

## STATEMENT TO POLICY MAKERS

Project entitled “**Strengthening transversal competences of low educated employees concerning their health choices in the context of changing labour market**” (Project LEECH, grant agreement **14222-LLP-2008-PL-GRUNTVIG-GMP**) has been carried out in four EU Member States, namely Poland (The Nofer Institute of Occupational Medicine as the Project coordinator), Latvia, Slovenia and Spain.

The Project LEECH addressed the Low Educated Employees (LEE) as a long-term beneficiary group. According to research evidence there are significant gaps between LEE and working population with the higher level of education in terms of their health status as well as health behaviours that lead to poor health. The poor status of LEE’s health generates appreciable social costs, particularly through lowering LEEs’ opportunities in the contemporary labour market and diminishing their personal chances to access well-being.

Project LEECH aimed at understanding these differences in more detailed way and preparing the recommendations for tailored adult health education aimed at LEE.

To meet these aims the Project LEECH:

- identified specific ways of perceiving health and its determinants, characterized health literacy, knowledge and beliefs concerning personal health choices through a questionnaire-based study conducted on representative samples of workers from four participating countries;
- collected and formulated recommendations concerning effective methods of approaching LEE with health education;
- identified educational framework available to workers that could be used for introducing healthy lifestyle education strengthening transversal competences of LEE;
- prepared a set of workshop educational materials and a manual for trainers regarding health education for LEE;
- trained a group of 120 educators/trainers in the Project countries.

The studies carried out during this project supported by previous results have shown that group of low educated employees in many situations constitute a specific and difficult recipient of health education and promotion projects. At the same time the variations within members of this group and differences among project countries are significant.

More detailed information on project results could be found in the Project LEECH manual titled “**The low educated employees towards health – challenges for health education**” (Editors *Elzbieta Korzeniowska, Krzysztof Puchalski*, Published: *Riga Stradins university, Latvia, 2010*).

However the most important message to experts and policy makers involved in shaping and developing of various adult learning programmes in field of health is that there are some important recommendations to be taken into account whenever training for low educated employees are planned or executed.

Here are the **key recommendations** concerning educational and promotional activities focused on stimulation of health-friendly behaviours of low educated employees, based on the results of this project and other information:

1. Wider recognition is necessary of the fact that people are not always guided by rational thinking but rather their own rationality, which may be perceived as different and “illogical” by an external observer. Any educational activities should take into account adjusting of planned activities to identified specificity of the target group.

2. Health training and promotional activities for low educated employees are advised to be of comprehensive rather than single approach nature – they shall include necessary health information, shape necessary physical and psychological skills and capacity to keep on with health lifestyle while building positive emotions and trust with trainers. This sort of activities shall whenever possible be of long term nature.

3. Health training and promotional activities shall concentrate not only on health but also to “positive side effects” such as one’s good physical appearance, fitness, prospect of better job etc. Not only that as it is also recommended to include encouragement to positive changes in work environment (professional development, improvements in infrastructure etc.).

4. Often low educate workers are known to have lower self esteem and psychological capacity so it is worth including complex and integrated activities to focus on these issues including teaching of simple behavioural tactics and establishing of health friendly and encouraging environments.

5. When planning health training and promotional activities it is recommended to offer some quickly rewarding activities to compensate for long term “investments” in their health (such as giving up unhealthy habits that were pleasant to person but is not providing immediate improvements).

6. Health related training should be provided with respect to fact that formal and “school” like approaches (long lectures, guides to read, speaking in front of class etc.) might not be effective as opposed to training methods involving various types of awards and encouragements (lotteries, small gifts or souvenirs etc.).

7. More attention shall be paid to explaining terminology that is often used when discussing health issues as these definitions despite their common use are not familiar to most of the low educated employees. Therefore friendly approaches to explain even the widely known concepts using real life examples are encouraged to improve health literacy.

8. Shift from communication in general level to larger group of persons to individual discussion and involvement of person in care of his own health (like offer of simple medical tests, interview with medical staff etc.) could prove to be valuable as it stimulates interest in one’s health and demonstrates that it is not necessarily complicated and unpleasant. It also helps to re-formulate general information from trainings down to individual daily life of an individual.

**Strengthening transversal competences of less educated employees concerning their health choices in the context of changing labour market**

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9. Phenomena of exclusion and stigmatisation of low educated employees need to be counteracted especially in projects implemented at workplace level. This may be achieved by careful planning of any such interventions involving all groups of workers and not stressing the low educated workers as the main (only) beneficiaries of such activities.

We hope you will find it possible to promote the recommendations of the project and implement them in national training systems and curricula.

For further information on the project and its results you can visit one of the following websites of project partners:

- [www.promocjazdrowiawpracy.pl](http://www.promocjazdrowiawpracy.pl), [www.imp.lodz.pl](http://www.imp.lodz.pl) (English and Polish version of the project web page)
- [www.ivadis.es](http://www.ivadis.es) (Spanish version of the project web page)
- [www.cilizadelo.si](http://www.cilizadelo.si) (Slovenian version of the project web page)
- [www.rsu.lv/ddvvi/leech](http://www.rsu.lv/ddvvi/leech) (Latvian version of the project web page)

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