

Functional Health Literacy Finding the Right Words for Better Health

NASW Conference
November 12, 2015

Course Objectives

- ★ Provide a definition and implications of health literacy, the national statistics on health literacy, and populations at risk for low health literacy.
- ★ List factors that may contribute to low health literacy.
- ★ List characteristics, behaviors, and coping techniques of those with limited literacy skills.
- ★ Access tools for assessing the reading and comprehension levels and usability of written materials.
- ★ Utilize strategies to improve health outcomes in clients with low literacy skills.

Definition of Health Literacy

- ▶ The degree to which individuals have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions.

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What is Health Literacy?

FOR.....

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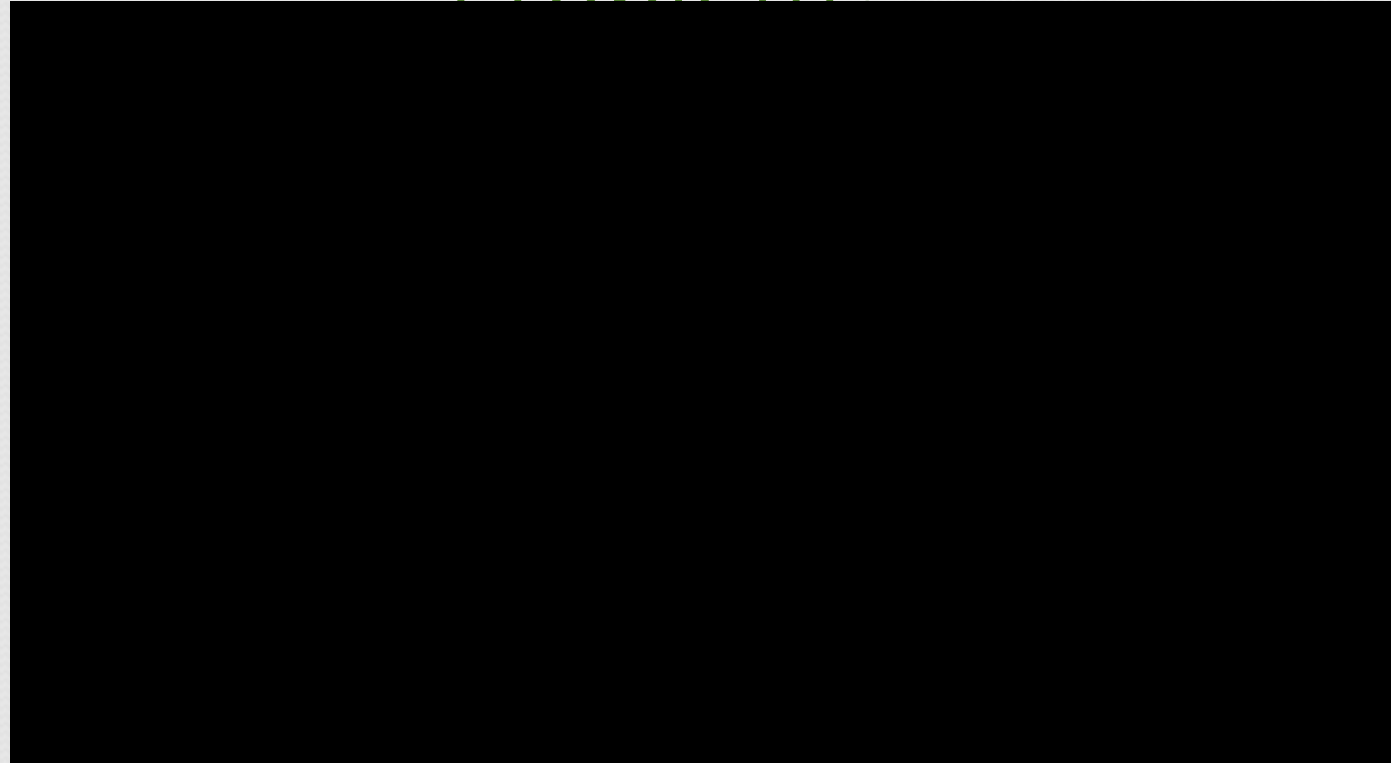
The degree to which an individual has the capacity to obtain, process, and understand basic information and services needed to make appropriate decisions regarding his or her health.

