



Needs and Attitudes of Citizens

Presentation

Helle Johannessen
Leader Work Package 3

Helle Johannessen, Professor
Institute of Public Health
University of Southern Denmark

Partner

University of Southern Denmark
Wiener Internationale Akademie für
Ganzheitsmedizin
University of Paris 13
Competence Centre for
Complementary Medicine and
Naturopathy, Technische Universität
München

Nina Nissen, PhD, Research fellow
Institute of Public Health
University of Southern Denmark

Susanne Schunder-Tatzber, Dr
Wiener Internationale Akademie für Ganzheitsmedizin



UNIVERSITY OF SOUTHERN DENMARK

Antoine Lazarus, Dr
University of Paris 13

Place

CAMBrella Workshop

European Parliament
Brussels, November 28, 2012

Wolfgang Weidenhammer, Dr
Competence Centre for Complementary Medicine and
Naturopathy, Klinikum rechts der Isar, Technische Universität
München



CAMBrella is funded by European's Union 7th Framework Programme (FP7/2007-2013), Grant Agreement No. 241951

Attitudes and needs regarding CAM among EU citizens

Aims

- To identify stakeholders and indicators for needs for CAM
- To establish an overview of needs and attitudes towards CAM in Europe

Methods

- Stakeholder workshop
- Literature review



A workshop with stakeholders

Participating stakeholders

- Croatian Federation of Natural, Energy and Spiritual Medicine, Croatia
- Danish Consumer Council, Denmark
- Riga Stradins University, Latvia
- Tuscan General Directorate of Health, Tuscany, Italy

Aims of the workshop

- To identify how to explore citizens' attitudes and needs to CAM
- To facilitate the sharing of relevant sources of information about CAM across the EU
- To help identify how citizens' attitudes and needs to CAM can be measured and compared across the EU countries

A workshop with stakeholders

Decision on prioritized areas of enquiry

- Independent and easily accessible **information** about CAM, based on available evidence to support informed decision making
- **Quality of care**, comprising services, practitioners and products
- Equal **access** to services, including considerations of geographical distance to services, waiting times and costs/reimbursements

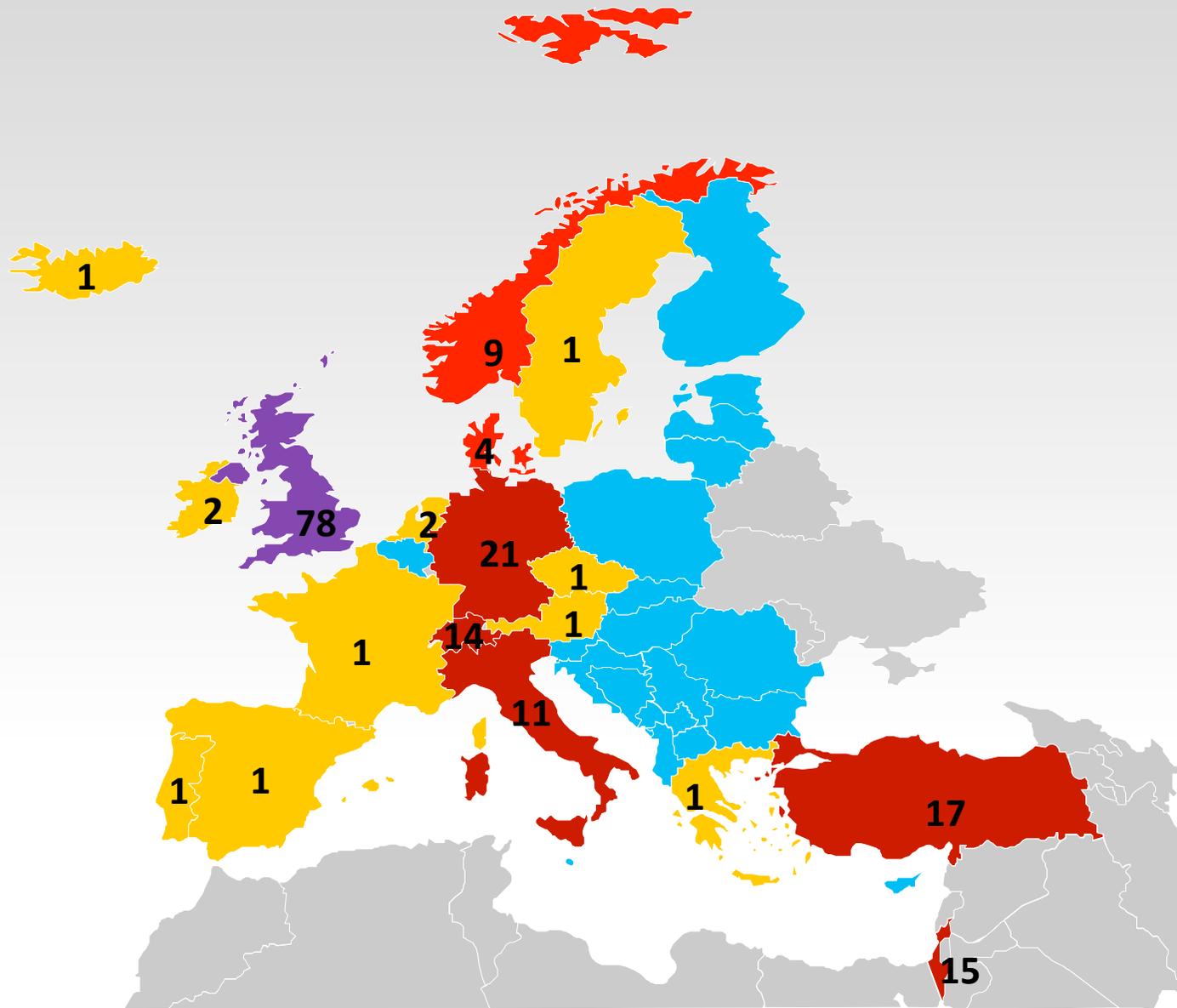
After the workshop: Collection of names and contact points for additional stakeholders; the list was later given to the WP8 (Communication)

