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Abstracts

How does the medical profession perceive patients' rights and the Patients' Rights Act? Results of a Gesundheitsmonitor physician survey

Dieter Hart, Thomas Brechtel, Martin Buitkamp

Keywords: Patients' Rights Act (PatRG), patients' rights, physician survey

Summary

The starting point for the Gesundheitsmonitor physician survey is the 2013 Patients' Rights Act (PatRG). In particular, this gives the treatment contract a regulated status as a new legal type and subset of the services contract. The regulations cover the quality and safety of the treatment, the physician's duty to provide information to patients, documentation obligations, the right of access to medical records, and evidentiary issues. In addition, the act promotes a culture of error prevention, thus reinforcing patient safety, and makes it mandatory for patients to have health-insurance coverage. The PatRG is intended to produce legal certainty and transparency, and to improve enforcement of patient rights.

Background and inquiry

Conducted in 2014, the physician survey is intended to clarify the question of whether the PatRG's objectives are being fulfilled, partially fulfilled, or not at all fulfilled from the perspective of the medical profession, and to provide information on how doctors are reacting to the new PatRG and its enshrinement of patients' rights. The article and its analysis center on questions regarding how well doctors know patients' rights and the PatRG, the everyday and legal significance of

the issue for both doctors and patients, various other perceptions in the health care sector, the scope of information possessed by physicians on the issue of patients' rights, and the effects that patients' rights have on medical practices.

The following hypotheses are tested:

- Knowledge of patients' rights within the medical profession is probably not very highly developed.
- Familiarity with the PatRG is less widespread than familiarity with patients' rights more generally, as the measure has been in effect for only two years.
- Those who are familiar with the PatRG also have a good understanding of patients' rights, as the PatRG standardizes patient rights.
- Hospital-based physicians have better knowledge in this respect than do doctors working in private practices.
- The introduction of patient rights is largely seen within the medical profession as a burden on the doctor-patient relationship.
- Familiarity with and the degree of observance of patients' rights varies strongly according to medical specialty.

Methods

An online survey of private-practice and hospital-based doctors in Germany was carried out as part of the 2014 Gesundheitsmonitor physician survey. A total of 800 online interviews serve as the foundation of the data analysis. Analytical methods include descriptive statistics, rankings and logistic regression.

Findings

The survey results show that more than half of the respondents believe the objectives of "transparency," "legal certainty" and "increasing enforcement of patients' rights" have not been achieved. The new rules' benefits may be considerable for patients, but they are more of a burden for doctors, as the time expenditure needed to follow their requirements has risen significantly. After about two years in effect, just under 70 percent of respondents were aware of the PatRG, although only about 20 percent could be deemed to have an expert-level knowledge of the law. A total of 32 percent – about one-third – of the physician community was not familiar with the PatRG. Both in terms of knowledge of patients' rights and of the PatRG, hospital-based doc-

tors performed better than doctors in private practice. The surgical, orthopedic and anesthesiology fields demonstrated a stronger affinity for the issue as well as more familiarity with the PatRG and with the issue of patients' rights more broadly. By contrast, the degree of knowledge regarding the issue is lower among primary-care physicians and psychiatric practitioners.

Conclusions

The assessment clearly shows that knowledge of the PatRG and of patients' rights is both capable and in need of improvement, and that legislators' objectives of creating more transparency and reducing implementation deficits have not yet been achieved. The fact that not even a tenth of the doctors surveyed had been approached by patients multiple times regarding their rights can be seen as an indication of the low overall relevance of the issue within the doctor-patient relationship. The difference between hospital-based and private-practice doctors illuminated the question of the relative utility/harmfulness of the PatRG. The experts among the hospital-based doctors were more likely than the average respondent to assess the law as being useful, but were also more likely to deem it superfluous. This can be seen as an indication that the PatRG is considered in the legal literature to be a recapitulation of the status quo without any appreciable innovation, and that this assessment has been inherited within the medical profession.

