

EFFECTIVENESS OF STRATEGIES FOR INFORMING, EDUCATING, AND INVOLVING PATIENTS

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We identified 129 systematic reviews plus many other studies, which covered the following topics:

Health literacy

- Provision of printed leaflets and health information packages.
- Provision of computer based and internet health information.
- Targeted approaches to tackle low levels of health literacy in disadvantaged groups.
- Targeted mass media campaigns.

• *Clinical decision making*

- Patient decision aids.
- Training for clinicians in communication skills.
- Coaching and question prompts for patients.

Self care

- Self management education.
- Self monitoring and self administered treatment.
- Self help groups and peer support.
- Patient access to personal medical information.
- Patient centred telecare.

Some reviews were negative (no difference between intervention and control or worse outcome with the intervention) or mixed (positive for some outcome measures and negative for others), but most were positive (beneficial) for the following outcomes:

Patients' knowledge

- Knowledge of condition and long term complications.
- Self care knowledge.
- Knowledge of treatment options and likely outcomes.
- Comprehension of information.
- Recall of information.

Patients' experience

- Patients' satisfaction.
- Doctor-patient communication.
- Quality of life.
- Psychological wellbeing.
- Self efficacy.
- Involvement and empowerment of patients.

Use of services and costs

- Hospital admission rates.
- Emergency admission rates.

- Length of hospital stay.
- Number of visits to general practitioner.
- Cost effectiveness.
- Cost to patients.
- Days lost from work or school.

Health behaviour and health status

- Health related lifestyles.
- Self care activities.
- Treatment adherence.
- Severity of disease or symptoms.
- Physical functioning.
- Mental functioning.
- Clinical indicators.

Improving health literacy

Patients with a low health literacy have poorer health status, higher rates of hospital admission, are less likely to adhere to prescribed treatments and self care plans, experience more drug and treatment errors, and make less use of preventive services. Achieving greater health literacy in the population is integral to improving the health of disadvantaged populations and to tackling health inequalities.

Evidence from reviews suggests that well designed written information (such as leaflets) can be a useful adjunct to professional consultation and advice and can improve health knowledge and recall, especially if information is personalised. Leaflets on their own have little effect, but combined oral and written information can improve patients' experience and in some cases, reduce use of health service resources.

Other resources, such as websites, can also improve knowledge, and studies of such resources have shown high user satisfaction and beneficial effects on self efficacy and health behaviour.

Self care and self management in chronic diseases

Self care includes staying fit and maintaining good physical and mental health, as well as the day to day management of long term conditions.

Approaches that provide information only are mostly unsuccessful, but educational and self help programmes that are actively supported by clinicians improve health outcomes for patients.

Short self management courses run by voluntary groups improve knowledge, coping behaviour, adherence, self efficacy, and cost effectiveness.

Conclusions

We believe there is a substantial evidence base, albeit imperfect, on which to build strategies to strengthen patient engagement. Most reviews reported improvements in important outcomes.

Because health literacy is central to enhancing involvement of patients in their care, all strategies to strengthen patient engagement should aim to improve health literacy.

Health information materials, decision aids, self management action plans, and other “technologies” of patient engagement are most effective when they supplement or augment, rather than replace, interactions between patients and professionals.

Health professionals must be given the opportunity to develop their competencies in patient centred care – particularly their communication skills. Clinicians must also be given the resources needed to work collaboratively with their patients, to help them access and understand health information, and to offer support in making choices to those who need it.