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Identifying The Role Of "Empowered Patients" In Health Care Management

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Ensuring that patients become recognized partners in the 'health care team', especially given the growing complexity of medicine, is vital in delivering health care. Patient empowerment is a fundamental contributor to patient satisfaction, but also impacts quality through its effects on compliance and self-management. To develop policies to improve empowerment in the general community, however, we need to better understand what empowerment is and how one might measure it.

In the last decade, a number of models of empowerment have been introduced, including social and community empowerment, staff empowerment, general illness, and disease-specific empowerment models for mental disease, brain damage, cancer, orthopedic and trauma patients, HIV prevention etc. There is no existing model that includes the broad range of factors/attributes that characterize the empowerment process and that could be applied for general patient population.

This study is commenced in April 2005 and is designed in three stages, exploring the existing literature, identifying the major characteristics (items) of patient empowerment and patient empowerment descriptive model development.

The **principle aim** of this research is to conceptualize patient empowerment. The **objectives** of the study are to:

1. To conceptualize the process of patient empowerment;

- 2. To create a definition of patient empowerment suitable for application in the general population and to identify the major characteristics (items) of patient empowerment process;
- 3. To develop a grounded conceptual model of empowered patient with the key constructs and items as a base for development of an instrument for patient empowerment measurement.

For the first step in the deductive process the existing literature on empowerment for the last 20 years was critically reviwed, using electronic Medline search. Articles were limited to those published between 1980 and 2005. A total of 4496 papers related to empowerment were initially identified. 3942 abstracts were reviewed for topic relevance after deletion for non human (n= 409) and non English-language articles (n = 145). A detailed review of key papers related specifically to patient empowerment was then performed.

For the second step in the inductive process of the research, qualitative methods are used to develop a detailed understanding of the nexus of inputs, process and outcomes that all constitute patient empowerment. In this research qualitative methods are valuable in providing rich descriptions of complex and rapid changing process like empowerment. The design of the study is prospective, nonrandomized. Following an initial literature review, electronic survey and open-ended semi structured interviews with key informants (N=24) are conducted to explore how patient empowerment is viewed, interpreted, defined and experienced by them in order to refine and validate a definition and model of empowerment. The term item (or characteristic) in the qualitative research and psychometry means the smallest or basic unit, characterized the observed object or process. We selected our sample to represent range professional backgrounds, nationalities and professional training using purposeful, theoretical and snowball sampling techniques. Data were collected via mail, telephone and in person face to face interview. We used an iterative process to simultaneously collect and analyze the

interview data, and analyzed the data for common themes that would inform a new model of patient empowerment.

As a third step, the results of the qualitative study (key informants interviews), with the whole information for the possible constructs, items, advantages and disadvantages of the process of patient empowerment were analysed in order to establish and refine a descriptive model of patient empowerment.

This work is a step forward in understanding and conceptualazing of patient empowerment in the general community. The findings from this study have the potential to pave the way toward future work to converte the key constructs of the patient empowerment model (knowledge, patient support, economics and patient participation) into a scale that can be used to measure empowerment in the community, and to determine whether patients have preferences to be empowered. An increased understanding and potential measurement of patient empowerment is of critical importance to healthcare providers, academics, and policy makers for understanding and improving relationship, results, and satisfaction among patients.