HEALTH LITERACY

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Disclosures

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Learning Objectives

- Understand the concept of health literacy
- Identify barriers to health literacy
- Strategies to increase health literacy in practice

CONCEPTS

What is Health Literacy?

A patient centered approach in which an individual is able to acquire, communicate, understand, and apply health-related information in daily activities that align with preferences, values, needs, and ability to make informed decisions.

Health Literacy

 Personal health literacy is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

 Organizational health literacy is the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

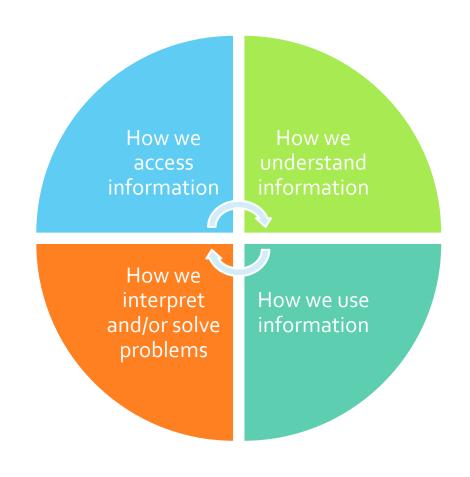
Poll Question

Is health literacy assessed at your clinic/unit?

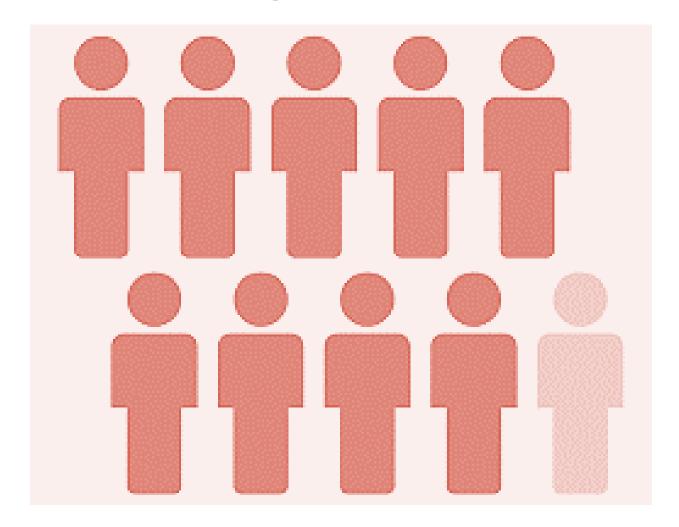
Poll Question

- Is health literacy assessed at your clinic/unit?
 - Yes
 - No
 - Only under certain circumstances

Key Aspects in Health-Related Decision Making



Health Literacy in US



9 out of 10 adults have trouble with health literacy.

National Assessment of Adult Literacy (NAAL)

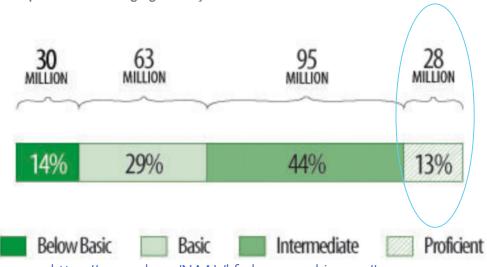
- The National Center for Education Statistics (NCES) has conducted assessments of U.S. adult literacy since 1985. The NAAL is a national assessment of English literacy skills of Americans aged 16 and older.
- The 2003 NAAL was the first assessment of the nation's progress in adult literacy since 1992.
 - 10 categories of questions
 - General and language background (19)
 - Education background and experiences (19)
 - Political and social participation (12)
 - Labor force participation (15)
 - Literacy practices (7)
 - Job training and skills (10)
 - Demographic information (9)
 - Family literacy (5)
 - Household income and welfare participation (12)
 - Health (10)

