

Modern health care policy is directed at giving patients an active role in health care instead of keeping them the passive recipients of care they used to be. Today, patients should be active participants in health care decision-making, making informed choices of health care providers, getting involved in shared decision-making with medical professionals, and participate in client councils and patient organisations. Much is expected from this policy. It would both democratise decision-making and increase the effectiveness of health care. Much time, money and energy have been spent on this type of health care reform. Policy-makers seem to think that if patients are provided with information and the opportunity to participate, the benefits of the reform will surely follow. This thesis studies whether this is true and how the policy of active patientship works out in practice. It shows that although this policy has presented opportunities for increasing the empowerment of patients, important negative effects and tensions can be identified. As a result the two goals of active patientship cannot unambiguously be found in practice. This situation leads to the conclusion that there are limits to patient power which should be acknowledged.

THE LIMITS OF PATIENT POWER

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EXAMINING
ACTIVE
CITIZENSHIP
IN DUTCH
HEALTH CARE

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