# Health Literacy 101

An Introduction to Literacy,
Health Literacy and How They Impact
Health and Health Care

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# Topics today

General literacy and health literacy information

Why it matters

How to get started



# What is Literacy?

National Assessment of Adult Literacy (NAAL 2003)

"Using printed and written information to function in society, to achieve one's goals, and to develop one's knowledge and potential."

# What is Literacy?

- Literacy is a combination of skills:
  - Verbal
  - Listening
  - Writing
  - Reading

### More than just reading grade level

#### Prose Literacy

Written text like instructions or newspaper article

#### Document literacy

 Short forms or graphically displayed information found in everyday life

#### Quantitative Literacy

Arithmetic using numbers imbedded in print

# What is Health Literacy?

#### The Institute of Medicine 2004

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

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# Literacy VS Health Literacy

Almost everyone will have difficulty with health literacy at some point.

- Much harder for those that do not:
  - Read very well.
  - Speak English as their primary language.

## Two Sides to the Equation

- It's all about effective communication
  - Verbal
  - Written
  - Multi-media
- It has to be presented in a way that is understandable to most people.

### In Their Own Words



Data released 12/05

- ~17,000 people participated
- Over age 15
- Living in households and prisons

- 4 categories of literacy
  - Below basic
  - Basic
  - Intermediate
  - Proficient

- Below Basic literacy one piece of information
- Can:
  - Sign name on a document
  - Identify a country in a short article
  - Total a bank deposit slip

- Below Basic literacy one piece of information
- Cannot:
  - Enter information on a social security card application
  - Locate an intersection on street map
  - Calculate the total cost on an order form

Basic literacy – two related pieces of information

Can:

Identify YTD gross pay on a paycheck

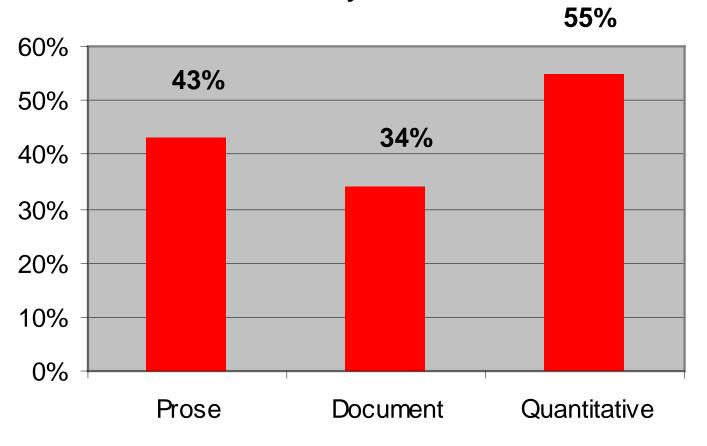
Determine price difference between tickets for 2 shows

Basic literacy – two related pieces of information

Cannot:

- Use a bus schedule
- Balance a check book
- Write a short letter explaining error on a credit card bill

34-55% of adults are at below basic and basic literacy levels



- NAAL health literacy assessment
- 28 questions specifically related to health
  - 3 clinical
  - 14 prevention
  - 11 system navigation

Entire population

■ Proficient 12%

Intermediate 53%

■ Basic 22%

Below basic 14%

Basic and Below Basic Health Literacy

Entire population 36%

■ White 28%

Native Americans 48%

■ Blacks 58%

Hispanics 66%

Basic and Below Basic Health Literacy

■ Age16-64 28-34%

Age 65+

59%

Basic and Below Basic by education level

In High School, GED or HS grad 34-37%

Less than/some High School 76%

Basic and Below Basic by Self-reported health status

■ Excellent 25%

Very Good 28%

■ Good 43%

■ Fair 63%

■ Poor 69%

# The Impact of Low Literacy on Health

Poorer health knowledge

Poorer health status

Higher mortality

# The Impact of Low Literacy on Health

- Increased hospital use
- Increased Emergency Department use
- Mixed results for:
  - Use of preventive services
  - Chronic health care
  - Tobacco use