REPEAT..... TIMES

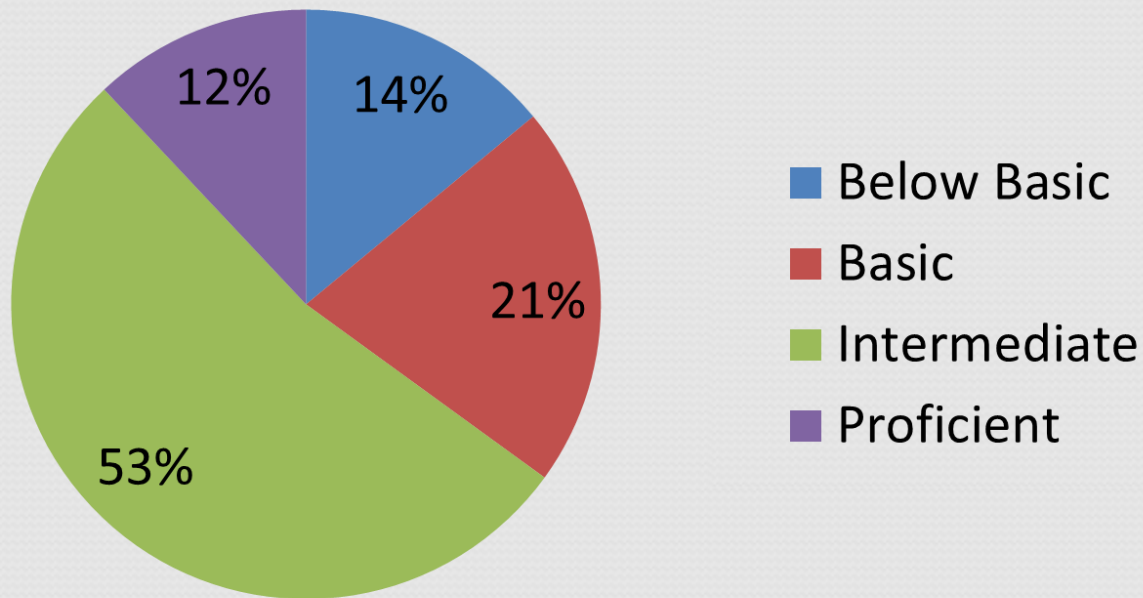
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Is Health Literacy a Problem?



Overview of Health Literacy Levels



Source: <http://www.health.gov/communication/literacy/issuebrief/#survey>

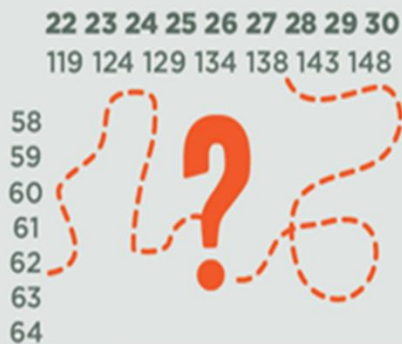
Overview of Health Literacy Levels

Health Literacy Level	Task Examples	Percentage
Proficient	Using a table, calculate an employee's share of health insurance costs for a year.	12%
^ Back to top		
Intermediate	Read instructions on a prescription label, and determine what time a person can take the medication.	53%
Basic	Read a pamphlet, and give two reasons a person with no symptoms should be tested for a disease.	21%
Below Basic	Read a set of short instructions, and identify what is permissible to drink before a medical test.	14%

Source: U.S. Department of Education, Institute of Education Sciences, 2003 National Assessment of Adult Literacy.

