Health Literacy: Policy & Practice

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Health Literacy Foundation:
Measures of Adults’ Literacy Skills

Three waves of assessments [OECD sponsorship]: IALS 1990s, ALLS 2003, PIAAC 2011

Focus: Literacy, numeracy, problem solving skills of adults in industrialized nations

Measures: Adults ability to use everyday materials to accomplish everyday tasks with accuracy and consistency

Findings: Significant numbers of adults in most industrialized nations do not possess the most basic information-processing skills considered necessary to succeed in today’s world.

Implications: Agency, civic engagement, economic policy, health
PIAAC [2011]: Ireland Compared to Other Countries

Figure 2.2
Percentage of adults (16-65) at Levels 3-4-5 of literacy proficiency

- Japan
- Finland
- Netherlands
- Sweden
- Australia
- Norway
- Estonia
- Slovak Republic
- Flanders (Belgium)
- Canada
- Average
- Czech Republic
- Denmark
- Korea
- England
- Germany
- United States
- Austria
- Poland
- Northern Ireland
- Ireland
- France
- Cyprus
- Spain
- Italy
Foundation: indication of links between maternal literacy in developing nations and child health outcomes

First publication of findings from US [1992 NALS] and International Adult Literacy Surveys [1994-6 IALS]
  • Significant proportion of adults in industrialized nations have difficulty using print materials to accomplish mundane tasks with accuracy and consistency
  • Faulty assumptions uncovered

Research Question: Are there health consequences?
A Previously Unexamined Variable: Health Literacy

Social Determinants of Health: Well established links between health and key social factors such as education, income, social status, access to resources . . .

Health Literacy Research Findings: Health literacy is linked to a wide array of health outcomes

Health Literacy studies have illuminated the pathway between education and health outcomes
Health Literacy Findings

Health literacy is related to / predicts

- Knowledge
- Reported health promotion and disease prevention behaviors
- Management of long term illness [chronic disease measures]
- Morbidity
- Mortality

IOM, 2004
Analysis & Recommendations

AHRQ, 2004, 2011
Systematic Reviews

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Study Limitations: Conceptual Errors

Limited Focus & Measures

Misplaced Responsibility

Neglected Context

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Insights from Research & Theory

Literacy

• Literacy measures must include attention to texts, tasks, and contexts [see Snow, LeVine; Purcell-Gates]

Health Education/ Health Promotion

• Bronfenbrenner: Social Ecological Model

Epidemiology

• Reciprocal relationship between persons and environments
Corrections: Paradigm Shifts

From Focus on Skills of individuals
  Mismatch
From Focus on Public’s Capabilities
  Professionals’ Skills
From Focus on Practitioners
  Institutional Culture & Literacy Environment
From Focus on Health Care
  Health Promotion & Public Health

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Health Literacy: An Evolving Concept

Don Nutbeam, Social Science and Medicine, 2008

the cognitive and social **skills** which determine the motivation and ability of individuals to gain access to, understand and use information in ways which promote and maintain good health. Nutbeam, WHO, 1998

the degree to which **individuals have the capacity to obtain, process, and understand** basic health information and services needed to make appropriate health decisions USDHHS, 2010

**engagement** in a wide range of health actions that extend from personal behaviors to social action to address the determinants of health. Nutbeam, SSM, 2008
New Definitions

Consider a definition that shifts attention to the capacity of professionals and health institutions to provide access to information and support the active engagement of people.

Filling the Research Gaps

The oral exchange
• e.g. Nouri & Rudd, Health literacy in the oral exchange, *Patient Education & Counseling*, 2014

Numeracy
• e.g. Apter et al., Do the Math, *Journal of General Internal Medicine*, 2008

Mismatch
• e.g. Rowlands et al., The Health Information Gap, *British Journal of General Practice*, 2014

Health Literacy Environment of Hospitals
• e.g. Groene & Rudd, Results of a Feasibility Study to Assess the health literacy environment, *Journal of Communication in Health Care*, 2011.
Filling the Research Gaps

Health Literacy Environment in Dentistry
• e.g. Horowitz et al., Health Literacy Environmental Scans of community based dental clinics in Maryland, *American Journal of Public Health*, 2014.

Public health
• e.g. Institute of Medicine, Implications of Health Literacy for Public Health. *Roundtable on Health Literacy, Workshop Summary*, 2014

Communication in Times of Chaos/Disaster
• e.g. Goto et al., Health literacy training for Public Health Nurses in Fukushima, *Japan Medical Association Journal*, 2014.

Health Promotion Practice
• e.g. Institute of Medicine, Promoting Health Literacy to Encourage Prevention and Wellness, *Roundtable on Health Literacy, Workshop Summary*, 2011.
Implications for Research & Practice: New Focus

Attention to ‘both sides of the coin’
• The reader & text
• The text & the writer
• The speaker & the listener
• Math displays and concepts
• The ‘traveler’ & the environment
• Assumptions & norms
• The interactions between lay and medical cultures

Attention to commonly examined literacy–related factors
• Texts
• Tasks
• Context
### Implications for Research & Practice: New Processes

<table>
<thead>
<tr>
<th>Deconstruct health activities to understand the complexity of health tasks, health texts, and health related tools</th>
<th>Examine our health &amp; health care systems &amp; institutions to identify the facilitating factors and barriers that support or inhibit access to information and active engagement of people</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Study options</strong> that reduce complexity, eliminate barriers, and increase access</td>
<td><strong>Improve practice</strong></td>
</tr>
</tbody>
</table>

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Implications for Research & Practice: New Measures Needed

A definition determines the scope of a concept
A definition determines measures [who/what/how]

We have: Over 50 measures of patients’ skills/deficits

We lack: Measures of tool complexity/ease of use
Measures of professionals’ skills
Measures of practice attributes
Measures of institutional characteristics [complexity & demands]
# Implications for Practice & Policy: Rigor Required

## Practice
- Attention to adult literacy assessments
- Respectful attention to health communication
- **Insistence on scientific rigor**
  - Formative research
  - Testing with intended audiences

## Policy
- Plain language initiatives
- Regulations for development & dissemination of critical texts
  - Institutional Review Boards & rigorous standards
  - Contractual obligations
Time for Action

- **Documented**: Significant proportions of adults in most industrialized nations have limited literacy & numeracy skills
- **Documented**: Literacy skills are linked to social factors
- **Documented**: Literacy skills are linked to health outcomes
- **Documented**: Mismatch between reading level of health materials and average reading skills of adults
- **Documented**: Health systems & health care processes have become increasingly complex

**Implications**: Health Disparities

**Action**: Remove barriers
Create a Balance

Demands + Expectations  Health Literacy  Individual Skills
Game: Connect All the Dots

Use 4 straight connected lines
Once you begin: Do not lift pen from paper
Common Conceptual Error: Self Imposed Box
Think Outside the Box

Poised for Action
Initial Health Literacy Error

Boxed in by a focus
On the patient
Health Literacy: Accessible Information, Care, & Services
Continuing Health Literacy Error

Boxed in by a focus within the Clinical Setting & Medical Care
Thinking Outside the Box

Civic Engagement:
Community Health
Environmental Health
Health Policy

Activities at Work & in Community

Health Literacy:
Accessible Information, Engagement, Advocacy, Public Health

Activities at Home With and for Loved Ones

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The capacity of professionals & health institutions to provide access to information and support the active engagement of people [Rudd 2010]