FACT SHEET

The concept of a Patient Advocacy Leaders Summit (PALS) was developed in 2002* as a way of bringing together diverse patient advocacy leaders to improve their advocacy capacity and identify ways to collaborate and unify the voices of many. PALS involves health advocates coming together to learn from thought leaders and one another, collaborating to expand influence, refining advocacy skills, and exploring ways to work together to improve health and healthcare. The PALS Advisory Board, comprised of influential patient advocacy leaders representing diverse organizations and geographic regions, provides direction to ensure that all PALS programs meet the needs of the health advocacy community. PALS has always subscribed to the motto “By Advocates, For Advocates”.

PALS has gained great momentum in fifteen years, improving the knowledge and effectiveness of the health advocacy community at the local, state, regional, national and global levels. Since 2002, well over 7,000 leaders representing approximately 2,000 organizations in 50+ countries have participated in more than 85 PALS events around the world.

- Thirteen National PALS events have been conducted in the US since 2002. Over 90 Regional PALS have been held in the US since 2005, and they continue today as Regional PALS events along with more focused Regional PALS Roundtable events.
- In 2004, an International PALS event involving 400 advocates from 26 countries and 38 States was held in the US. Since then, PALS events have been held in Australia, Brazil, Bulgaria, Canada, Czech Republic, Estonia, Finland, France, Germany, Japan, Latvia, the Netherlands, Portugal, Romania, Qatar, Slovakia, Switzerland, United Arab Emirates and the UK.
- As a way of sharing PALS with more advocates, ePALS webinars were introduced in 2014. They are designed to connect, educate and empower advocates across the country on timely policy issues as well as to provide skill building opportunities.
- Plans are underway to launch a Center for Patient Advocacy Leaders, in order to better harness and broadly utilize the resources, learnings and collective impact of PALS and the national PALS network.

Mission of PALS: To improve the lives of those affected by disease and chronic health conditions, by educating and mobilizing health advocacy leaders to work collaboratively developing impactful policy and advocacy solutions focused on the prevention and elimination of disease and chronic health conditions.

Vision of PALS: United and empowered health advocates improving health and healthcare in our communities.

Key Values of PALS: Collaboration; Leadership; “By Advocates, For Advocates”; Patient and Family Focus; Integrity; Transparency; Diversity; Inclusion; and Respect.

In an environment where stakeholder silos often prevail, PALS has demonstrated that peer-to-peer, patient-centered, multidisciplinary initiatives, centered on a common policy agenda, collective advocacy strategies and shared resources, work more effectively to benefit individual leaders, their organizations, other key stakeholders, and of course, consumers. By collaborating in such a way, we can create a broad-based network that promotes patient-centered, quality, affordable and effective health care for all people. It’s the old synergy model, where one plus one equals three.

For more information, contact Anne Easter at healthadvocacy@nc.rr.com.

*PALS was developed by GlaxoSmithKline (GSK) in 2002. For 2016, GSK has granted The AIDS Institute exclusive rights to implement PALS, enabling the continuation of the PALS program across the United States. PALS is guided by the esteemed PALS Advisory Board, with funding from GSK and a variety of other sources.

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