-----> **More than 1 in 2 adults can't:** <-----

**Use a BMI graph to find
their healthy weight**



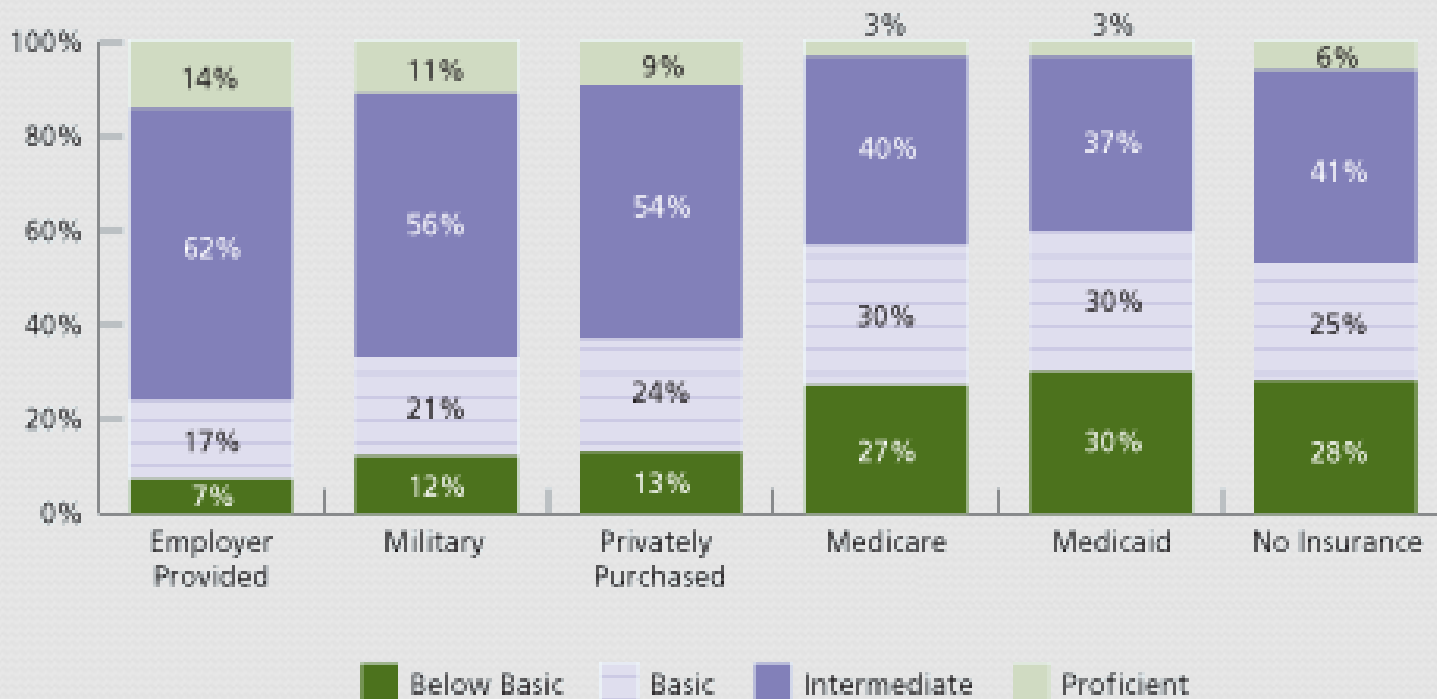
**Understand a
vaccination chart**



Read a drug label



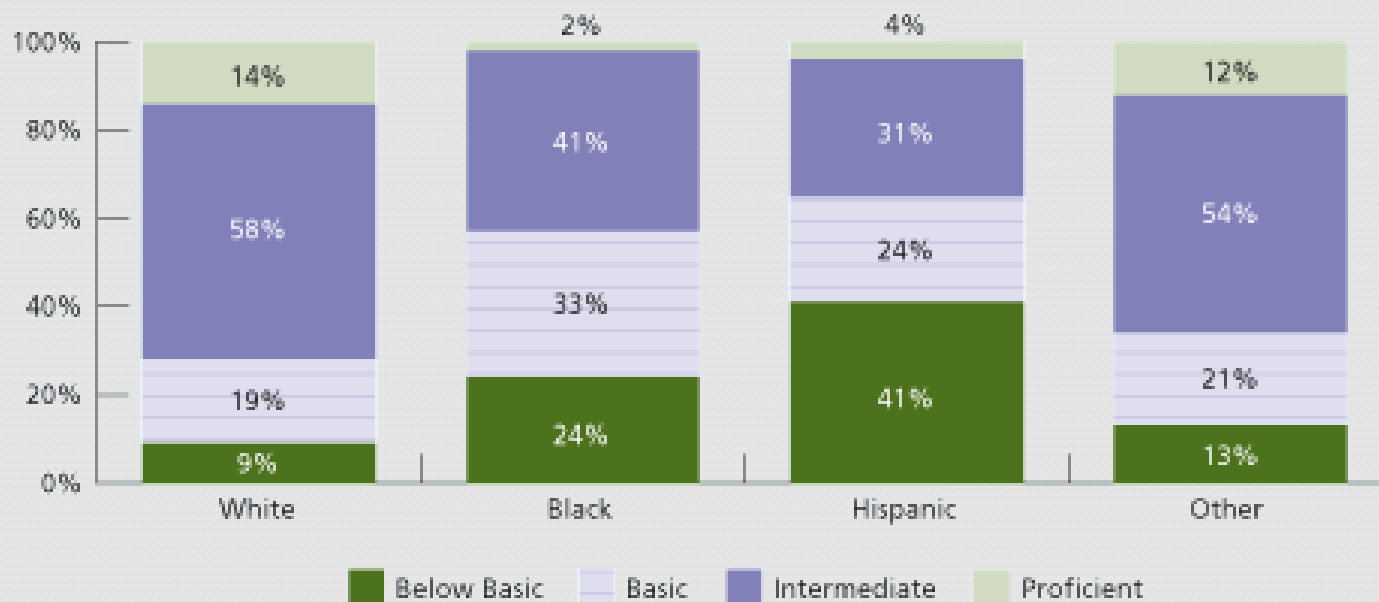
Health Literacy By Type of Health Insurance