NAAL Results

Number of Adults in Each Prose Literacy Level

Prose Literacy

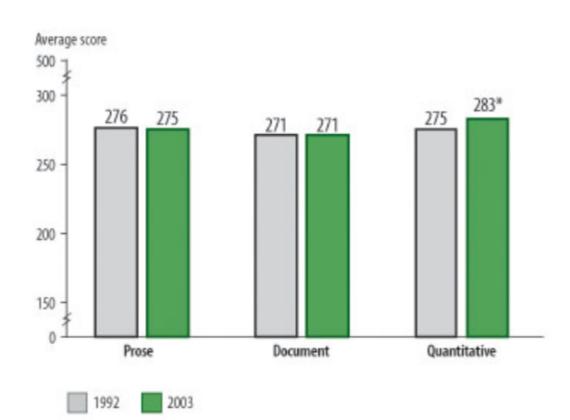
- Below Basic:
 - o no more than the most simple and concrete literacy skills
- Basic:
 - o can perform simple and everyday literacy activities
- Intermediate:
 - · can perform moderately challenging literacy activities
- · Proficient:
 - o can perform complex and challenging literacy activities



https://nces.ed.gov/NAAL/kf_demographics.asp#3

Overall

Average prose, document and quantative literacy scores of adults: 1992 and 2003



Additional Standardized Assessments

Nutrition Literacy Assessment Instrument (NLit()

Rapid estimate of Adult Literacy in Medicine (REALM), Short Form (SF)

BRIEF 16 Health Literacy Questions

Short Assessment of Health Literacy (50)

Test of Functional Health Literacy in Adults TOFHLA Numeracy

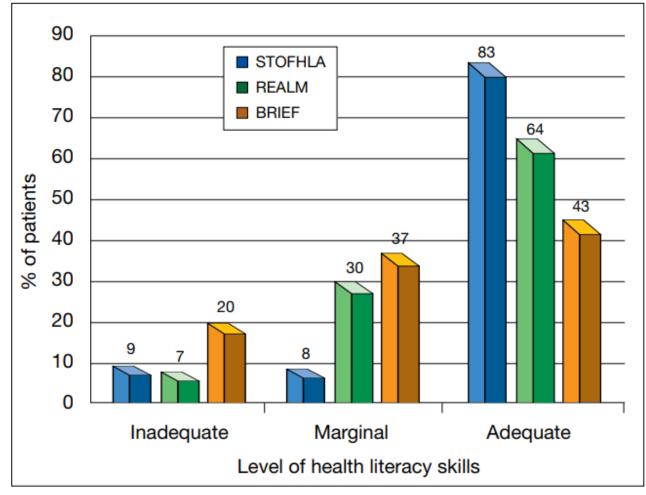


Figure. Study participants' levels of health literacy as indicated by the Short Test of Functional Health Literacy in Adults (STOFHLA), the Rapid Estimate of Adult Literacy (REALM), and the BRIEF.

Food and Nutrition Literacy

- CDC defines nutrition literacy as "going beyond understanding the origin of food, how it is cultivated and processed and its impact on health, to being able to act on nutritional information".
- NLit Assessment

BARRIERS TO PROFICIENCY

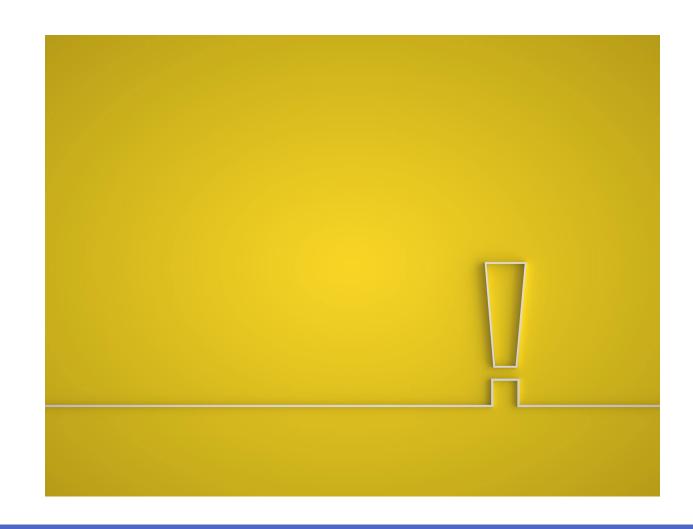
Poll Question

Have you or a loved one ever been confused by what a medical professional has told you?

