What You’ll Learn

- Health Literacy: Definitions, Components, Examples
- Data from National Surveys
- Video Clip: “Health literacy and patient safety: Help patients understand”
- Health Literacy Statistics / Prevalence / Costs
- Should We Screen?
Literacy / Health Literacy Definitions

Literacy

- “Using printed and written information to function in society, to achieve one’s goals, and to develop one’s knowledge and potential” (Kirsch et al, 1993)
Health Literacy

- Health literacy is an interaction between the skills of the public and the demands/expectations of the health sector.
Health Literacy

Out of date…

- “The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions” (Ratzan and Parker, 2000)
Much better…

“Health literacy occurs when a society provides accurate health information and services that people can easily find, understand, and use to inform their decisions and actions.” (Proposed Update of the Definition of Health Literacy. Healthy People 2030. Washington, DC: U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion [cited March 9, 2020])
Another way to think of it…

“Health literacy is a state, not a trait.”

--Brach C. AHRQ
Health Literacy Components

- Reading and writing
- Listening and verbal communication (patient and provider)
- Numeracy
  - ✓ Computation skills
  - ✓ Interpreting / evaluating risk (%)
- Self-efficacy
Other Considerations

- Culture / belief systems
- Mismatch between provider demand and patient skill level
- Mismatch of reading level / materials
- Strong relation to health disparities
- Strong relation to safety and quality
You know what you mean…
But does he?

My Doctor said "Only 1 glass of alcohol a day". I can live with that.
This happens...

An 89-year-old man with dementia is diagnosed with an ear infection and is prescribed an oral liquid antibiotic. His wife understands that he must take one teaspoon twice a day. After carefully studying the bottle’s label and not finding administration instructions, she fills a teaspoon and pours it into his painful ear.

This happens, too…

Mr. G, 45, an Hispanic immigrant, native Spanish language speaker, has a job health screening. He is told his BP is high, can’t work until it’s controlled. Given β-blocker, diuretic, instructed to take each “once a day.” 1 week later, presents @ ED, BP very low, dizzy. Docs can’t figure out. Spanish speaker asks him how many pills he took each day

--Nielsen-Bohlman et al. IoM “A Prescription to End Confusion” 2004
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Nielsen-Bohlman et al. IoM “A Prescription to End Confusion” 2004
Who’s to Blame?

At a teaching hospital, an intern writes in a “Patient’s problems” section of the medical chart, “Speaks no English.”

The attending physician writes a note back in response, “Your problem, not his.”

Clancy C. AHRQ. Comments at Institute of Medicine Health Literacy Roundtable 2/09.
And Now, A Word From Your Patients…

Literacy / Health Literacy Statistics
Data Sources

- 1992 NALS (National Adult Literacy Survey)
- 2003 NAAL (National Assessment of Adult Literacy)
  Added Health Literacy Module
- No further NAAL studies planned (PIAAC)
  *Programme for the International Assessment of Adult Competencies*
  [www.oecd.org/skills/piaac/]
Literacy Levels

- **Below Basic** — no more than the most simple & concrete literacy skills

- **Basic** — skills needed to perform simple, everyday literacy activities

- **Intermediate** — skills needed to perform moderately challenging activities

- **Proficient** — skills needed for more complex & challenging literacy activities
NAAL Literacy Findings

Percent of U.S. adult population with Below Basic or Basic skills in:

- Prose Literacy – 44%
- Document Literacy – 34%
- Quantitative Literacy (Numeracy) – 55%
NAAL Health Literacy Findings

- 36% have limited health literacy skills (22% Basic, 14% Below Basic)
- **About 12% considered proficient**
  - Includes 3% who did poorly on basic screening tasks, routed to alternative assessment
  - Does not include 2% who knew no English or Spanish
- About half (53%) had intermediate HL levels
- Women’s avg. HL score 6 pts. higher (4% more men in Below Basic)
Who has poor health literacy?

- Nearly 60% of 65+ in Basic/Below Basic
- Health ins. from employer ↑ HL, Medicare/Medicaid/No ins ↓ HL
- Hispanics (12% of adult pop.) represent 35% of those in Below Basic HL category
- Below poverty level (17% adult pop.) represent 43% of those in Below Basic HL
- 75% who self-reported poor health in Below Basic HL
Why this is a BSD
Why Does Health Literacy Matter?

Those with limited literacy skills:

- Report poorer overall health
- Have poorer ability to manage chronic diseases
- Have poorer outcomes
- Less likely to understand their diagnosis
- Less likely to have screening / preventive care
- Present in later stages of disease
- Are more likely to be hospitalized / rehospitalized
Why Does Health Literacy Matter?

