



Adirondack Health Institute

Collaboration • Catalyst • Community

“Health Literacy”

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- What is health literacy?
- Why is health literacy important?
- Health Literacy Universal Precautions Tools





What is Health Literacy?

“Health literacy is the degree to which individuals have the capacity to ***obtain, process*** and ***understand*** basic health information and services needed to make appropriate health decisions.”

(US Department of Health and Human Services, Healthy People 2010)



Health Literacy Depends On

- Communication skills of the patient and the health care team member
- Patient's knowledge of disease / risk factors / when to seek care
- Stress, physical or mental impairment, unfamiliarity





Health Literacy is NOT

- Plain language

(this is one *tool* for improving health literacy)

- Cultural competency

(this can *contribute* to health literacy by improving communication and building trust)





Extent of Problem

Only 12% of U.S. adults have the ***health literacy*** skills needed to manage the demands of the health care system, and even these individuals' ability to absorb health information can be compromised by stress / illness.

(AHRQ – Agency for Healthcare Research and Quality)





Expectations of Patients are Increasing

- Prevention (diet, exercise, sunscreen, dental)
- Self assessment of health status (peak flow, glucose monitoring)
- Self treatment (insulin injections)
- Health care use (when to go to the clinic/ER, referrals & follow up, insurance issues)





Low health literacy is more prevalent among:

- ✓ Older adults
- ✓ People with low income
- ✓ People with limited education
- ✓ Minority populations
- ✓ People with limited English proficiency (LEP)





Limited Literacy Skills

What basic information about a colonoscopy, might look like to a patient with limited literacy skills:

Your naicisyhp has dednemmocer that you have a ypocsonoloc. Ypocsonoloc is a test for noloc recnac. It sevlovni gnitresni a elbixelf gniweiv epocs into your mutcer.

You must drink a laiceps diuqil the thgin erofeb the noitanimaxe to naelc out your noloc.





Difficulties

Patients with limited health literacy may have difficulty:

- ✓ Filling out forms
- ✓ Sharing medical history with provider
- ✓ Managing chronic conditions
- ✓ Understanding directions on medication
- ✓ Understanding and acting on health related information





Lower Health Literacy Affects

- Health outcomes
- Health care costs
- Quality of care





Universal Precautions

Universal precautions address health literacy because we can't know which patients are challenged by health care information.



(AHRQ – Agency for Healthcare Research and Quality)



Assumption

Practices should assume that all patients and caregivers have difficulty comprehending health information and should communicate in ways that anyone can understand.





Health Literacy Universal Precautions Aims

- Communicate simply and confirm understanding for all patients
- Support patients' efforts to improve their health
- Suggest the patient take notes or bring a companion to take notes





Communicate Clearly

Use clear communication to help patients better understand health information

- ✓ Make eye contact
- ✓ Listen carefully
- ✓ Use plain, non-medical language
- ✓ Use the patient's words





Communicate Clearly (cont'd)

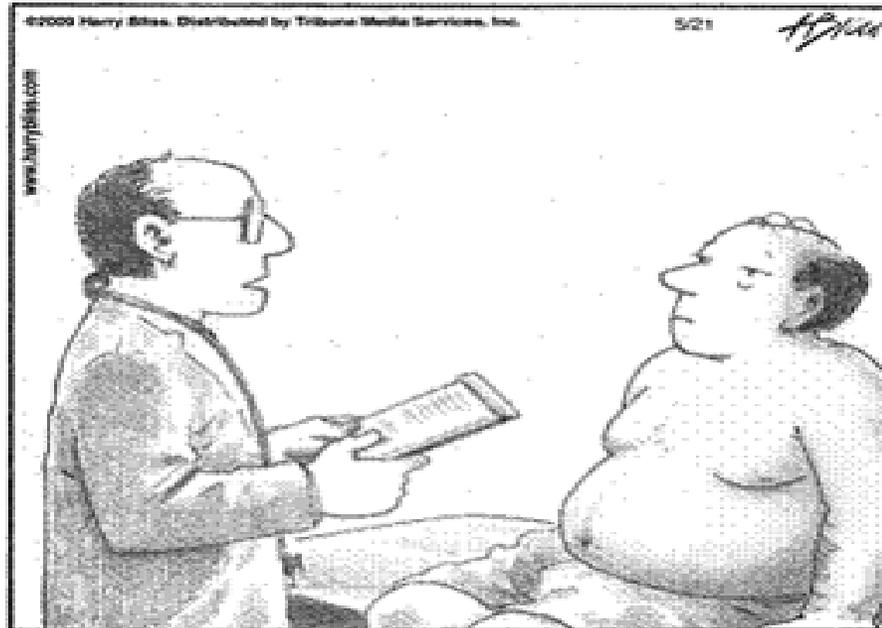
- ✓ Slow down
- ✓ Limit and repeat content
- ✓ Be specific and concrete
- ✓ Demonstrate how it's done
- ✓ Encourage questions
- ✓ Apply teach-back





Plain Language Definition

“Communication your audience can understand the *first time* they read or hear it.”



“Well, yes, I suppose I could explain the test results in ‘plain English’ — but then you’d know how sick you are.”

(www.plainlanguage.gov)



Use Plain Language

- ✓ Common everyday words except for necessary technical terms
- ✓ Personal pronouns (“we” and “you”)
- ✓ Active voice
- ✓ Logical organization

Or, in plain language,
health literacy is:
A person being able to
understand and take
the right action to
make good health
choices.



Examples of Plain Language

- Annually = yearly or every year
- Arthritis = pain in joints
- Cardiovascular = having to do with the heart
- Diabetes = increased sugar in the blood
- Hypertension = high blood pressure





Examples of Plain Language (con't)

- Current **dietary guidelines** for Americans recommend that adults in general should consume no more than 2,300 mg of sodium per day.