Adults without Insurance or on Medicaid or Medicare have the lowest Health Literacy.

Source: U.S. Department of Education, Institute of Education Sciences, 2003 National Assessment of Adult Literacy.

Health Literacy by Racial/Ethnic Groups: 2003



Source: U.S. Department of Education, Institute of Education Sciences, 2003 National Assessment of Adult Literacy.

Population at Risk for Low Health Literacy

- ★ People with Compromised Health Status
 - ★ Aren't these the people who need to understand about their health the most?

National Center for Education Statistics 2006. The Health Literacy of America's Adults: Results From the 2003 National Assessment of Adult Literacy.

Outcomes of Low Health Literacy

- ★ Poor health literacy leads to poor health outcomes.
- ★ Decreased use of preventive services
- ★ Less self-management of existing conditions
- ★ Increased rates of hospitalizations

The Impact of Low Health Literacy



90 million Americans are at risk for not acting on health information because of low health literacy, regardless of age, income, race, or background

The cost of limited health literacy to the nation's economy is estimated to be between **\$106 billion** and **\$236 billion** per year



1. Weiss BD. *Health Literacy and Patient Safety: Help Patients Understand*. 2nd ed. American Medical Association; 2007.
2. Vernon JA et al. 2007. *Low Health Literacy: Implications for National Health Policy*. <http://www.gwumc.edu>; 2007.

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What Might Effect Health Literacy

not sure what to title this slide

★ Level of Education

- ★ While health literacy increased with higher education attainment, 44 percent of high school graduates and 12 percent of college graduates had below basic or basic health literacy.

★ Age

- ★ Age had relatively little relationship to health literacy among adults who were under 65 years of age.
- ★ Adults 65 or older were more likely to have below basic or basic health literacy skills.

★ Gender

- ★ Gender had relatively little relationship to health literacy between men and women.

Signs of Low Health Literacy

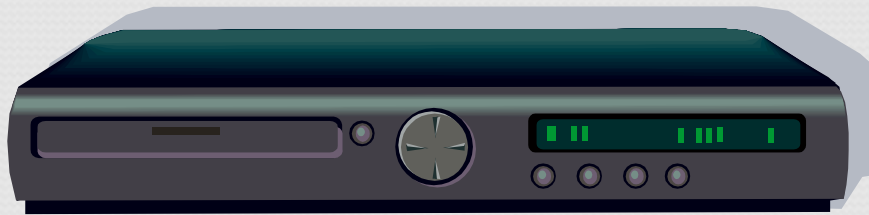
- ★ Missed appointments
- ★ Forms not completed correctly
- ★ “Non-compliance” with medications
- ★ Not able to name medications, give purpose or dosage of medications
- ★ Ask few questions
- ★ Lack of follow through on tests or referrals

Factors that might Impact an Individual obtaining Health Information and Improving Health Literacy