The survey shows that there is still a great need for information regarding the PatRG and patients' rights, among both doctors and patients. In this regard, it is clear that the objective of the law – to produce legal certainty, transparency, and information on the issue – has not (yet) been satisfactorily achieved. There remains today a significant need for information.

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Black-box health policy: The (lack of) awareness of important health-policy decisions within the electorate

Nils C. Bandelow, Florian Eckert, Robin Rösenberg

Keywords: health policy, health care reform, awareness, voter knowledge

Summary

The general population's knowledge of health care policy issues is quite limited. In particular, relatively few people are familiar with laws and policies that have only an indirect effect on the insured population. Health care policy knowledge is correlated with the level of formal education and interest in health care policy issues. By contrast, no systematic differences in knowledge associated with insurance status, health status, or demographic characteristics are evident.

Background and inquiry

Public trust in the health-policy problem-solving capacity of the main political parties is limited. Given the often contentious disputes between the political parties, a question arises as to how the electorate's health-policy literacy can be assessed. The study examines whether knowledge regarding policies is dependent on direct impacts on the insured population or whether it reflects the measures' political significance. In addition, possible correlations between individual health-policy literacy and health status, sex, formal education, interests and party preference are also analyzed.

Methods

The basis for the article is a series of questions on health policies that was included as a specific component of the current 2014 Gesundheitsmonitor survey. Respondents were asked about their familiarity with selected health-policy decisions of the recent past. The laws and measures were distinguished with regard to direct and indirect impact on the insured population, thus enabling differences in the degree of familiarity with the various measures to be systematized. An overall index summarizes the individual areas of knowledge and examines correlations with other Gesundheitsmonitor variables in the context of bivariate analyses (controlled using a multivariate model) and significance levels based on chi-squared tests.

Findings

The study shows that the short-term direct impact on the insured population, rather than political significance, is almost wholly responsible for whether health-care policy measures are known. Thus, measures in the areas of financing or care provision are almost universally more broadly known than are structural or governance reforms. Attribution of party-political responsibility for laws and policies is seldom successful. A disproportionate share of people assigned responsibility for the abolition of consulting fees to their own preferred party. Overall, the level of knowledge is very low. These findings vary only slightly depending on insurance status, subjective health conditions, and the presence of chronic illnesses. Only higher levels of formal education, the use of health-policy information sources, and to some extent gender show (weak) correlations with better health-policy knowledge.

Conclusions

The results illustrate how limited the legitimating potential of parliamentary and corporatist bodies in fact is within the area of health care policy. Election results can hardly be interpreted as an endorsement of specific decisions. Supplementary legitimation through participatory advisory committees is therefore desirable. In addition, organized groups and/or individuals with strong health-policy competences – for instance, experts from within the health or social sciences – should participate as broadly as possible in decision-making processes, by providing systematic observation or commentary, or in a consulting role.

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Ask Dr. Google first? Use of new media to gather and exchange health information

Eva Baumann, Fabian Czerwinski

Keywords: Information seeking, Internet, social media, health information, patient information, patient roles, health literacy

Summary

The Internet has already taken on a prominent and growing role with regard to health communication and patient information. Taking a user-centered perspective, this article examines the importance of online media in contributing to health-related knowledge and beliefs, and analyzes sociodemographic and health-related factors of health information seeking on the Internet in Germany.

Background and inquiry

The article examines the relevance of the Internet for citizens with health-related questions, the specific information citizens search for and the online services used for their search, what their objectives are, and what personal characteristics and health-related factors affect the use of the Internet for health-related purposes.

Methods

First, the users of health-related online media are identified in the Gesundheitsmonitor dataset. In a second step, this population is divided into two groups according to the frequency of their health-related Internet use. Two logistic regression models enable a comparative examination of the influences produced first by general use of the Internet to obtain health information, and second by comparatively frequent use. For those seeking online health information, the online media and content they use as well as their objectives are described, as are the terms they use to search for information.