## Poorer Health Knowledge

- Understanding prescription labels
  - 395 patients
    - 19% low literacy (6<sup>th</sup> grade or less)
    - 29% marginal literacy (7-8<sup>th</sup> grade)
    - 52% adequate literacy (9<sup>th</sup> grade and over)
  - 5 prescription bottles

# Poorer Health Knowledge

At least one incorrect

- 63% low literacy
- 51% marginal literacy
- 38% adequate literacy

## Poorer Health Knowledge

"Take two tablets twice daily"

Stated correctly

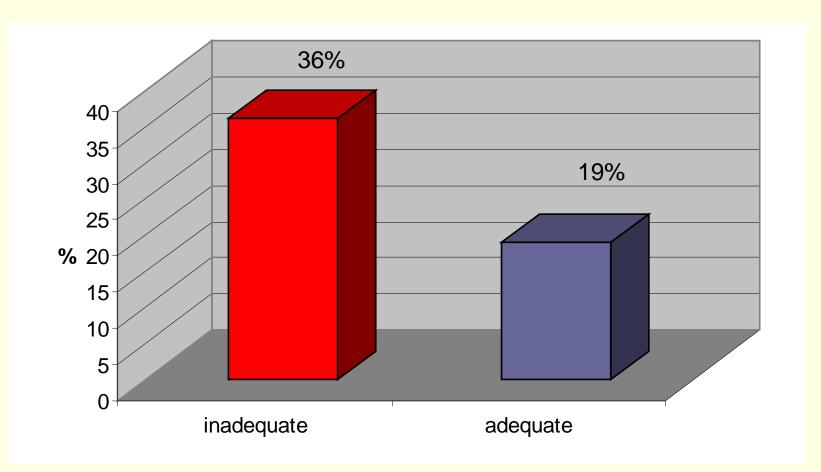
Demonstrated correctly

71% low literacy 35% 84% marginal literacy 63% adequate literacy 80%

<sup>&</sup>quot;Show me how many pills you would take in one day." Counted out 4 tablets-correct

#### Poorer Health Status

#### Diabetics with retinopathy



# **Increased Mortality**

Age 70-79

2512 participants

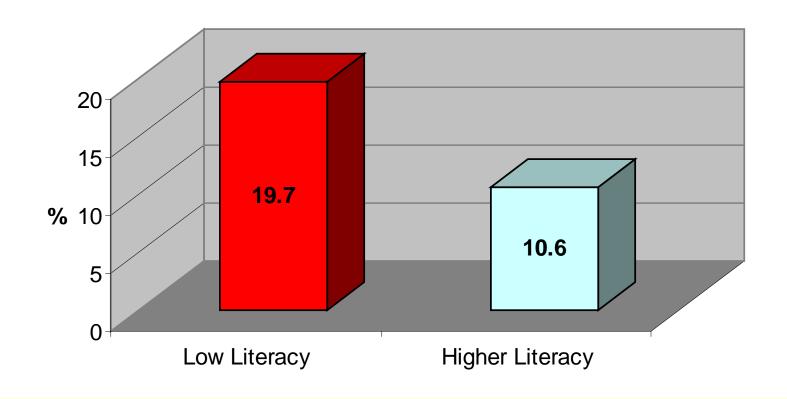
Reading level 8<sup>th</sup> grade or less