Cost of Poor Health Literacy:
- $73 billion in unnecessary costs annually (Friedland, Georgetown University, 2003)
- $106-$238 billion in unnecessary costs annually (Vernon, University of Connecticut, 2007)

Cost of Chronic Disease:
- $1.7 trillion (75% of HC expenditures)
- 1 in 2 Americans live with a chronic disease (2012)
- 90% >65 have a chronic disease; 77% have 2+
- 70% of annual US deaths (CDC 2010)
Health Literacy Statistics

- 1 in 2 Americans can’t read above an 8th grade level (Kirsch 2003)

- Most patient education materials written beyond recipients’ ability to understand (IoM 2004)

- 26% couldn’t understand when next appt.
- 42% couldn’t understand “take on empty stomach”
- 60% couldn’t understand consent form (JAMA 1995)
- 381 languages spoken/signed in U.S.
- 60 million Americans (~20%) speak a language other than English at home
- 24 million Americans (~8%) have LEP (limited English proficiency)
- 75-90% of patients in the 2 lowest reading levels describe themselves as being able to read/write English “well” or “very well”
Oh, and then there’s…

- Cognitive impairment
- Hearing / visual impairment
- Medications
- Stress (most forget at least 50% of what healthcare provider told them)

Shame about illiteracy:
- 78% thought they should hide it/cope
- 77% never told their doctor
- 67% never told their spouse
- 19% never told anyone

To Screen or Not to Screen…

- Universal Precautions (treat all as “low literate”)
- Newest Vital Sign (Weiss et al, Family Med, 2005) – ice cream nutritional label (6 questions, 3 minutes)
- “How often do you need to have someone help you when you read instructions, pamphlets, or other written materials from your doctor or pharmacy?” OR “How happy are you with how well you read?”

--Chew, LD. Family Med. Sept. 2004
Assessment-Based Health Literacy Specialist Certificate

Michael Villaire, MSLM
President / CEO, Institute for Healthcare Advancement

Alabama Health Literacy Initiative—2020 Health Literacy Interprofessional Conference

March 12, 2020
What We’ll Cover Today…

- Assessment-Based Health Literacy Specialist (HLS) Certificate: An Overview
- 7 Domains—53 Lessons (Knowledge / Task Statements)
- Certificate vs. Certification
- Creating the HLS Certificate—Process, Participants, Standards
- Professional Development
- Next Steps
7 Domains of the Health Literacy Specialist Certificate

- Communication
- Ethics
- Education
- Organizational Systems & Policies
- Public Health
- Language, Culture, and Identity
- Community Engagement
Assessment-Based Certificate: Definition

- Relatively short, non-degree granting program
- Provides instruction and training toward gaining knowledge/skills/competencies
- Includes in-program assessments derived from the learning objectives
- Requires completion of specific education/courses/curricula/training
- Can build capacity in a profession / fill an ongoing skills gap
Certification vs. Certificate: What’s the Difference?

Certification
- Based on broad professional role
- Awards a designation or credential
- Independent of a particular training or curriculum

Certificate
- Based on narrow content scope
- Typically does not award a designation or credential
- Reflects completion of a particular training or curriculum
## Certification vs. Certificate: What’s the Difference?

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<tr>
<th>Certification</th>
<th>Certificate</th>
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<tr>
<td>Includes maintenance/renewal requirements</td>
<td>Does not include maintenance/renewal requirements</td>
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<tr>
<td>Content defined by profession and publicly available resources</td>
<td>Content is proprietary or institution-specific</td>
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Creating the HLS Certificate: Process / Participants

- Listserv event February 2016 gathered input / interest
- A call for applications to participate in Job Analysis*
- Task Force—16 SMEs assembled to design a survey—knowledge and tasks → health literacy specialist role
- Survey pilot tested and refined
- Data collected in late 2016
- 334 responses (64%) used for analysis
- 9 SMEs reviewed data / determined weightings / domains

Next Steps

- Domains beta tested / revised / rolled out
- Evaluations / comments collected
- Next Job Analysis—2021 (International component)
- Decision on Certification based upon response to HLS Certificate
Professional Development

- Last 3 IHA Annual Health Literacy Conferences have linked breakout sessions to Domains in the Assessment-Based Health Literacy Specialist Certificate (other Health Literacy conference organizers also using)
- Select Domains based upon your work requirements
- Select additional Domains to expand your knowledge
- Access Health Literacy Specialist Model Job Description [www.iha4health.org](http://www.iha4health.org)
- Certificate Domains to be rolled out in the next 9 months
Thank you!
What questions do you have?

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The Institute for Healthcare Advancement’s
19th Annual Health Literacy Conference

May 13-15, 2020
Hilton Costa Mesa
www.hlc.iha4health.org