



PUTTING SELF-CARE ON THE RADAR

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# EXECUTIVE SUMMARY

Empowering Americans to take greater ownership of their health has never been more important.

The nation's healthcare tab reached \$3.35 trillion in 2016 — an average of \$10,345 per citizen — and these costs will only increase as more adults reach retirement age and face higher rates of chronic conditions. By 2030, 80 percent of Americans could have at least one chronic condition, costing society more than \$42 trillion in medical expenditures and losses in productivity.

Because these projections are not just a U.S. problem, other nations have implemented policies that support self-care — which emphasizes the actions individuals can take to maintain good health and manage their minor ailments and long-term conditions. These actions are based on growing evidence that self-care improves health outcomes, enhances symptom management, and brings health expenditures under control. Moreover, there is increased recognition that the vast majority of health problems people confront involve minor ailments, such as

headaches and joint pain, sore throats, coughs and colds, and gastrointestinal distress, which can be effectively treated with OTC medicines.

The same is true for chronic medical conditions like arthritis, diabetes and hypertension where patients can be taught the skills to manage all that a long-term disease entails including symptoms, treatment, physical and social consequences and lifestyle changes. These projections are backed by compelling estimates of savings to the U.S. economy.

At the same time, the Institute of Medicine (IOM) includes self-care as one of four pillars to build a better health delivery system in the U.S., concluding that shared decision-making between consumers and health providers will significantly reduce the estimated 30 percent of the nation's health expenditures that are unnecessary or wasted. Also of significance, a national survey commissioned by the National Council on Patient Information and Education (NCPPIE) in 2014 shows that Americans are ready to take on this role.

## AS CURRENTLY PROJECTED



Americans could avoid approximately **50 million** unnecessary visits to primary care physicians each year and save over **\$5 billion** per year with increased self-care.



**\$6.6 billion** in avoidable health costs would be saved annually if 10 percent of Americans with chronic diseases adopted self-care practices.



Greater use of self-care could potentially net the economy up to **30 percent** of the health costs that the Institute of Medicine projects are unnecessary or wasted.

## SURVEY FINDINGS



**80 percent** of U.S. adults believe they are expected to be active in managing their own health.



Already, many consumers are taking self-care actions, including **tracking their health indicators** such as their blood pressure (64%) and using OTC medicines to manage acute health conditions (59%).



Almost **two-thirds** of adult Americans (64%) feel they could be making more decisions about their health and wellness.





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Yet, the U.S. has yet to embrace self-care as an essential component of the nation's health system, despite increasing public support and the IOM's recommendations. What is stalling progress is self-care is not on the national radar, complicated by no standard definition to unite the public health community, public confusion about what self-care entails, low health literacy skills among medically underserved consumers, and insufficient education, training and information resources for healthcare professionals to support and counsel patients on self-care options. Also impeding progress is the lack of an underlying framework to build a national self-care movement in the U.S., similar to the efforts that are proving successful in Canada, the UK, Australia and a number of other countries.

Because the stakes are high, NCPIE convened a panel of experts and sought their input, which enabled NCPIE to formulate six national priorities that can have a significant impact in improving the climate for self-care in this country. Ultimately involving the support and active participation of many constituencies — the federal government, state and local government agencies, professional societies and health care practitioners, health educators, patient advocates, consumer leaders, policymakers, health plans and members of industry — this platform calls for action in the following areas:

**#1 Elevate self-care as an essential component of health care.**

Despite evidence that self-care improves health outcomes, enhances symptom

management, and brings health expenditures under control, self-care is not on the radar of policymakers and many health professionals, resulting in inconsistent government policies and a lack of resources for research, education, and professional development. Overcoming this problem will require sustained awareness-building and specific policies to end the roadblocks to greater self-care practices. However, an immediate way to elevate self-care is to follow the lead of the UK and other countries by designating a yearly observance of self-care with resources for stakeholders to conduct a coordinated education effort. In 2016, 10 states passed resolutions to establish "Self-Care Month" in February. If other states followed suit, there would be a readymade platform to introduce Americans to the benefits and use of self-care.