Poll Question

- Have you ever been confused by what a medical professional has told you?
 - Yes
 - No

The Patient is Not the Problem



Barriers to Proficiency

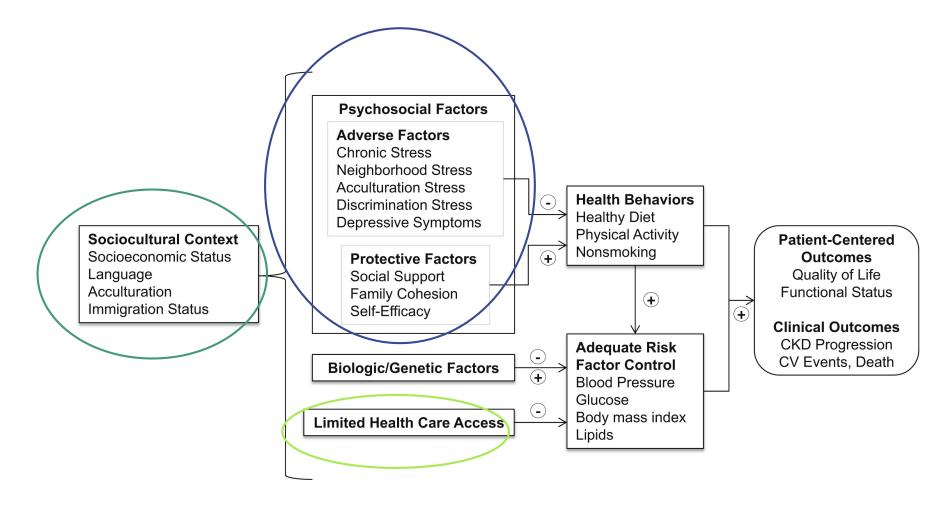
- Emotional Capacity
- Insurance
- Miscommunication
- Systemic Structures
- Cultural Competence
- Embarrassment /Uncomfortability

- Age
- Knowledge of Medical Terms
- Mental limitations
- Reading, Writing, and Mathematical Skills
- Access to Health Information
- Auditory Issues

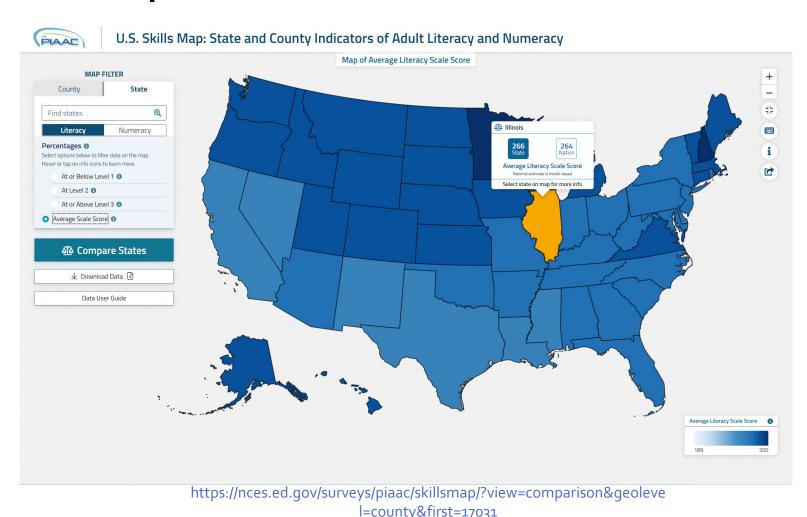
How Health Literacy Affects Care



Social Determinants of Health



Program for the International Assessment of Adult Competencies (PIAAC)