- ★ Access to healthcare providers
- ★ Adequate time
- ★ Transportation
- ★ Technological resources
- ★ Language barriers
- ★ Ability to read
- ★ Access to written materials
- ★ Regional/county resources
- ★ Cultural Beliefs
- ★ Religious Beliefs
- ★ Family or financial issues
- ★ Fear
- ★ Stress
- ★ Shame
- ★ Embarrassment
- ★ Denial
- ★ Anger
- ★ Readiness to Change

Technological Literacy

- Phones, answering machines
- TV's/VCRs/DVRs
- Computers
- Other devices



Signs of low reading literacy

- ★ “Don’t have glasses” or “I’ll read it when I get home”
- ★ Provide “No” answers on forms so don’t have to read/write more
- ★ Do not embrace email
- ★ Incorrect feedback to written communication
- ★ Very subtle, spouses and children often don’t know.

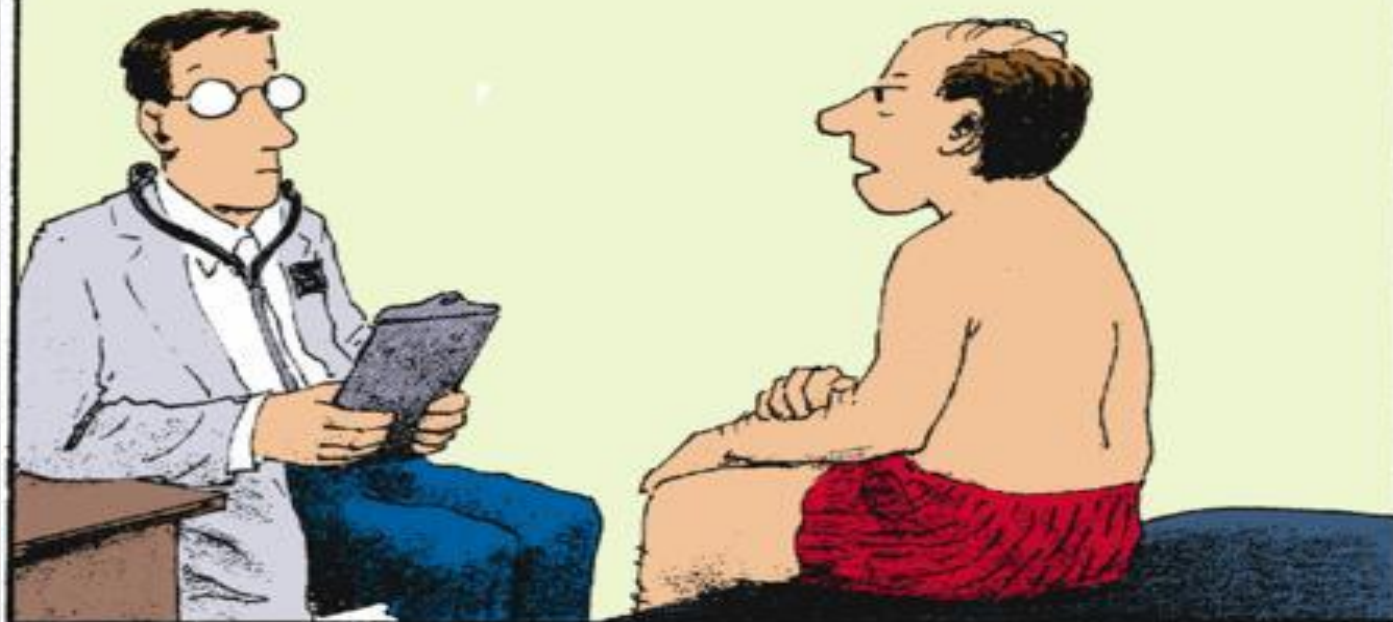
Strategies (What Can We Do) To Improve Health Literacy

Health Literacy Universal Precautions

- ★ Health literacy universal precautions are when we assume that all individuals we serve may have difficulty understanding health information and accessing health services.
- ★ Health literacy universal precautions are aimed at
 - ★ Simplifying communication with confirming understanding for ALL individuals, so the risk of miscommunication is minimized.
 - ★ Making the environment/health care system easier to navigate.
 - ★ Supporting individual's efforts to improve their health.

