Overview of Health Literacy

Orientation for New Employees
Ahmed Elmi, MPH, CHES
Cigarette Restitution Funds Programs Unit
Center for Center Surveillance and Control
Training Goals

• Provide an overview of health literacy and approaches to working with individuals with low literacy skills

• Highlight challenges and strategies to increase CRC screening
Health Literacy: Building an Individual’s Capacity to Obtain, Process, and Understand CRC Information
Health Literacy: A Major Barrier to Using Health Care Services

- Health literacy
  - Is the ability to *read, understand, and act* on health information (JAMA, 1999)
  - Occurs in health care setting vs. other settings for general literacy
  - Involves concepts & language used in health information and education
  - Is measured by using:
    - Rapid Estimate of Adult Literacy in Medicine (REALM) & Test of Functional Health Literacy in Adults (TOFHLA)

American Medical Association, Understanding Health Literacy, 2005 (AMA, 2005)
Adults with Limited Health Literacy Skills

- Are less likely to use preventive services and report poorer health status
- Are less knowledgeable of disease management and health-promoting behaviors
- Have higher rates of health services use (AMA, 2005)
  - 29% more likely to be hospitalized
  - 69% more likely to be in hospital for 2 years

Adults with Limited Literacy Skills

• Have higher health care costs
  – $10,688 per year for people with limited literacy skills
  – $2,891 per year for people with higher literacy skills
  – Excess health care cost is estimated to up to $73 billion dollars per year due to excess health care costs

AMA, 2005
Fact Sheet: Health Literacy

• About 90 million have difficult understanding and acting on health information (IOM, 2004)
  - Worse among the elderly and people with poor health (JAMA, 1999)
  - 27% did not understand when the next appointment was scheduled.
  - 48% could not understand directions for taking medications
  - 60% could not understand a consent form.

Cleveland Clinic Journal Of Medicine, May 2002
Contributors to the Problem of Limited Health Literacy

• Medications (more medications and usage)
• Time
  – Providers spend less time with patients
• Patient self care
  – more personal responsibility and outpatient care
• Fragmentation of care
  – People seek care at multiple places resulting poor care coordination and communications
• Insurance and paper work

AMA, 2005
Working With Individuals Who Have Low Health Literacy
Practical Clues to Limited Literacy

Include:

- Claim they have forgotten their reading glasses
- Bring family members with them
- Fill out intake forms incompletely or inaccurately
- May be ashamed to ask questions
- Prefer to receive health information in a verbal form as compared to written information

(D. Falvo, 1994)
Assessing Literacy

- The best method to assess the degree of literacy involves:
  - Being observant
  - Being alert to cues
  - Asking sensitive and direct questions
  - Establishing trusting and helping environment

(D. Falvo, 1994)
Working With Low-literacy Groups

- Principles of Adult Learning says people retain:
  - 10% of what they read
  - 20% of what they hear
  - 30% of what they see
  - 50% of what they hear and see
  - 70% of what they say
  - 90% of what they do and say
Working With Low-literate Groups (cont.)

- Slow down
- Use short sentences
- Use “active voice”
  Active voice: “You give your doctor this form,”
  Passive voice: “This form is given to your doctor.”
- Give only essential information
- Use terms that are familiar to the individual
  - Gut vs. colon, bowels, intestines

(D. Falvo, 1994) Except examples
Working With Low-literacy Groups (cont.)

• Use visuals
  – Use graphics and video to enhance the message, stimulate discussion, and emphasize a topic. (CDC)

• Repeat instructions
  – Use a "teach back" or "show me" approach to confirm understanding. (Davis et.al., 2002)
Working With Low-literacy Groups: Moving Beyond the Brochure

• Brochures do not substitute for direct communication with the public
  – Public will take information more seriously if time is taken to point out major points
  – People should be told why they are being given the teaching aids & how they are to use them

(D. Falvo, 1994)
The next four slide lists recommendations as written by American Medical Association and American Medical Foundation
Checklist for patient-friendly office procedures

- Exhibit a general attitude of helpfulness.
- When scheduling appointments...
  - Have a person, not a machine, answer the phone.
  - Only collect necessary information.
  - Give directions to the office.
  - Help patients prepare for the visit. Ask them to bring in all their medications and a list of any questions they might have.

Removing barriers to better, safer care
Health literacy and patient safety: Help patients understand
Manual for Clinicians
American Medical Association Foundation and American Medical Association (2007)
Table 9. Checklist for patient-friendly office procedures

- Use clear and easy-to-follow signage.
- Ask staff to welcome patients with a general attitude of helpfulness.
- During office check-in procedures...
  - Provide assistance with completing forms.
  - Only collect essential information.
  - Provide forms in patient’s language.
  - Provide forms in an easy-to-read format.

Removing barriers to better, safer care
Health literacy and patient safety: Help patients understand
Manual for Clinicians
American Medical Association Foundation and American Medical Association (2007)
Table 9. Checklist for patient-friendly office procedures

- When referring patients for tests, procedures, consultations...
  - Review the instructions.
  - Provide directions to the site of referral.
  - Provide assistance with insurance issues.

Removing barriers to better, safer care
Health literacy and patient safety: Help patients understand
Manual for Clinicians
American Medical Association Foundation and American Medical Association (2007)
Table 9. Checklist for patient-friendly office procedures

- When providing patients with information...
  - Routinely review important instructions.
  - Provide handouts in an easy-to-read format.
  - Use non-written modalities.

Removing barriers to better, safer care
Health literacy and patient safety: Help patients understand
Manual for Clinicians
American Medical Association Foundation and American Medical Association (2007)
Colorectal Cancer Screening Saves Lives!

THE END