**#2 Agree on a common definition of self-care to unite the public health community.**

Today, competing definitions are used for self-care that reflect different views about its purpose, which has impeded education efforts. Therefore, NCPIE has synthesized the existing terms to develop a new working definition that is simple, direct and supports the patient-centered approach to healthcare decision-making:

**Self-care represents the decisions and actions that individuals as patients and caregivers take to promote wellness, prevent disease, treat minor ailments and manage health conditions.**

Whether this definition is ultimately accepted, it is imperative that the public health community reach agreement on standard terminology that will unite all stakeholders in building a self-care movement in the U.S.

**#3 Mount a unified and sustained national awareness campaign that empowers Americans to make self-care decisions at different life stages.**

To motivate patients and practitioners to embrace self-care practices, actionable messages must be communicated as part of a unified and sustained public education campaign that makes self-care meaningful to the public, offers solutions-oriented information and tools to consumers and practitioners, and raises awareness of the role of community pharmacists as a "go-to resource" on medication management and treating common conditions. However, because the public's need for self-care information changes over time, NCPIE identified four life stages requiring targeted self-care education: children and adolescents, working age adults, older adults and caregivers. Reaching these different audiences will require customized messages and content that can be delivered through health professionals, pharmacies, schools, employee wellness programs, senior centers, and existing government programs as well as the national media and targeted social media platforms.

As a national coalition with the network in place to mobilize these constituencies, NCPIE can serve as the catalyst and convener so stakeholders will have the building blocks to communicate effectively.





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#4 Address the self-care information needs of Americans with low health literacy.

Because a third of the adult population (36 percent) has difficulty reading health information and understanding basic medical instructions to adhere to medication regimens, an immediate priority is to create information aides in plain language for a variety of reading levels, including materials to be used interactively between consumers and providers that adhere to National Standards on Culturally and Linguistically Appropriate Services (CLAS). It will also be important for stakeholders to advocate for a national investment in self-care research with the goal of identifying interventions that are applicable to hard-to-reach populations, such as those with poor health literacy.



#5 Create a supportive environment for health professionals to advance self-care.

Recognizing the important role physicians and nurses can play in supporting/ counseling patients about self-care, professional societies can benefit from the insights, resources and curricula from other countries as well as developing self-care training programs for providers in the U.S.

Even with their training, pharmacists who are on the front lines in educating and counseling consumers on medication use, lack recognition as healthcare providers under federal law and their services are not currently covered. This has resulted

in almost 70 percent of Americans not receiving counseling when they pick up their prescriptions. Currently, 38 states are pressing for federal legislation to designate pharmacists as healthcare providers and expand coverage under Medicare B for pharmacists' services, and similar legislation is working its way through other state legislatures. Additionally, there is a pressing need to develop updated guidelines so institutions and health professionals will have practical solutions for meeting the requirements of the Health Insurance Portability and Accountability Act's (HIPPA) Security Rule, while still being able to harness the power of mobile devices to improve patients' self-care practices.



#6 Address roadblocks to greater self-care practices.

Because some federal and state laws are impediments to building a supportive self-care movement in the U.S, public health advocates are calling for policies that will provide broader supportive self-care practices, such as passage of the "Pharmacy and Medically Underserved Areas Enhancement Act" (H.R. 592; S. 109), which would remunerate pharmacists to provide medication management and preventative services to millions of Americans in medically underserved areas (MUAs) under Medicare Part B. On the grassroots level, 38 states have passed laws recognizing pharmacists as healthcare providers and similar legislation is working its way through other state legislatures.

NCPIE notes that advocates are also calling for changes to remove the requirement that consumers produce a doctor's prescription when buying OTC cold and allergy medicines containing pseudoephedrine

(PSE), since these products can only be sold "behind the counter" in pharmacies.

The ramifications of limited self-care affect the health outcomes of Americans and virtually every aspect of the health system, presenting a compelling case for all stakeholders to work collectively to elevate self-care as a critical component of disease prevention and improved health. Thus, an agenda that addresses barriers and builds the knowledge and skills of patients and health professionals alike is a critical step to improving the health status of all Americans.

Clearly, the time for action is now.