Literacy includes Oral Communication

- ★ Unfamiliar words and medical terms
- ★ Language barriers
- ★ Type of conversation, such as those that involve analysis or decision-making, may not be familiar
- ★ ***Individuals with poor health literacy understand only about ½ of what a provider tells them***
- ★ Information is taken literally



“Doc, enough with the ‘English’ — just give it to me in plain academic medical terminology!”

What Can We Do To Improve Health Literacy

★ Speak Slowly

- ★ Allow the individual time to process the information
- ★ Focus on top 2-3 concepts
- ★ Use short statements, don't overwhelm
- ★ Have caring tone and open-minded attitude
- ★ SMILE



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What Can We Do To Improve Health Literacy

★ Use Plain Language

- ★ Avoid Medical terms

- ★ Use understandable words or phrases

- ★ Ask their preferred way to learn, everyone doesn't learn the same way.



What Can We Do To Improve Health Literacy

★ Use Plain Language

- ★ we could use examples of word and alternative words

- ★ Words to Watch Fact Sheet Ask Me 3

What Can We Do To Improve Health Literacy

- ★ Use Examples
 - ★ Make is relevant to the person
 - ★ Use visual aids
 - ★ Draw pictures

What Can We Do To Improve Health Literacy

★ Encourage Questions

- ★ Avoid Yes/No questions
- ★ Ask open-ended questions
- ★ Allow for silence



What Can We Do To Improve Health Literacy

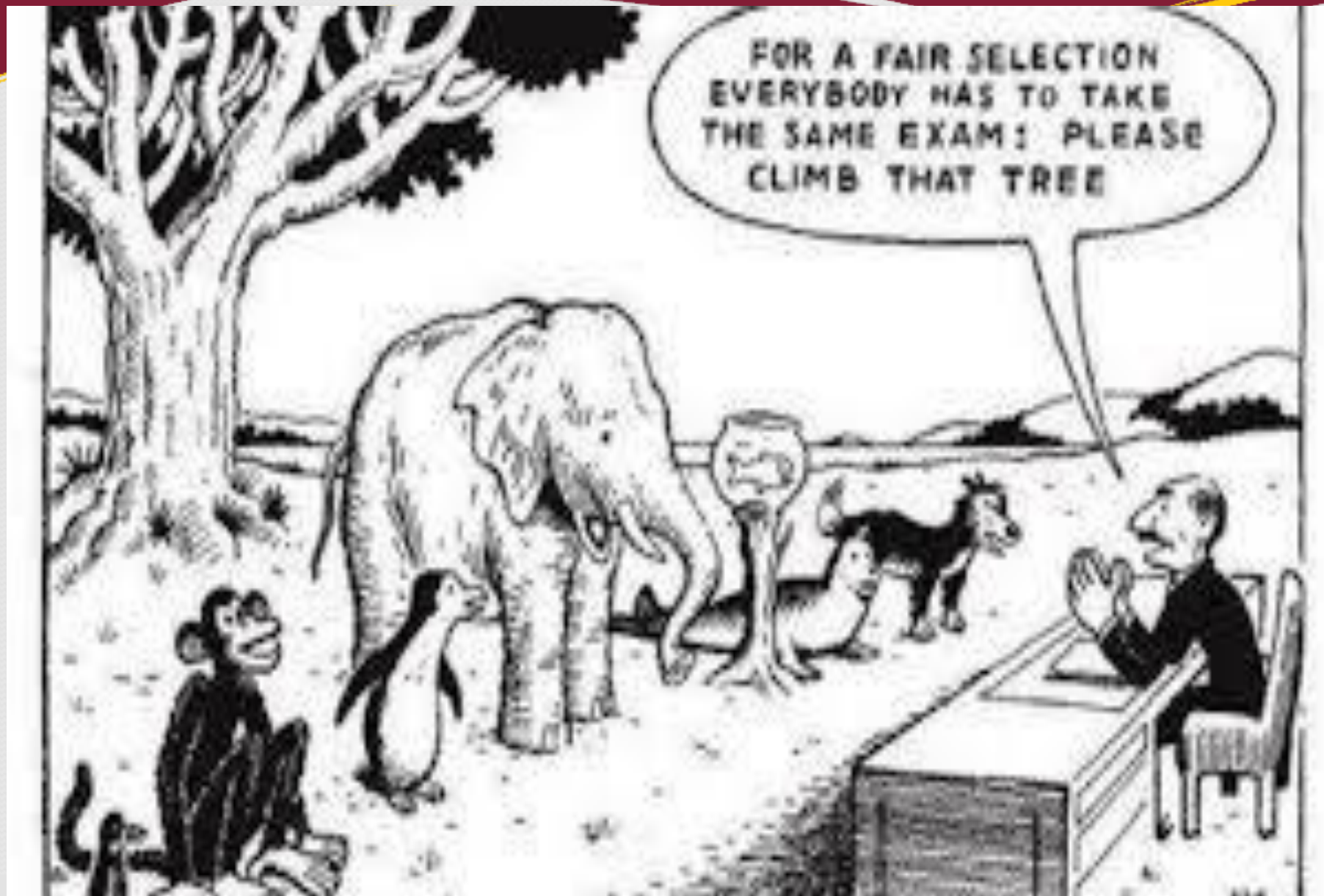
★ Use Teach Back Method

- ★ Ask the individual to explain in their own words what they need to know or do.
 - ★ Why and when they need to take the medications.
How much medication do they need to take.
 - ★ When or what do they need to follow up on
 - ★ Who are they to call
 - ★ What procedure/appointment do they need to schedule and when

The Teach Back Method

- ★ Individual repeats their understanding of discussion
- ★ Evaluate how well you did at explaining the information to the individual
- ★ Opportunity to re-teach if needed
- ★ Close the loop





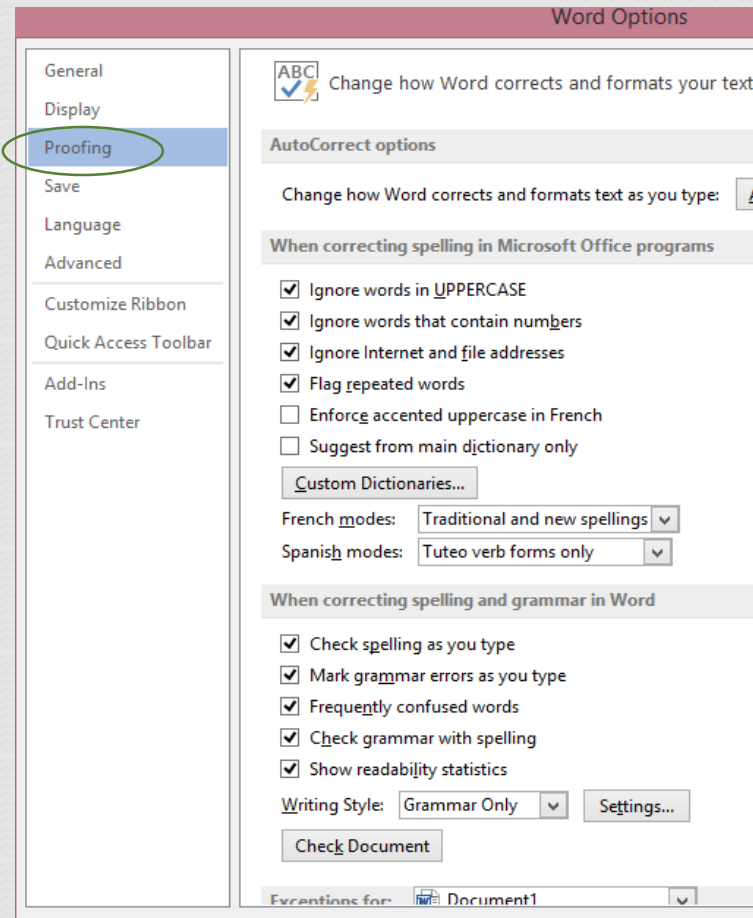
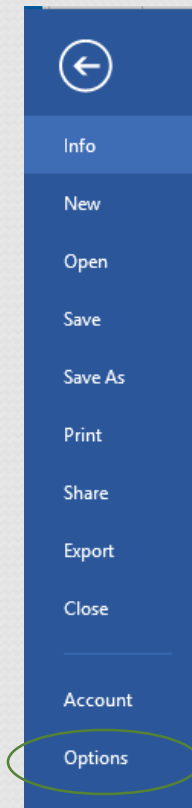
Considerations with Printed Reading Material

- ★ Is the print size readable.
- ★ Is the material printed in a language the individual can read.
- ★ Recommended that all material given to patients should be at a 6th grade reading level.