Most Common Medical Terms Patients Don't Understand

- Screening
- Dermatologist
- Immunization
- Contraception
- Hypertension
- Oral
- Diabetes
- Diet

- Hygiene
- Prevention
- Mental Health
- Annually
- Depression
- Respiratory problems
- Community Resources
- Monitor

- Cardiovascular
- Referral
- Eligible
- Arthritis

Interventions

Table 1

Effective Health Literacy Interventions Well-suited for Implementation in a PCMH

Authors	Intervention description	Key findings and insights
Rothman RL, DeWalt	Primary-care based diabetes disease	Among low-literacy patients, those in the
DA, Malone RM, et al. 45	management program featuring individualized	intervention were more likely than controls to
	communication delivered to improve	achieve target blood sugar levels. This suggests
	understanding among low-literacy patients	that programs addressing literacy can help
		improve outcomes for low-literacy patients and
		that increasing access to such programs could
		help reduce health disparities

Interventions

DeWalt DA, Malone RM, Brant ME, et al. 46

Primary-care-based heart failure selfmanagement program emphasizing daily monitoring, dose self-adjustment, and symptom recognition. Other features include picturebased education materials and scheduled phone follow-up Patients who received the intervention had a lower rate of hospitalization or death than controls. The difference was larger for low-literacy patients than for high-literacy patients. Patients with low literacy and other vulnerable populations are likely to benefit most from such programs

Interventions

Murray MD, Young J, Hoke S, et al. ⁴⁷ A pharmacist-led intervention for outpatients with heart failure featuring patient-centered verbal instructions and clear written instructions that made use of icons and an easy-to-follow timeline. The pharmacist worked with a multi-disciplinary team

Compared with controls, patients in the intervention group had fewer emergency department visits and hospitalizations, as well as lower annual direct health care costs. Medication adherence was higher in the intervention group, but this difference dissipated somewhat during follow-up, suggesting a need for continued intervention

