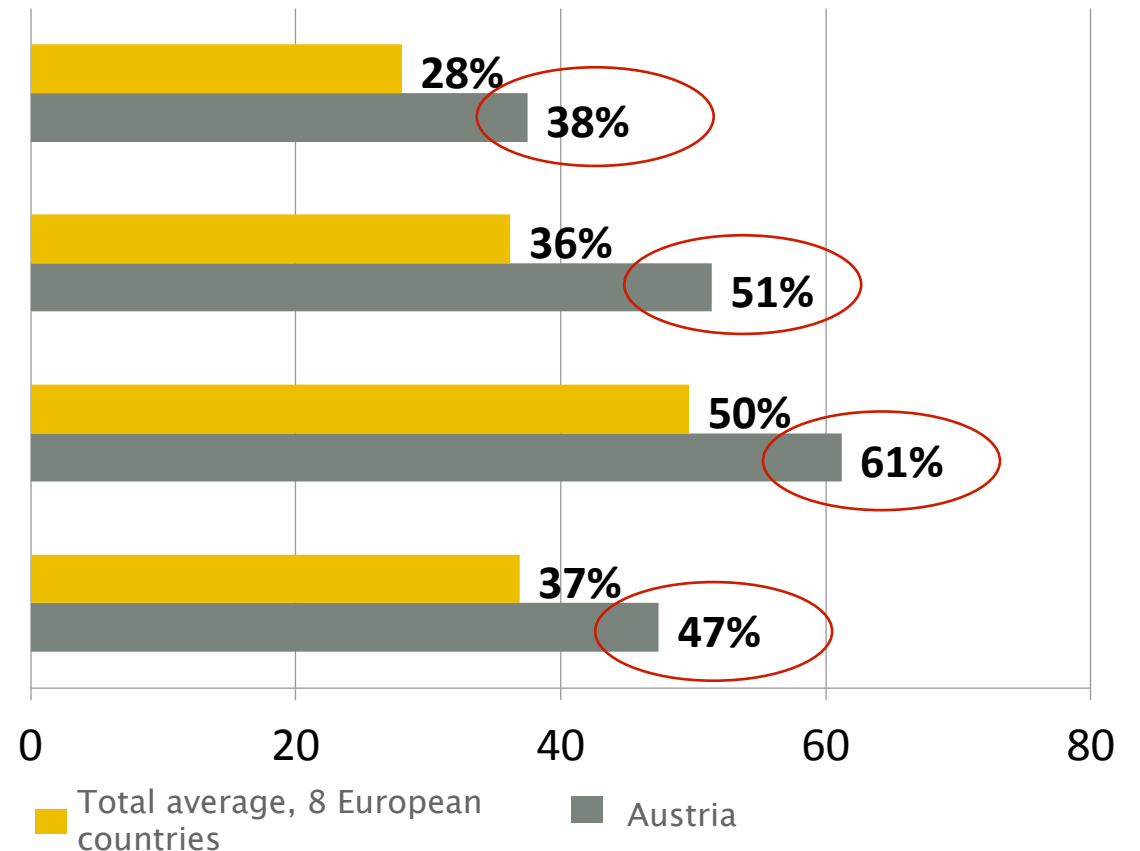
Beschlossen von der Bundeszielsteuerungskommission  
am 1. Juli 2016

# National activity area 3: Quality of health information (since 2017)

How easy is it for you ...

- ...**understand** the **leaflets** that come with your **medicine**?
- ...**understand** information on **food packaging**?
- ...**judge** if the **information** about illness in the **media** is **reliable**?
- ...**decide** how you can **protect** yourself from illness based on **information in the media**?

Proportion of people having difficulty to ...



# Criteria for „Good health information Austria“ („Gute Gesundheitsinformation Österreich“)

**15 Quality criteria** comprising main features like...

- **Evidence-based approach**

(Systematic research, selection of evidence, etc.)

- **Adaption to target group**

(Comprehensibility, language competence, culturally sensitive contents, age and gender differences, special information needs, etc.)

- **Well-balanced, unbiased presentation**

(Pros and cons, handling figures and risk-related data, selection and presentation of results/comparisons, etc.)

- **Avoiding manipulation**

(Objective and reasonable presentation, separate presentation of evaluation and recommendations, etc.)

- **Transparency**

(Person in charge, conflict of interests, description of content and currentness of provided information, etc.)

# Current status in other sectors



## Sub-target 2 “Enhancing individual health literacy”: Examples for implemented measures

- „Be active, stay healthy“ – health promotion for educationally disadvantaged target groups (Kärntner Volkshochschulen)
- Health literacy for everyone – Enhancing health literacy in „hard-to-reach“ groups (IKEMBA)
- „Fit and healthy“- enhancing health literacy of children and adolescents (Social Security Institution for Farmers)
- Enhancing health literacy in schools (GIVE-Servicestelle für Gesundheitsförderung an Österreichs Schulen)
- Health literacy in extracurricular professional youth work (bOJA, Centre of competence for Open Youth Work in Austria)

## Sub-target 3 “Increasing awareness in the service and production sector”: Examples for potential measures

- "Healthy eating from the start!" – Employing a mixture of communication strategies (incl. Social Marketing, Nudging, etc.) to expand the program (AGES- Austrian Agency for Health and Food Safety)
- Guidelines concerning marketing of foods and non-alcoholic beverages with high sugar, salt or fat proportion to children under consideration of WHO-recommendations (=> incl. Recommendations regarding advertising rules and regulations?) (Ministry of Health and Woman's Affairs and National Nutrition Commission)
- Thematic partnerships with enterprises („win-win“) (National Nutrition Commission)

# Summary & Conclusions



## Commonalities of the experiences of Austria and other countries – potential elements for success?

- **Regular data assessment and monitoring** (as a mean for Status-Quo analysis and development of interventions)  
(e.g. HLS-EU, Czech Republic, Belgium, Denmark, Italy, Malta, Portugal, Hungary, Switzerland,...)
- **Capacity building**  
(e.g. ÖPGK, Allianz Gesundheitskompetenz (DE), Allianz Gesundheitskompetenz (CH),...)
- **Embedding health literacy in relevant strategic policy papers & strategies**  
(e.g. Health target 3 (AT), national Action plan on health literacy (DE), Integration of HL in national health targets „Health 2020“ (CH),...)
- **Implementation of concrete measures**  
(e.g. Health literate health care organizations, etc.)

# Many thanks for your attention!

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