Five Year Prospective Study

# **Increased Mortality**

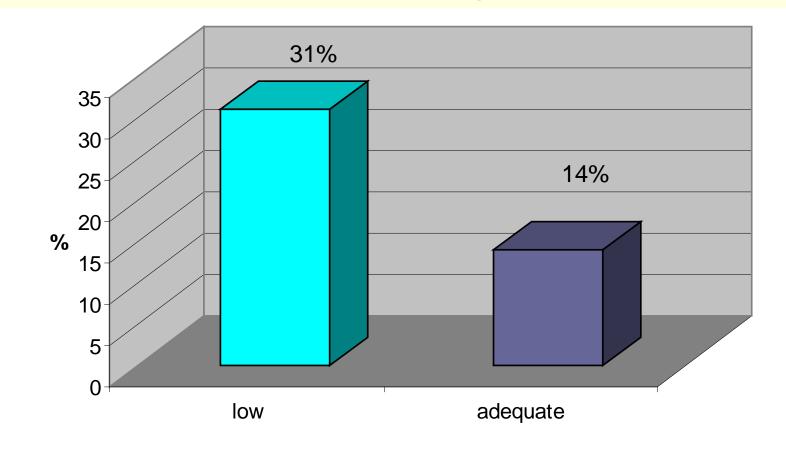
Risk of Death

Hazard ratio: 1.75



### More Hospitalizations

# 2 year hospitalization rate for patients visiting ED



### Low Literacy is Overlooked

- Patients do not volunteer their literacy problem
  - Many are ashamed
  - Some do not recognize their inadequate literacy
  - Lack of trust

# The Big Secret

% of low literate adults that have not told their:

52%
<b>5</b> _ / ·

Friends 62%

Spouse 68%

Health care providers 75%

Co-workers 85%

# More likely to have Low Literacy

Older

Less education

Non-white

#### More likely to have Low Literacy

Immigrants

■ Immigrate after age 12 >50%

Below Basic literacy level

#### More likely to have Low Literacy

Low-income

Medical Assistance

Incarceration

#### You Can't Tell by Looking

Many below basic people don't fit the stereotypes

75 % born in USA

50% are white

40% hold full or part time jobs

#### A New Cause for Non-Compliance?

Medications

No-shows

Testing

Referral

### Questions?

#### Where do we go from here?

Vision:

Every patient or their caregiver

understands what the problem is, what

to do about it and why it's important.

#### How do we get there?

- Education
- Effective Communication
- Universal Design
  - If it works for people with limited literacy or limited English skills, it will work for everyone.

- Released May 27, 2010
- Seven goals
- Develop and disseminate health and safety information that is accurate, accessible, and actionable.

 Promote changes in the health care system that improve health information, communication, informed decision making, and access to health services.

3. Incorporate accurate, standards-based, and developmentally appropriate health and science information and curricula in child care and education through the university level.

4. Support and expand local efforts to provide adult education, English language instruction, and culturally and linguistically appropriate health information services in the community.

5. Build partnerships, develop guidance, and change policies.

 Increase basic research and the development, implementation, and evaluation of practices and interventions to improve health literacy.

7. Increase the dissemination and use of evidence-based health literacy practices and interventions.

- Today
  - 3:00 PM Working with interpreters\*

- 3:00 PM Easy-to read materials\*
  - MedlinePlus

- Today
  - 3:00 PM Missouri HL Library\*

- 3:45 PM Readability and suitability
  - Evaluating patient education materials

- Today
  - 3:45 PM Beyond PowerPoint
    - Interactive presentations
  - 3:45 PM Multimedia and Immigrant health \*
    - Community story telling

Tomorrow

- 10:45 AM Improving medication safety\*
- 1:15 PM Health literacy resources\*

2:00 PM Teach back technique\*

- Tomorrow
  - 2:00 PM What to do When Your Child Gets Sick\*
  - 2:00 PM Engaging design strategies\*
    - Health materials development
  - 2:00 PM Materials in multiple languages

Today

3:45 PM Teaching health professionals\*

- 3:45 PM Sustaining HL initiatives\*
  - Hospital experience improving quality and patient safety through effective communication

Tomorrow

9:35 AM Joint Commission standards\*

- 1:15 PM Hospital change strategies\*
  - Children's Hospital of Wisconsin

Tomorrow

- 1:15 PM Paid senior caregivers
  - Education program for low HL caregivers
- 2:00 PM Disseminating HL messages\*
  - Health Literacy Missouri News Service

Tomorrow

2:45 PM Multidisciplinary oral health

- 2:45 PM Motivational interviewing
  - Personalized method of behavior change

# Adult Education and English Language Instruction

- Today
- 3:00 PM Staying healthy: ESOL curriculum\*
- **Tomorrow**
- 2:00 PM What to do When Your Child Gets Sick\*