STRATEGIES

Diversify Learning Tools









Speak in clear, concise formats

Use Video and Photos

Demonstration and Interactive Models





Communicate in the patient's preferred language

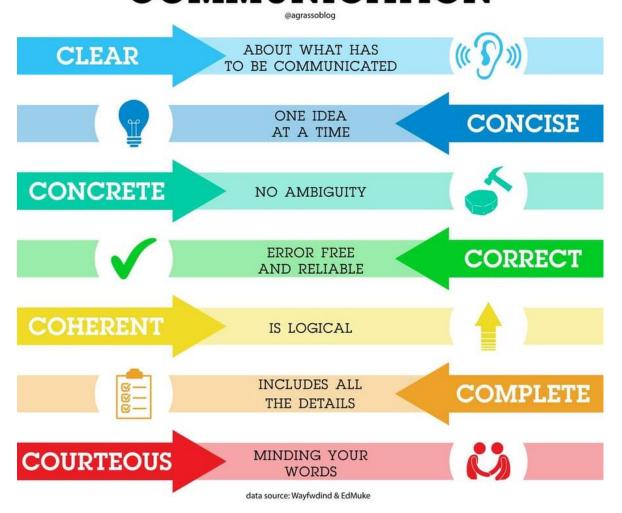
Use checklists

Strategies: Strengthen the Team



Effective Communication

the seven C'S of effective **COMMUNICATION**



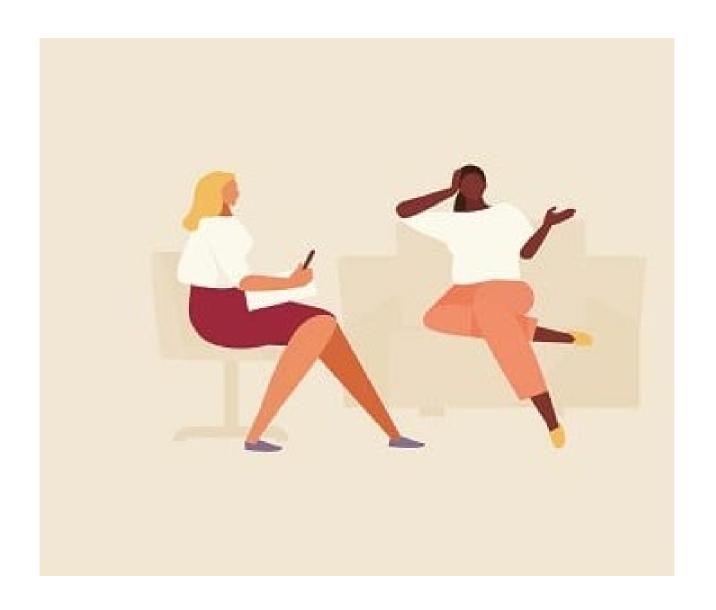
Be "DIRECT"

Address literacy and math skills.

Ask patients directly about their literacy skills. Using the DIRECT tool,³ developed by the American Medical Association, can make discussing reading difficulties with patients feel less awkward.

DIRECT— Asking Patients About Literacy Skills

- D Ask about **difficulty reading**: "Have you ever had a problem with reading?"
- I Ask if the patient has an **interest in improving**: "Would you be interested in a program to help you improve your reading?"
- R Have **referral information** for adults and family literacy programs ready to give to those identified with reading difficulty.
- E Ask **everyone** about their literacy skills. Let patients know it is your policy to ask everyone.
- C Emphasize that low literacy is a **common problem** and they are not alone: "Half of Americans have some difficulty reading."
- T **Take down barriers** to joining literacy classes (e.g., help with the initial phone call, have informational sessions at the clinic, make followup contact with patients to see if they were able to find the right class)



PATIENT CENTERED APPROACH

Current Initiatives

- National Health Literacy Plan
 - Develop and Share Health and Safety Information That Is Accurate, Accessible, and Actionable
 - Integrate Clear Communication and Health Literacy into Public Health Planning, Funding,
 Policy Development, Research, and Evaluation
 - Incorporate Accurate, Standards-Based, and Developmentally Appropriate Health and Science Information and Curricula in Educational Settings from Preschool through University Levels

Strategies: The Three A's

- The CDC Health Literacy plan suggested all health information should be:
 - Accurate
 - Accessible
 - Actionable

Accurate



Accessible

- Who can see it?
- How is information seen?
- Are you able to glance and still retain information?
- Intentional and unintentional exposure methods?
- Is the message/main statement helpful?

Actionable

- Be concrete and specific
- Limit information and tasks to 2-4 key points per appointment
- Goals should be realistic and attainable
- Engage in speaker/listener exercises to confirm understanding



Current/Future Research

- Healthy People 2030
 - Most objectives are in infancy stage (developmental and research)
 - We have baseline knowledge of healthy literacy, poor communication with provider, desired outcomes, health IT
 - Data will allow us to improve strategies and health outcomes

Resources

- Literacy and Health in America
 - https://cdn1.sph.harvard.edu/wpcontent/uploads/sites/135/2012/09/health_actvities_materials_tasks_chart.pdf
- Office of Disease Prevention and Health Promotion
 - https://health.gov/healthliteracyonline/
- Agency for Healthcare Research and Quality's (AHRQ) Toolkit
 - AHRQ Health Literacy Universal Precautions Toolkit | Agency for Healthcare Research and Quality
- CDC Planning Templates for Health Literacy
 - https://www.cdc.gov/healthliteracy/pdf/planning_template.pdf
- Health Literacy Modules
 - https://nnlm.gov/guides/clinical-conversations-training-program

QUESTIONS?

THANKYOU