Health Literacy

What Health Care Providers Need to Know

Materials for this program were derived in large part from the Health Literacy Program published by the American Medical Association and the AMA Foundation. The author of the program is Barry D. Weiss, M.D.

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Participant Guide
Purpose

In this class participants will become aware of the impact of low health literacy, and learn skills and methods to help successfully communicate to patients who may be challenged by this condition.

WIIFM

Completing this class will help you be knowledgeable about a phenomenon that keeps people from getting the care they need. You’ll also feel more confident in your ability to clearly communicate with people who may have low health literacy.

Objectives

Upon completion of this class you will be able to:

- Define health literacy and describe the magnitude and impact of low health literacy.
- Use communication strategies to ensure that patients who may have low health literacy effectively receive health plan information.
Icebreaker

1. Share your name and position.

2. Share one of the following:

   • A time that you as a consumer had a difficult time comprehending medical or health plan information.

   • A time when a family member or someone you know had a difficult time comprehending medical or health plan information.

   • A time when you struggled with helping a patient understand the information you were imparting.

Class format

This class employs a variety of methods and materials to help you learn:

   • Discussion
   • Lecture
   • Your participant guide
   • Video: Help your Patients Understand
Understanding the Impact of Low Health Literacy

“… there is a wide spread problem that is seriously impacting health care in the United States, and that is low health literacy…” Richard Carmona, US Surgeon General

**What is literacy?**

**General Literacy:**

“An individual’s ability to read, write, and speak in English, and compute and solve problems at levels of proficiency necessary to function on the job and in society, to achieve one’s goals, and develop one’s knowledge and potential.”

National Literacy Act of 1991

**What is health literacy?**

**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.”

Healthy People 2010
True or false?

1. Most people with a literacy problem are poor, immigrants or minorities.
2. People will tell you if they have problems reading.
3. The number of years of schooling is a good general guide to determine literacy level.

Literacy levels in the US population

(source – National Adult Literacy Survey)
### Examples of tasks on the National Adult Literacy Survey

| Level 1 | • Sign name  
• Find a country in a short article  
• Find expiration date on license  
• Locate one piece of information in a sports article | **Significance**  
• Functionally illiterate |
|---|---|
| Level 2 | • Enter background information on a Social Security application  
• Find intersection on street map  
• Locate two pieces of information in a sports article | • Marginally illiterate |
| Level 3 | • Write a brief letter explaining an error on a credit card bill  
• Enter information into an automobile maintenance record  
• Identify information from a bar graph | • Functionally literate |
| Level 4 | • State in writing an argument made in a lengthy newspaper article  
• Explain difference between two types of employee benefits  
• Compare two metaphors used in a poem | • Functionally literate + |
| Level 5 | • Summarize the way lawyers may challenge prospective jurors  
• Compare approaches stated in a narrative on growing up  
• Use table comparing credit cards to write about the differences between them | • High-level literacy |

Consequences

Did you know…?

- 54% of seniors didn’t understand taking medication on empty stomach.
- One study found that 26% of patients could not read their appointment slips.
- Informed consent language is usually at the 12\textsuperscript{th}-17\textsuperscript{th} grade level. The average American reads at an 8\textsuperscript{th} grade level.
- 48% of seniors with low health literacy didn’t understand ‘taking medicine every six hours.’
- 76% of patients didn’t understand following instructions for an upper GI test (written at a fourth grade level).
- Most health education materials are written at a 12\textsuperscript{th} grade level or above.
- 100% of low literacy seniors didn’t understand Medicaid rights written at a 10\textsuperscript{th} grade level.
- Fewer than half of low-literacy diabetics knew the symptoms of hypoglycemia.
- The majority of low-literacy asthmatics could not demonstrate the proper use of an inhaler.
- Low literacy parents were less likely to know how to read a thermometer.
- Low-literacy patients with hypertension were less likely to know that weight loss and exercise lower blood pressure.
- Patients with average reading levels are unable to understand most of the content of consent forms used for research studies for cancer drugs.
- Highly literate, well-educated adults also report difficulty understanding information provided to them by clinicians.

This results in:

- Lower health knowledge and less healthy behaviors
- Greater health costs
- Poorer health outcomes
Age-related factors

Question for discussion: why do you think low literacy tends to increase with age?
The cost of low health literacy

We all pay!

Cost is estimated to exceed 50 billion per year.

- 39% paid by Medicare (FICA taxes on workers)
- 17% paid by employers
- 16% paid by patients, out-of-pocket
- 14% paid by Medicaid
- 14% from other public and private sources

Exacerbations to the problem

- Reliance on the written word for patient instruction
- Increasingly complex healthcare system
  - More medications
  - More tests and procedures
  - Growing self-care requirements
  - Esoteric language
- An aging population
- A more culturally diverse patient population
“Help Your Patients Understand”

While watching note the barriers to access, diagnosis and treatment/care depicted in the video.