#### **Build Partnerships**

#### Today

- Now Health and literacy organizations\*
  - Riffenburgh and Cordell
- 3:45 Health and literacy organizations\*
  - Collaborating for clear communication

#### **Build Partnerships**

#### **Tomorrow**

- 1:15 PM Free clinic and literacy services\*
  - Rochester Minnesota
- 2:00 PM Hospital and literacy organization\*
  - English for Health, Madison

#### **Build Partnerships**

#### **Tomorrow**

- 2:00 PM Engaging design strategies\*
  - Health materials development with patients

- 2:45 PM Tapping adult education expertise\*
  - 4 successful programs

#### Change Policy

- Tomorrow
  - 10:45 AM HL and health care reform\*
    - Kavita Patel
  - 2:45 PM 15 ways to influence policy\*
    - Doug Seubert, health communications
    - Dave Anderson, District Director,
       US Representative Sean Duffy

#### Research and Program Evaluation

#### Today

- Now Canyon Ranch Institute\*
  - Andrew Pleasant- Time to talk cardio

3:00 PM Wisconsin Ask Me 3

#### Research and Program Evaluation

- Tomorrow
  - 9:35 AM Health literacy measurement\*
    - Andrew Pleasant

- 10:45 PM Medication safety\*
  - Michael Wolf

#### Research and Program Evaluation

Tomorrow

- 1:15 PM Paid senior caregivers
  - Education program for low HL caregivers

2:45 PM Reach Out and Read\*

#### Re-Designing What We Do

- Team effort
  - Everyone understands the impact and magnitude of the problem
  - Health literacy or integrated into existing committee
- Infuse health literacy concepts in new programs and redesign of current processes

#### Re-Designing What We Do

- Improved discharge process
  - ReEngineering Discharge project (RED)
  - Up to 30% fewer re-hospitalizations

Find, develop and use plain language materials

#### Where to find plain language materials

- MedlinePlus
  - http://www.nlm.nih.gov/medlineplus/
- Health Literacy Missouri searchable library
  - http://www.healthliteracymissouri.org/library/
- Search for "easy to read"

#### A Comment About Screening

Many screening tests available

None measure "health literacy"

If only 12% of adults are "proficient" at health literacy (NAAL) then why should we screen?

#### Improve Verbal Communication

SLOW DOWN

Sit face to face

Plain language, no jargon

Simple diagrams

### Improve Verbal Communication

- Evidence-based communication techniques
  - Motivational Interviewing

- Check Understanding
  - Teach back method

#### The Difference One Word Can Make

- Ask the right question:
  - Is there <u>something</u> else you want to address in the visit today?
  - Is there <u>anything</u> else you want to address in the visit today?

Reducing patients' unmet concerns in primary care: The difference one word can make. Heritage j, et al. J Gen Int Med 2007:22;1429-1433.

# Something VS Anything

280 patients, 20 clinicians, acute care visits

Using "some" reduced unmet concerns by

78%

Using "any" was no better than usual care

No change in visit length

## Summary

Low literacy is a common problem

Low literacy affects health

Effective communication is the key

#### The Vision

Every patient or their caregiver understands what the problem is, what to do about it and why it's important.

Be a catalyst for change

- Raise awareness
  - Colleagues
  - Leadership
  - Friends
  - Legislators

#### Learn More

- National Action Plan to Improve Health Literacy
- Health Literacy Universal Precautions Toolkit
- Health Literacy Interventions and Outcomes
  - Agency for Healthcare Research and Quality
  - Systematic review
  - Update from 2004

Change your <u>own</u> behavior

Slow down

Remove the jargon

Something VS anything

Check understanding

Start re-designing

Processes

Forms and other documents

## Not Another Project!

Infuse health literacy concepts in current projects



## Keep In Mind

Universal Design

- Health Literacy Definition
  - The degree to which individuals have the capacity to obtain, process, and understand basic information and services needed to make

appropriate decisions regarding their health.

"Action expresses priorities."

"Be the change that you want to see in the world."

---Mohandas Gandhi