- VS -



- The current **recommendations** say that American adults shouldn't **eat** more than 2,300 mg of sodium per day.
Salt is a type of sodium.



Encourage Questions

- Encourages patients to ask questions to engage patients as active partners in their health care.
- Welcoming questions can also
 - ✓ increase patient satisfaction; and
 - ✓ reduce the number of callbacks after a patient leaves.





Encourage Questions (con't)

- “What questions do you have?”
- “[diagnosis] may be new to you, and I expect that you have some questions. What would you like to know more about?”
- Sit, don't stand
- Look and listen





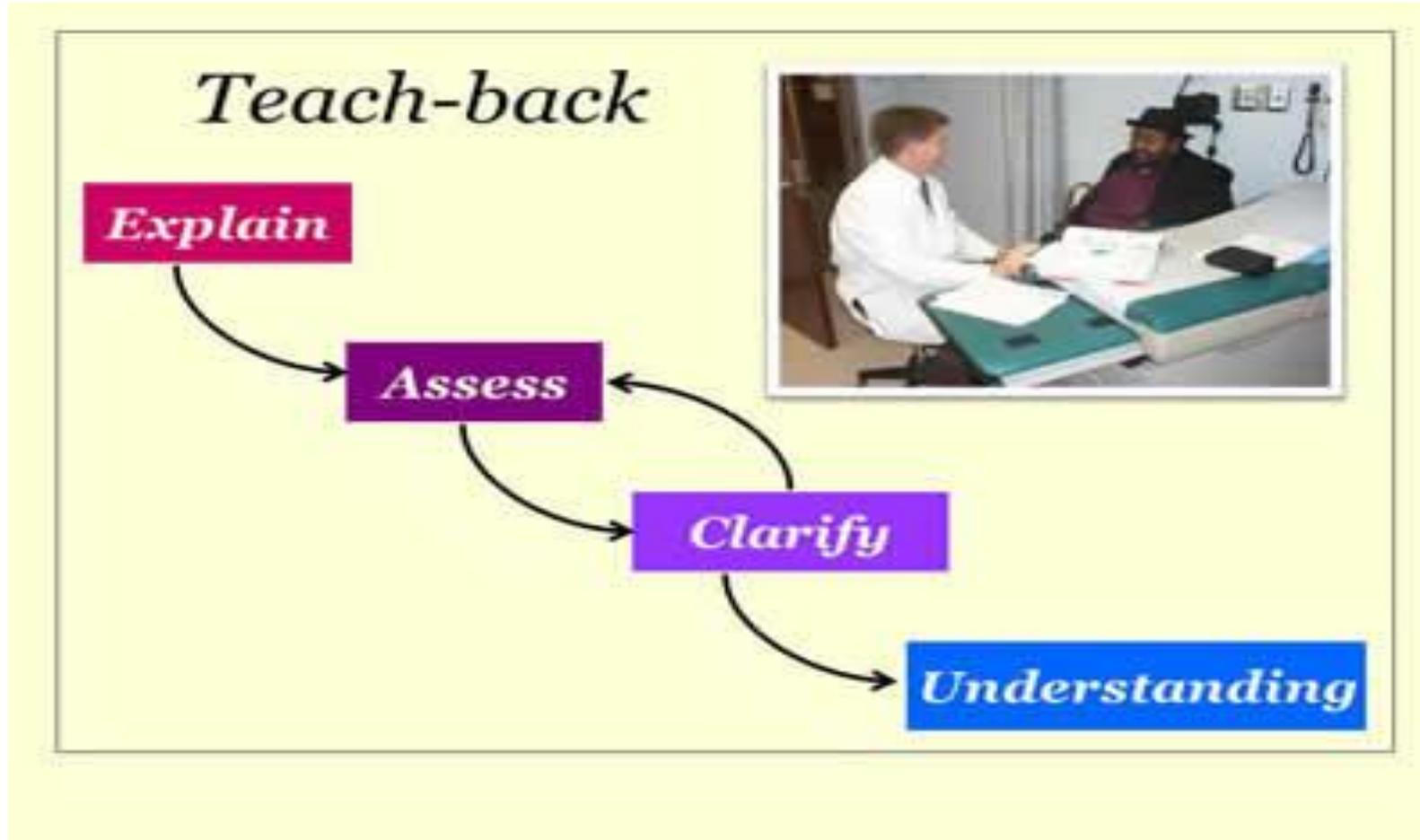
Teach-Back Method

- The **Teach-Back Method** is a way of checking understanding by asking patients to state in their own words what they need to know or do about their health.
- This is not a test of patient's knowledge, but of how well you explained the concept.





Teach-Back Method (con't)





Confirm Patient Understanding

- “I want to make sure I explained it correctly. Can you tell me in your words how you understand the plan?”
- Use the show-me method
- Use handouts if appropriate





What Do Patients Need-to-Know ... ?

When they leave the exam room and/or when they check out?

- What do they need to know about:
 - ✓ Taking medications
 - ✓ Self care
 - ✓ Referrals and follow up

WHAT
YOU
NEED
TO
KNOW?





Language Differences

Patients who do not speak English well, including those who speak American or other sign language, often do not get the health information they need.





Language Differences (con't)

- Assess language preference and language needs
- Use acceptable language assistance services
- Provide written materials in patients' preferred languages





Religion, culture, beliefs and ethnic customs can influence how well patients understand health concepts, how they take care of their health and how they make decisions related to their health.





Discussion Questions

- Have there been instances when you suspected that a patient might have low literacy? What were the signs?
- How can we make it easier for patients with low literacy to understand information?





Discussion Questions (con't)

- What strategies could we adopt to minimize barriers for low literacy patients?



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