

Back to School:

Improving Health Literacy to Improve Health

The start of a new school year represents an opportune time to consider how literacy skills can influence both the quality of the health care services people receive and the health outcomes they experience. Health literacy is defined as the ability to "obtain, process, and understand basic health information and services needed to make appropriate health decisions" (Institute of Medicine 2004). This broad, functional definition requires that an individual have basic literacy skills – the ability to listen, speak, read, write, and do simple math – as well as the capacity to apply these literacy skills within the often complex context of the health care system.

A shocking number of Americans lack adequate health literacy skills. Results from the 2003 National Assessment of Adult Literacy (NAAL) survey found that just 12 percent of adults were proficient in reading and interpreting complex health information. An additional 53 percent had intermediate health literacy skills – skills necessary to complete moderately challenging health literacy tasks – and approximately 36 percent had basic or below basic health literacy skills (U.S. Department of Education 2007). These results likely represent conservative estimates due to methodological constraints of the survey such as omission of technical terms or specific medical terminology in the survey's reading samples. In addition, the researchers did not fully explore cultural differences that may limit an individual's ability to act on health information.

Vulnerable populations, including the elderly, the poor, and people with limited English proficiency, are particularly likely to have lower health literacy skills (Institute of Medicine 2004). For example, the NAAL survey shows that adults ages 65 and older have lower health literacy rates than younger age groups. Almost 30 percent of those 65 and older had below basic health literacy levels compared to just 10 percent of those ages 19 to 39 (U.S. Department of Education 2007).

Now, more than ever, consumers are asked to take an active role in their health care. Without adequate health literacy skills, consumers may have significant difficulty understanding diagnosis or treatment options, reading the label on a prescription bottle, calculating dosage for an over-the-counter medication, or making choices regarding providers and health plans. Health-related documents, such as insurance forms and test results, are often conveyed in "medicalese" and can be difficult for even savvy consumers to understand and use. The Institute of Medicine (IOM) identified more than 300 studies suggesting that health information is often not understood by Without adequate health literacy skills, consumers may have significant difficulty understanding diagnosis or treatment options, reading the label on a prescription bottle, calculating dosage for an over-the-counter medication, or making choices regarding providers and health plans.

the target audience (IOM 2004).

The IOM gives the following example of text taken from a consent form for participation in a smoking cessation study: "Individuals may withdraw from the study at any time without penalty or loss of benefits to which they are otherwise entitled. Such withdrawal will not compromise any individual's ability to receive medical care at the institution." In other words, "Taking part in this study is up to you. You can stop taking part in it at any time. It will not get in the way of your care at this clinic" (IOM 2004).

The disconnect between the information consumers receive and their ability to use it can affect their care and treatment outcomes. For example, a review of health literacy research by the Agency for Healthcare Research and Quality (2004) found that limited health literacy appears linked to a variety of medical errors such as adverse drug events and failure to receive preventive health care services. Approximately 10 percent of adverse drug events are linked to errors in the use of the drug as a result of communication failure. A direct causal relationship between health literacy and health outcomes has not been conclusively established, however. Low health literacy levels are associated with a range of negative outcomes including a higher incidence of chronic diseases and less than optimal use of available preventive services. Limited health literacy may also influence the overall costs of health care. In addition to using fewer preventive services, patients with limited health literacy skills have higher hospitalization rates and appear to use more services designed to treat the complications of disease (U.S. Department of Health and Human Services 2006).

OPPORTUNITIES FOR FOUNDATIONS

Health foundations support a variety of programs and initiatives to promote health literacy. These programs are typically targeted to either patients or providers, although some funders use both strategies simultaneously.

➤ Improving Patient-Provider Communications – Some funders are working to improve the capacity of providers to communicate effectively with patients. The Commonwealth Fund has addressed health literacy and patient-provider communications in its work on quality and racial and ethnic disparities. One innovation supported by the fund enabled providers at Iowa Health System (IHS), which has 10 affiliated hospitals in seven cities, to better understand how low health literacy affects patients and to identify ways to modify the delivery of health information and improve patientprovider communications.

IHS developed a series of hands-on workshops for nurses, patient educators, quality improvement staff, volunteers, and others to share information about health literacy and strategies for addressing the issue. Teams within the collaboration worked to clarify written materials, including admission forms, consent forms, and brochures, on specific chronic conditions such as diabetes and heart disease. They also participated in training programs on how to use the new materials with patients and to prompt "teach backs" to ask patients to recount what he or she had been told during the discussion. Evaluation of the collaboration showed an increase in patient satisfaction survey scores as well as continued engagement of staff in workshops and trainings.

► Focusing on the Health Literacy of Consumers – Other efforts by health foundations seek to improve the health literacy skills of consumers. The Altman Foundation's health literacy initiative has been implemented in adult education programs throughout New York City. A partnership with the mayor's office and local health care and adult literacy providers, the initiative developed and implemented health literacy curricula to build broad literacy skills rather than focus exclusively on health-related materials.

A key component of the Altman Foundation initiative is the use of health literacy study circles. Developed by researchers at the Harvard School of Public Health, the study circles infuse health literacy content into adult education instruction. Areas of focus include navigating the health system, prevention, and chronic disease management. Evaluation results of this work have shown that adult learners achieved statistically significant gains in functional health literacy. Participants also indicated that they felt empowered to manage their health and that of their families. They also reported increased interest in the subject of health, which led to greater motivation to improve their reading, writing, and language skills.

The Healthcare Georgia Foundation has also supported health literacy improvement through adult education programs. A grant to Middle Georgia Technical College helped implement a health literacy program, To Your Health, tailored to Hispanic families. The goal of the program is to help adults with low English literacy better understand health information, navigate the health system by asking informed questions, and make better health decisions. Classes are conducted at hospitals, clinics, community centers, senior centers, and adult literacy centers. The program was developed by the Office of Adult Literacy in the Georgia Department of Technical and Adult Education.

Educating Providers About Health Literacy –

Philanthropic efforts also seek to improve providers' ability to provide appropriate communications while building patient skills. The American Medical Association Foundation has supported HealthNOW!, which seeks to educate providers about health literacy issues and to teach health literacy skills to adult English for speakers of other languages (ESOL) students. Health NOW! trains medical and dental students as ESOL instructors and sends them out to community agencies to teach adult learners of English about various health topics. The foundation also developed the toolkit Health Literacy: Help Your Patients Understand. The toolkit is used to inform doctors, health care professionals, and patient advocates about health literacy. It includes a documentary and instructional video, an in-depth manual, case studies, and other resources. The learning objectives for providers include understanding the full scope of health literacy, recognizing health system barriers faced by patients with low health literacy, and improving verbal and written communications with patients. Providers can also earn continuing medical education credits for participating.

SOURCES

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