Findings

A large majority of the population actively seeks information on health issues, using a number of different information channels in doing so. The Internet is fully established as an information source on health topics. Age and socioeconomic status serve as significant predictors not only of health-related Internet use in general, but also of the fre-

quency of use; there is no evidence of gender differences. Active health information seeking behavior is more likely if a person is acutely affected by health problems, demonstrates a higher general interest in and consciousness of health issues or is seeking to improve the own health literacy as a patient. In addition, a low level of satisfaction with primary care provision is associated with more intensive use of the Internet to search for health information. Frequent Internet use serves primarily to expand the patients' individual level of knowledge and range of information, and strengthens the patients' role in interactions with health professionals. Information seeking behavior on the Internet is usually initiated using a search engine.

Conclusions

The Gesundheitsmonitor data show that health-related Internet use can be associated with both gains and risks. On the one hand, health information seeking on the Internet can help to improve health literacy and to strengthen patients' roles; on the other hand it might also reinforce social and health inequalities. Health professionals should thus face the challenge of providing stronger support particularly for older and less educated groups that show a less pronounced health orientation in their health and information consumption practices. This group needs to be motivated and empowered to engage in proactively seeking health information. At the same time, it is important to provide guidance regarding quality-assured health information for all Internet users and facilitate information seeking.

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The pharmacy – A modern supermarket?

Gerd Glaeske, Stanislava Dicheva, Kristin Sauer

Keywords: pharmacy, consulting, customer issues, primary pharmacy, online pharmacy

Summary

Pharmacies in Germany play an important role in the supply of medicines. As part of a survey, the opinions, perceptions and experiences of customers and patients with the institution of the pharmacy and pharmaceutical counseling were compiled and evaluated. Further questions solicited impressions of pharmacy premises and employees, as well as the range of products offered. Included in the analysis are respondent experiences that influence the choice of a specific pharmacy, including the ability to obtain information about intimate problems, the responsiveness of the pharmacy's staff, offers of less-expensive products and other personal factors.

Background and inquiry

The article examines the following hypotheses:

- Customers' choice of pharmacy is influenced by various factors such as age, gender and the presence of chronic illness.
- The customer perceives pharmacies as modern supermarkets, in which cosmetics, dietary supplements and wellness products are primary offerings, and sales are the focus.
- The advice legally mandated to be provided with pharmaceuticals does not always take place in Germany, even when requested.

Methods

The analysis is based on data collected from a representative sampling of 1,728 insured individuals in the context of the annual Gesundheitsmonitor survey (2014 edition). Analytical methods include descriptive statistics and logistic regression.

Findings

According to the survey, more than a third of the respondents make purchases at least every three months in a pharmacy. About half of these people spend €49 or less. The choice of pharmacy is influenced by age and gender as well as the person's social class. The most com-

mon reasons to choose a primary pharmacy include the staff's friendliness and the proximity of the pharmacy itself. Other influential factors include the presence of chronic illness and the advice provided about pharmaceuticals. Most respondents feel they are in good hands at their primary pharmacy, and receive comprehensive and competent advice.

Conclusions

This survey shows that pharmacies in Germany today do in fact behave like supermarkets with respect to their product range, and are perceived in this way by their clientele. Nevertheless, the majority of respondents feel they are in good hands in the pharmacy, and appear satisfied with the advice offered. However, respondents also indicate that the advice (for example, checking on drug interactions or counseling against medicines that would not be useful) and service (offers and comparative prices) should be improved.

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Health – A commercial product? Public opinions and experiences.

Bernard Braun, Gerd Marstedt

Keywords: health, consumerism, health products, prevention

Summary

The article examines the prevalence of behaviors that can be interpreted as health consumerism, as well as these behaviors' underlying motives. Among other questions, it addresses whether individual population groups, defined either by social statistics or health characteristics, display a health-consumerist orientation to an above-average degree. Moreover, it looks at what other patterns of activity might be associated, such as risk-taking behavior, an interest in health information, utilization of medical care, and trust in physicians and medicine.