How to Determine Grade Reading Level

- ★ Test hard copy written material:
<http://www.readabilityformulas.com/smog-readability-formula.php>
- ★ Test documents in Word - Before you create a Word document:
 - ★ Choose “options” from under the File menu
 - ★ Choose Proofing
 - ★ Make sure “Readability Statistics is checked
 - ★ The reading level will appear when you click the “Review” tab and select “Check Spelling” or F7 tab (Can use to test text before using with individuals.)

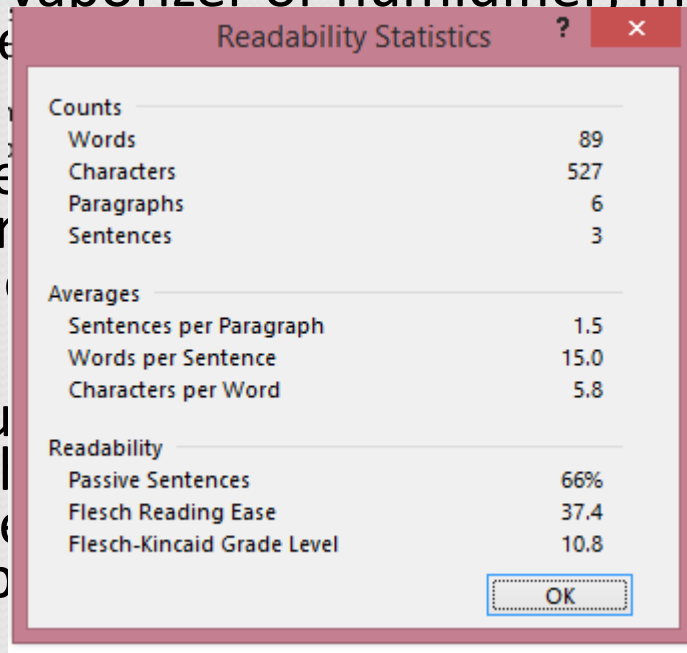
How to Determine Grade Reading Level



What's the Reading Level ?

Patient Discharge Instructions: Upper Respiratory Infection/Influenza-URI/Cold/Flu

- ★ Rest; Drink 8 to 10 glasses of water each day
- ★ Use a cool mist vaporizer or humidifier; make sure equipment is clean according to manufacturer's instructions
- ★ Over the counter (OTC) medicines (such as pseudoephedrine) can be used to relieve congestion, but may raise blood pressure (high blood pressure)
- ★ An over the counter (OTC) cough suppressant (such as dextromethorphan) can be used to help maintain a cough. Neither over the counter (OTC) medicines can completely stop a cough.



Counts	
Words	89
Characters	527
Paragraphs	6
Sentences	3
Averages	
Sentences per Paragraph	1.5
Words per Sentence	15.0
Characters per Word	5.8
Readability	
Passive Sentences	66%
Flesch Reading Ease	37.4
Flesch-Kincaid Grade Level	10.8
OK	

“People will forget what you said, people will forget what you did, but people will never forget how you made them feel.”

Maya Angelou



References and Resources

- Glanz, K., Rimer, B.K. & Lewis, F.M. (2002). Health Behavior and Health Education. Theory, Research and Practice. San Fransisco: Wiley & Sons.
- Glanz, K., Marcus Lewis, F. & Rimer, B.K. (1997). Theory at a Glance: A Guide for Health Promotion Practice. National Institute of Health.
- Eisen, M et.al. (1992). A Health Belief Model — Social Learning Theory Approach to Adolescents' Fertility Control: Findings from a Controlled Field Trial. Health Education Quarterly. Vol. 19.
- Rosenstock, I. (1974). Historical Origins of the Health Belief Model. Health Education Monographs. Vol. 2 No. 4.
- Becker, M.H. The Health Belief Model and Personal Health Behavior. Health Education Monographs. Vol. 2 No. 4.