A systematic review of research based literature

Transforming the prioritized areas into a systematic literature search strategy

- **Search terms** - Synonyms for *citizen*, *need*, and *attitude* + CAM + Europe
Additional keywords identified during the search
- **Major databases** - Pubmed, Web of Science, CINHAL, AMED, PsycINFO
- **189 papers** were included
 - 150 reporting on quantitative studies
 - 36 reporting on qualitative studies
 - 2 systematic reviews





purple: > 30 articles

red: 10-30 articles

orange: 4-9 articles

yellow: < 3 articles

blue: no data

Numbers indicate number of articles



Information about CAM: Needs and attitudes

Citizens' main sources of information

- Social networks, often based on personal experience
- Biomedical professionals
- Print and broadcast media

Spectrum of disclosure of CAM use to biomedical professionals

- A spectrum of disclosure from very low to high
- Depending on the MDs practice of and attitude to CAM

Citizens' comments:



*... you talk to people who you respect ...
and then you ask them. You talk to as
many people different people; well, I would
talk to as many different people as I
possibly could (Holt et al 2009: 227;
UK)*

*... oh well the bush telegraph I mean is
better than the internet really (Evans et al
2007: online publication; UK)*

Access to CAM: Needs and attitudes

Citizens express a need for

- Increased CAM provision
- Provision of CAM in in public health services
- Diversity of CAM provision and providers
- More research into CAM

Citizens experience barriers of

- Financial costs
- Biomedical professionals' attitudes to CAM
- Limited CAM provision, and provision of particular CAMs only in public health service



Citizens' comments:

It [acupuncture] was on my mind for some years, but it was too expensive when I was a student. But when the health insurance started covering the fees, I told myself: 'I'll give it a go!' because even if it doesn't help, I don't lose that much money. Then I grabbed the yellow pages and he (patient's acupuncturist) was the closest to where I live. (Frank and Stollberg 2004: 361; Germany)



Quality of Care: Needs and attitudes

Citizens value certain aspects of the practice of CAM

- The CAM provider-patient relationship
- The approach underpinning CAM practice, such as person-centred care, personal involvement in care
- CAM is perceived to be safer than biomedicine

Citizens ensure quality and safety of CAM provision and products through

- Use of diverse strategies: such as experiences from social network, professional registration and CAM qualification
- Reliance on regulatory systems and biomedical endorsement

Citizens' comments:



They look at a person, they do not look at a certain diagnosis that is only a small part of the whole body (la Cour 2008: 334; Denmark)

Conclusions from the literature review

Citizens' core attitudes and needs regarding CAM

- CAM is seen to consider 'the whole person' and to be safer than biomedicine
- Availability of impartial, reliable and trustworthy information about CAM
- Wider access to and choice of CAM provision and providers within public health care
- Clear regulatory and educational frameworks of CAM