Background and inquiry

The phenomenon of health consumerism serves as the background of this study. This involves the frequent – not simply one-time or limited to exceptional circumstances – and broad-ranging consumption of products that have the objective of “improving or maintaining health.” Unlike most prescription products, these are explicitly and boldly marketed and advertised with the “health” label, even if health-related effects are claimed only indirectly, or the assertion of such effects has been proved in scientific studies to be untenable or dubious.

Methods

Gesundheitsmonitor surveys, with representative population samples from the years 2011 and 2014, serve as the empirical basis of the study. About 1,750 men and women between the ages of 18 and 79 took part. The data was analyzed using descriptive statistics and the multivariate logistic-regression method.

Findings

Around 5 percent of the population shows a lasting and consistent pattern of health-consumerist behavior, while a third of the population shows this on an occasional basis. This does not result from a higher degree of health problems, but is rather associated with a larger, mostly cognitively oriented concern with personal health and a lower tolerance for symptoms. This leads to earlier or more frequent

visits to the doctor (including specialists) or use of vitamin pills than is the case for others. Health-consumerist tendencies are typically found in comparatively young members of the upper and upper-middle classes.

Conclusions

One consequence is a firmer ban on unsupported health claims through the executive, the courts, and the bodies given competence under the EU health-claims regulation, as well as a more scrupulous oversight of these standards. Beyond that, however, the policies and legal requirements for information for adult citizens regarding appropriate and inappropriate or even risky health-consumption expenditure appears to be in need of improvement. In this regard, for example, medical associations should go systematically through the catalogue of “individual health services” (IGeL) to find medical services and products that primarily appeal to those with a health-consumerist orientation, but show no (or show only in exceptional cases) demonstrable medical effect. For the acquisition of health literacy, it additionally follows that a large portion of the population needs more thorough and contextually appropriate knowledge of the importance, correct usage and benefits of health and health-related services.

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Extra services during pregnancy: Safe all-round care or a business based on insecurities?

Rainhild Schäfers, Petra Kolip, with technical advice from Claudia Schumann

Keywords: Maternity Guidelines, prenatal care, prevention, IGeL

Summary

Care provided during pregnancy goes well beyond the amount agreed to in Germany's Maternity Guidelines (MSR). For example, a quarter of all pregnant women receive more than five ultrasound exams, instead of the three specified in the MSR. Pregnant women are offered or request a variety of services that must be self-financed because they are categorized as individual health services (IGeL).

Background and inquiry

The article addresses the extent of benefits provided as well as the question of whether women are sufficiently informed about the benefits and limitations of the examination procedures. The focus is on services that experts say have strongly increased in use (ultrasound, CTG, vaginal swab for Group B streptococcus and special blood tests, as well as acupuncture and craniosacral therapy to prepare for the birthing process).

Methods

Nearly 4,000 women insured by Barmer GEK, all of whom gave birth in the years 2013 or 2014, were randomly selected using a written questionnaire (1,293 evaluable questionnaires, for a response rate of 33%). The data is evaluated using descriptive and inferential statistics. Analysis of correlations is carried out using chi-square tests and logistic regressions.

Findings

Nearly all women (99%) have engaged in preventative measures beyond those contained in the MSR. Four out of five women received more than three ultrasound scans. Contrary to international guidelines and MSR specifications, CTG seems to be established as a routine examination procedure. There is no scientific evidence indicating that 3D and 4D ultrasounds provide greater benefits; however, more

than 40 percent of the respondents reported having undergone such an examination. For all investigations, the high proportions of women who underwent them without an explicit indication is impressive. As reason for the examinations, the women surveyed indicate strikingly often that it was their own wish, as well as the recommendation of the physician. Socioeconomic and sociodemographic factors have little influence on utilization. Four out of five women indicate that they have made a copayment for one or more services. Only half of the women feel they have been very well informed with regard to the process.

Conclusions

The conclusions show that prenatal care goes far beyond what is specified in the MSR: Women are offered or request numerous individual health services for which there is no scientific support, and which the pregnant women must finance themselves. In particular, the expanding use of the CTG process is impressive, and contrary to scientific evidence. Prenatal care has developed into a lucrative IGeL market, and numerous examinations (ultrasound, CTG) have lost their significance as medical examination procedures.

