Health Literacy & Plain Language

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Literacy is Contextual
National Assessment of Adult Literacy (NAAL)

- 14% Below Basic (30 million)
- 29% Basic (63 million)
- 44% Intermediate (95 million)
- 13% Proficient (23 million)


Program for International Assessment of Adult Competencies (PIAAC)

2012 Survey of Adult Literacy
Country Specific Results

United States

• Larger proportions of adults in US than in other countries have poor literacy and numeracy skills

• Socio economic factors have strong impact on adult literacy

• Literacy skills are linked to employment outcomes as well as personal and social well-being

What are the literacy demands in health and healthcare?
**Most Cited Definition**

**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 (DHHS, 2000)

Health Literacy: A Two-way Street

Fig. 2. Conceptual model of health literacy of the European Health Literacy Survey

Health Literacy Skills

Domains of Health Literacy (Nutbeam 2001)

- **Functional health literacy** – basic skills in reading and writing to function effectively in everyday situations
- **Interactive health literacy** – more advanced skills to derive meaning and apply to changing circumstance
- **Critical health literacy** – cognitive and social skills to critically analyze and use information for change

At First Glance – Readability

• Numerous studies show readability of health materials far exceed skills of patients

• Studies of Web-based health information show similar results

Measuring Health Literacy

The Newest Vital Signs

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Serving Size</td>
<td>1/2 cup</td>
<td></td>
</tr>
<tr>
<td>Servings per container</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Amount per serving</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calories</td>
<td>250</td>
<td>Fat Cal 120</td>
</tr>
<tr>
<td>%DV</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>Total Fat</td>
<td>13g</td>
<td>20%</td>
</tr>
<tr>
<td>Sat Fat</td>
<td>9g</td>
<td>40%</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>28mg</td>
<td>12%</td>
</tr>
<tr>
<td>Sodium</td>
<td>55mg</td>
<td>2%</td>
</tr>
<tr>
<td>Total Carbohydrate</td>
<td>30g</td>
<td>12%</td>
</tr>
<tr>
<td>Dietary Fiber</td>
<td>2g</td>
<td></td>
</tr>
<tr>
<td>Sugars</td>
<td>23g</td>
<td></td>
</tr>
<tr>
<td>Protein</td>
<td>4g</td>
<td>8%</td>
</tr>
</tbody>
</table>

* Percent Daily Values (DV) are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs.


• Test of Functional Health Literacy in Adults (TOFHLA)

• Rapid Estimate of Adult Literacy in Medicine (REALM)

Measuring Health Literacy

Affects on Health Outcomes

- Low health literacy is linked to...
  - Under-utilization of services
  - Increased medication errors
  - Poor knowledge about health
  - Increased hospitalizations
  - Poor health outcomes
  - Increased healthcare costs

Activity

Discuss in pairs

What are the challenges your patients or clients have understanding health information?
Who is at Risk? Less Educated

- Nearly 50% of adults with less than a high school diploma had Below Basic health literacy

Who is at Risk? Older Adults

- Adults in the oldest age group – age 65 and older – had lower health literacy than adults in the younger age groups.

http://nces.ed.gov/naal/health_results.asp
# Health Literacy and Health Equity

<table>
<thead>
<tr>
<th>Percentage of Whites in each literacy level</th>
<th>Percentage of Blacks in each literacy level</th>
<th>Percentage of Hispanics each literacy level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below basic: 9%</td>
<td>Below basic: 24%</td>
<td>Below basic: 41%</td>
</tr>
<tr>
<td>Basic: 19%</td>
<td>Basic: 34%</td>
<td>Basic: 25%</td>
</tr>
<tr>
<td>Intermediate: 58%</td>
<td>Intermediate: 41%</td>
<td>Intermediate: 31%</td>
</tr>
<tr>
<td>Proficient: 14%</td>
<td>Proficient: 2%</td>
<td>Proficient: 4%</td>
</tr>
</tbody>
</table>

Who is at Risk? Everyone

In health care a high level of health literacy is expected and often assumed
What Are We Doing About It?

• Reduce barriers, create health literate organizations and systems

• Increase the health literacy on individuals, families and communities

• Create policies to promote population health literacy

Health Literacy Policy

- Plain Language Writing Act (2010)
- Affordable Care Act (DHHS, 2010)
- Services Standards (OMH 2013)
- Shanghai Declaration on health literacy and sustainable development (WHO 2016)
Health Literacy and Adult Education

English language learners working on a cancer health literacy curriculum

## Attributes of a Health Literate Organization

1. **Has leadership** that makes health literacy integral to its mission structure and operation

2. Integrates health literacy into planning, evaluation, **patient safety and quality improvement**

3. Prepares the **workforce** to be health literate and monitors progress

4. Includes **populations served** in the design, implementation and evaluation of health information and services

5. Meets need of populations with a range of health literacy skills while **avoiding stigmatization**

6. Uses health literacy strategies in **interpersonal communication** and confirms understanding at all points of contact

7. Provide easy access to health information and services and **navigation assistance**.

8. Designs and distributes print, audiovisual, and social media content that is **easy to understand and act on**

9. Addresses health literacy in **high-risk situations**, including care transitions and communications about medicine

10. Communicates clearly what **health plans** cover and what individuals with have to pay for services.

**Source:** Institute of Medicine Roundtable on Health Literacy. Attributes of a Health Literate Organization  
http://iom.edu/~/media/Files/Perspectives-Files/2012/Discussion-Papers/BPH_Ten_HLit_Attributes.pdf
Create a Shame-free Environment

• Encourage questions
  – What is the problem?
  – What do I need to do?

• Engage all staff
  – Front desk
  – Medical Assistants
  – House Keeping

## Avoid Jargon

<table>
<thead>
<tr>
<th>Jargon</th>
<th>“Living room” language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosis..........................</td>
<td>Cause of your illness</td>
</tr>
<tr>
<td>Anti-inflammatory.......</td>
<td>Lowers fever and swelling</td>
</tr>
<tr>
<td>Nasal congestion..............</td>
<td>Stuffy nose</td>
</tr>
<tr>
<td>Lesion..............................</td>
<td>Wound, sore, cut</td>
</tr>
<tr>
<td>Risk factor.......................</td>
<td>Will increase your chance ...</td>
</tr>
</tbody>
</table>
Check for Understanding

Do you have any questions?

Provide Language Assistance

- Interpreter services
- Translation of materials

Birth control methods brochures in five languages. Action for Boston Community Development (ABCD)
Plain Language: A Strategic Response

- Communicate in **everyday language**
- Use **images** that are **relevant** to your audience
- **Limit** information to **need to know**
- Break complex information into **chunks**

Key Points

• Low health literacy is linked to poor health outcomes and increased costs

• Health literacy is a health equity issue

• Interventions aim to build skills AND reduce complexity

• Use plain language as a strategic response