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The effectiveness of prevention measures: The public's view

Joseph Kuhn, Veronika Reisig, Rebekka Schulz, Birgit Reineke, Gabriele Bolte

Keywords: prevention, measures, effectiveness, public-health agency

Summary

The article examines the value attributed to the effectiveness of prevention measures in the general population's subjective perceptions, as well as in decisions regarding the use of preventative services. To this end, results from the 2014 Gesundheitsmonitor survey are used. It emerges that respondents deem both environmental and behavioral preventative measures to have significant value. In the decision to engage in a particular preventative measure, effectiveness is only one of a number of decision criteria for the survey respondents. Several conclusions can be drawn from the results that bear on current prevention-policy proposals.

Background and inquiry

The expansion of prevention represents a major task for health policy in the coming years. The planned Prevention Act seeks to strengthen the role of physicians in promoting prevention, in part by treating them as gatekeepers for preventative measures. Both the effectiveness of preventative measures and the public's ideas about this effectiveness must be considered in providing advice on preventative services. However, it is largely unknown what role the effectiveness of preventative measures subjectively plays for the target group, what measures they regard as effective, and where they obtain or want to obtain their information. The goal of this study is to illuminate these questions on the basis of an empirical survey.

Methods

Data is drawn from the responses provided by 1,728 insured adults (814 men, 914 women) in the context of the representative 2014 Gesundheitsmonitor survey (response rate 75%). The information was analyzed using descriptive statistics and multivariate logistic regression techniques.

Findings

Widely varying subjective ideas of effectiveness emerge from the analysis, with positive evaluations of selected environmental preventative measures (e.g., seat belt requirements) as well as of behavioral and medical preventive measures (e.g., class offerings or certain vaccinations). Respondents identify physicians as being the most important and trustworthy sources of information regarding effectiveness, followed by their own experience. Internet forums or chats play only a minor role. A doctor's recommendation, possible side effects and the subjective feeling of "it helps" emerge as the most important factors affecting the decision to pursue a particular measure, although scientific proof of effectiveness also shows itself to be important. However, a majority of respondents feel they are not sufficiently informed with regard to the effectiveness of preventative measures.

Conclusions

The survey shows the need for information, and reveals a fundamental opportunity to influence subjective conceptions of prevention's effectiveness by providing information. The prominent role played here by physicians and pharmacists should be considered in the training and continuing education provided to these professional groups. However, the high expectations placed on these professions may also reflect a situation in which people attempting to take individual responsibility feel overwhelmed by often-unclear information, and turn for relief to the classic paternalistic health experts. The nuanced evaluation of new media as an information source points to an increase in media literacy that could be applied to future information strategies.

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Attitudes of the German population to smoke-free legislation, e-cigarettes use, and tobacco education campaigns.

Katrin Schaller, Simone Braun, Martina Pötschke-Langer

Keywords: protection of non-smokers, e-cigarettes, secondhand smoke, smoke-free legislation

Summary

Smoke-free legislation has significantly reduced exposure to secondhand smoke in Germany. Public support for these laws has risen since their introduction, and today nearly 80 percent of smokers support a smoking ban even in private areas such as a car if children are present. The new e-cigarettes are interesting for smokers in particular – 8 percent of them have tried them, mostly as an aide to smoke less or quit smoking altogether. The motivation to quit can be supported through various tobacco-control policies, particularly through a significant increase in cigarette prices.

The public's positive attitude toward smoke-free legislation should be used to eliminate current gaps in smoke-free laws. In order to maintain the non-smoking trend, additional tobacco-control measures are needed on a continuous basis.

Background and inquiry

Various policy measures such as smoke-free laws, health warning labels, advertising bans, price increases and tobacco education campaigns have contributed to reducing tobacco consumption. New products such as electronic cigarettes could counteract this trend.

Through a comparison with data from 2007, this paper examines how public attitudes to the smoke-free laws have changed since their introduction, and whether secondhand-smoke exposure has decreased. In addition, it describes the current development of e-cigarette consumption, and shows what policy measures are most effective in motivating smokers to stop smokers.

Methods

The sample for the 2014 survey includes 1,728 people (814 men and 914 women) between the ages of 18 and 79. In the 2007 survey, 1,497 people took part (715 men and 782 women), also between 18 and 79 years of age.

Findings

The results show that Germany's smoke-free legislation is effective, and that it has improved health protections even in private environments. Secondhand-smoke exposure has drastically declined in Germany as a consequence of the smoke-free legislation; indeed, by 2014, 80 percent of workplaces, private households, and leisure-time locations were smoke free. Approval for the regulations has risen along with the successful implementation of the laws, particularly among smokers. Eighty percent of smokers – twice as many as in 2007 – support their application even within the private sphere, in the form of a smoking ban in cars in the presence of children.

E-cigarettes are a relatively new consumer product; however, most people in Germany (87%) are aware of them. Eight percent of smokers have tried them at least once, while almost no non-smokers have done the same. The primary reasons for trying e-cigarettes are the desires to smoke less, to use a less harmful alternative to conventional cigarettes, and to use e-cigarettes for smoking cessation.

As particularly effective incentives to stop smoking, smokers identify significant increases in cigarette prices, health campaigns and pictorial health warning labels on cigarette packages. Smoking bans also provide motivation to give up smoking or smoke less.

Conclusions

The smoke-free legislation introduced in Germany in recent years has had a positive impact, and shows wide and increasing support. The positive public attitude should be used to rectify current gaps in smoke-free laws through the passage of comprehensive laws without exemptions.

Electronic cigarettes are currently of interest primarily to smokers. However, e-cigarettes are not a recognized smoking-cessation aid. Moreover, the aerosol emitted into indoor air could have adverse health effects on bystanders, and the use of the product in non-smoking areas could undermine efforts to reduce tobacco consumption. For these reasons, e-cigarettes should be regulated like tobacco cigarettes for public health protection.

Smokers and ex-smokers cite increases in cigarette prices and pictorial health warning labels on cigarette packages as particularly motivating in the attempt to stop smoking. By contrast, the tobacco advertising that is still allowed, which is seen by many non-smokers as well

as smokers, has the potential to persuade smokers to continue smoking, while inducing non-smokers to try it. In order to support the current non-smoking trend, the tobacco tax should be regularly and significantly increased; in addition, pictorial health warning labels on tobacco packages and a comprehensive tobacco-advertising ban should be introduced.

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Prevention of harmful lifestyle influences: Roles and acceptance within the general population

Tobias Effertz

Keywords: structural interventions, impulsiveness, lifestyles

Summary

This article surveys the general population's attitudes toward various preventative measures, particularly structural interventions. Overall, the general public supports a broad variety of preventive measures to widely different degrees. First, from a purely descriptive perspective, instruments with a rather "harsh" effect on lifestyles, such as taxes on unhealthy foods or advertising bans, meet on average with disapproval. However, the analysis shows that approval of structural intervention measures such as taxes and advertising restrictions rises contingent on the evaluation that the respondent's own style of consumption will lead to future health impairments. This can be interpreted as indicating that structural interventions appear as an important help for people who find it difficult to change their habitual consumption patterns, and who are also conscious of this fact. Two-thirds of the public across all social strata are in favor of a ban on marketing directed at children.

Background and inquiry

The objective of this paper is to assess German attitudes toward various prevention instruments, particularly those deemed to be especially effective (such as advertising bans and taxes on unhealthy foods), and to analyze their relationship to certain other characteristics.

Methods

In addition to descriptive information regarding the perceived effectiveness of individual prevention instruments, regression models were used to assess attitudes regarding prevention instruments in relation to various characteristics such as socioeconomic status, age and impulsiveness, as well as possible lifestyle factors such as smoking, high alcohol consumption, obesity and unhealthy diet.

Findings

Two-thirds of the general population support a ban on marketing directed at children. According to surveyed beliefs regarding measures' effectiveness, a higher degree of efficacy is attributed primarily to structural-intervention measures – contrary to scientific findings. Obese individuals in particular are initially rather reluctant to accept structural-intervention measures. Nevertheless, individuals with unhealthy lifestyles are well aware of the threat of health problems. As this knowledge increases, the support for structural-intervention measures increases as well.

Conclusions

Although the population in this survey regards comparatively less intrusive prevention measures as effective, structural-intervention instruments are supported by people who are worried about their health. The objective of health policy should be to raise people's consciousness about their own unhealthy lifestyles, while at the same time mitigating to the extent possible the perceptible costs of any constraint produced by structural-intervention measures. Restrictions on food advertising directed at children are desired by a two-thirds majority across all social strata and party affiliations, and should be implemented politically as soon as possible.

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The health status of atypical and precarious workers

Melanie Schnee, Joachim Vogt

Keywords: health, precarious employment, atypical employment, health behavior

Summary

This paper examines whether health status differs between regular, atypical and precarious workers. This is determined on the basis of subjective self-assessments and survey respondents' reports of chronic illnesses. To explain possible health differences, the three influence-amenable explanatory factors for health or illness are considered: lifestyle, health care provision and the environment (with a focus on the work environment). This should reveal whether potential differences in the three surveyed groups are associated with differences in reported health behavior.

Background and inquiry

The following key questions are examined: Do precarious workers differ from regular or atypical workers with regard to their health status, their health behavior, their use of health services, their sick days, their presenteeism, or their experience of leadership and the work environment?

Methods

Using a combination of several surveys (15th, 21st and 22nd editions of the Gesundheitsmonitor, n=2,963), the questions are answered using a (partially logistic) regression methodology, the outcome of which is intended to show whether employment status – along with sex, age and social status – plays a role in determining health status or health behavior.

Findings

Precarious workers show an above-average incidence of sickness, and make use of health services more often than others. Nevertheless, there is no evidence of worse health behavior in parallel with this reported worse health status. At the same time, the data shows that precarious workers do not report a greater incidence of sick leave than people in normal employment; thus, their worse health status is not

correlated with notable additional absenteeism. Atypical workers, by contrast, show only a greater incidence of chronic illness than normally employed individuals, and even take fewer sick days. In this group too, no noticeable differences in health behavior are evident in comparison to full-time employees.

Conclusions

The situation of precarious workers could be improved on two levels. On a social- or health-policy level, a stronger focus must be placed on the fact that precarious employment can be associated with health problems that give rise to costs. Environmental factors that can be changed through policy, such as living and working conditions, must be taken more strongly into account. However, the businesses and organizations that create precarious jobs also have a responsibility. Precarious employment has no more than a short-term supposed benefit, but perhaps also has long-term adverse impact on organizational success.

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Psychological stress at the workplace: Results-oriented management, self-detrimental behavior and the consequences for employees' health
Anja Chevalier, Gert Kaluza

Keywords: self-detrimental behavior, stress at the workplace, management by objectives, target-oriented spiral, work-life balance

Summary

In the past decade, a paradigm shift has taken place in corporate management. Direct management styles (command and control) have increasingly been replaced by indirect, results-oriented management styles (management by objectives). Under these latter forms, only the results rather than the time or effort expended are relevant.

Results-oriented management is supposed to imply benefits, not only for employers (such as increased productivity or improved salary planning), but also for employees (such as greater autonomy at work, and a better work-life balance). However, management by objectives can also be problematic when objectives are linked to economic growth rather than the employees' capabilities (target-oriented spiral).

The present paper therefore investigates the negative consequences of indirect management, particularly with regard to psychological and physical strain and self-detrimental behavior (i.e., an undermining of labor-protection regulations, working overtime regularly or at the limit of personal capabilities).

We investigate the effects of the following indicators of results-oriented management: flexible working hours, greater job-decision latitudes, leadership by objectives, and perceptions of target-oriented spirals at work.

Background and inquiry

Numerous recent studies have highlighted the increasing prevalence of psychological and socio-emotional strain at work as well as the resulting costs for companies. The question has arisen regarding the degree to which results-oriented management styles facilitate these developments.

We investigate:

- 1) to what extent results-oriented management characteristics are prevalent in the German work environment;

- 2) whether these characteristics are correlated with employees' self-detrimental behavior, as well as with psychological and physical strain; and
- 3) to what extent self-detrimental behavior explains the effects of the management characteristics on psychological and physical strain.

Methods

We analyzed a subsample of the 22nd edition of the Gesundheitsmonitor, which is a representative survey of the German population (total sample size, $N = 1,728$). The subsample included all subordinate full-time employees ($N = 487$) excluding people in training programs, shift workers and those on special leave (for example, maternity or parental leave). The analyses were conducted by means of descriptive and inferential statistics, in particular regression models.

Findings

The main findings demonstrate that indirect management styles are relatively widespread in Germany: Nearly half the respondents have broadly flexible working hours at least in the framework of flextime arrangements. For nearly a quarter of respondents, working hours are not systematically recorded, and overtime is neither remunerated nor compensated for in any other way. On average, more than 40 percent of employees work on the basis of regularly specified targets (management by objectives), and those targets increase regularly (target-oriented spiral).

However, flexibility with regard to work organization is also widespread: About half of the respondents plan their own work, work pace and breaks. However, only about one-fifth of the employees can influence the amount of work.

The strongest predictors of self-detrimental behavior and related job strain are target-oriented spirals (promoting such behavior) and greater job-decision latitudes (reducing such behavior). Self-detrimental behavior also has an independent effect on psychological and physical stress. In other words, results-oriented forms of management influence employees' stress not only directly, but also indirectly through employees' self-detrimental behavior.

Conclusions

The significance of the correlations provokes critical consideration of the economic-growth-oriented objectives within indirect manage-

ment systems. The sustainable development of a mindful, limits-conscious work and performance environment is essential for employees' health. For its realization, mainly the The company's management bears the greatest degree of responsibility for creating this, but employees too, bear some responsibility.

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Designing society-wide prevention and health-promotion programs

Interview with Dr. Ilona Kickbusch on the issue of prevention and the Prevention Act

Keywords: prevention, intersectoral health policy, Health in all Policies, Prevention Act, health literacy

Summary

The Gesundheitsmonitor's featured interview presents the importance of prevention as a societal responsibility and challenge. To this end, the perspective of the "Health in All Policies" approach is discussed in detail. This point of view makes it clear that in the future, prevention programs must be designed and implemented intersectorally. For the German health system, this means a significant strengthening of the municipal level and a new importance for local health agencies. Numerous examples and pilot projects in Germany and neighboring European countries illustrate this trend.

Conclusions

Health literacy is on one hand perceived as a system competence, or an ability to understand the health care system. On the other hand, it is also a policy competence within the area of health. Health policy as a whole, the role and significance of actors within the health system, and the behavior of insured individuals must adapt to this new perspective. National health systems must become more comprehensible. In the future, many policy measures from a broad variety of areas will become relevant to health, thus becoming a new state responsibility under this comprehensive view of health policy. This applies to all levels of government: the federal government, the federal states, and the municipalities and regions. The state has the responsibility in this regard to ensure the presence of reliable, high-quality institutions.

With regard to the period following the passage of the Prevention Act, the first task is to strengthen social policy, and specifically health policy, with an eye to inequalities and not solely with regard to the issue of poverty. The social determinants of health need to be looked at more closely.

Secondly, links to environment, transport and education policy are important, as these areas are closely associated with health. Cooper-

ation with the federal states is critical. Education policy plays a key role with regard to increasing health literacy.

Third, high-priority fields of activity must be addressed. Among these is the classic public-health area of expanding immunization, for example; moreover, in the area of new public health, the reduction of sugar consumption through a variety of measures is important.

Finally, the international community bears a shared responsibility: At stake is not just health in individual nation-states, but rather health in all countries – in Europe, and around the world.

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