*Question for discussion: what kinds of barriers to our organization’s services might our patients encounter?*
What’s it Like to Have Low Literacy?

Introduction

- The following passage simulates what a reader with low general literacy sees on the printed page
- Read the entire passage out loud
- You have one minute to read
- (Hint: The words are written backwards and the first word is “cleaning”)

GNINAELC – Ot erussa hgh ecnamrofrep, yllacidoirep naelc eht epat sdaeh dna natspac revenehw uoy eciton na noitalumucca fo tsud dna nwork-der edixo selcitrap. Esu a nottoc baws denetsiom htiw lyporposi lohocla. Eb erus on lohocla sehcuot eht rebbur strap, sa ti sdnet ot yrd dna yllautneve kcarc eht rebbur. Esu a pmad tholc ro egnops ot naelc eht tenibac. A dlim paos, ekil gnihsawhsid tnegreted, lliw pleh evomer esaerg ro lio.

### Translating Medical Terms into Plain Language

**Exercise:**

With a partner, think of alternative words that more clearly substitute for these terms.

<table>
<thead>
<tr>
<th>Medical or Health Plan Term</th>
<th>Plan Language Substitute</th>
</tr>
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<tbody>
<tr>
<td>Analgesic</td>
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<tr>
<td>Anti-inflammatory</td>
<td></td>
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<tr>
<td>Benign</td>
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<td>Contraception</td>
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<td>Hypertension</td>
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<tr>
<td>Oral</td>
<td></td>
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<tr>
<td>Participating provider</td>
<td></td>
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<tr>
<td>Care system</td>
<td></td>
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<tr>
<td>Cardiac problem</td>
<td></td>
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<tr>
<td>Deductible</td>
<td></td>
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<tr>
<td>Enlarge</td>
<td></td>
</tr>
<tr>
<td>Heart failure</td>
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<tr>
<td>Infertility</td>
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<tr>
<td>Lateral</td>
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<td>Primary care clinic</td>
<td></td>
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<tr>
<td>Menopause</td>
<td></td>
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<tr>
<td>Prior authorization</td>
<td></td>
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<tr>
<td>Referral</td>
<td></td>
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<td>Toxic</td>
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</tbody>
</table>

Skills for Communicating with Low-literacy Patients

Red flags

- Unable to name medications, or explain purpose or timing of administration
- Difficulty explaining medical concerns
- Has no questions
- Frequently missed appointments
- Skipped tests and referrals
- Non-compliant with medications

Common errors you may be making

- Asking “Do you have any questions?” or “Do you understand?”
- Assuming that the patient understands because he or she does not ask questions.
- Using idiomatic terms (in addition to complex medical terms).
- Talking too fast.
- Launching into lengthy descriptions and explanations.
- Using the same explanation over again if the patient doesn’t understand the first time.
- Becoming defensive or frustrated.
- Inadvertently embarrassing the patient with your reactions and assumptions.


Doctor:
“Your foot infection is so severe that we will not be able to treat it locally.”

Patient:
“I hope I don’t have to travel far, doctor. I’m afraid of flying.”
Tips to improve your communication with low-literacy patients

• Slow down the pace of your speech.

• Use analogies to hang new knowledge on old hooks.
  “Arthritis is like a creaky hinge on a door.”

• Use plain, non-medical language.
  “Pain killer” instead of “analgesic”

• Limit the information you want to convey to one to three key messages.

• Use repetition to reinforce your key messages.

➢ Break instructions down into simple steps—what to do, how to do it, when to do it.

• Normalize the fact that the patient has questions or doesn’t understand.
  “Lots of people have a hard time getting that…”

• Use the “teach back” or the “show me”.
  “Can you say back to me what we’ve agreed to—just so that I’m sure that we’re clear?”

• Summarize the conversation:
  “Here’s what I’ve shared with you today…here’s what will happen next.”

• Avoid using a patronizing tone or language with an adult!


Try it!

With a partner, choose one sample scenario to work on.

1. You are helping a patient understand the importance of taking her hypertension medication. What three key messages (in simple-to-understand language) can you develop to help the patient understand the importance of complying with her medication regimen?

2. A patient did not show up for a lab procedure that your office referred him to. He has now called you and seems confused and distressed. After some questioning, it appears that not only did he miss his appointment, but he is unsure about why the procedure is truly needed. How can you educate this patient and increase his comfort level with following through on the procedure?
Readings and Resources

Resources for further reading

- [www.amafoundation.org](http://www.amafoundation.org)
- [www.askme3.org](http://www.askme3.org)
- [www.iom.edu](http://www.iom.edu) (Institute of Medicine)
- [www.aHRQ.gov](http://www.aHRQ.gov) (Agency for Healthcare Research and Quality)
- [www.nifl.gov](http://www.nifl.gov) (National Institute for Literacy)
- [www.pfizerhealthliteracy.com](http://www.pfizerhealthliteracy.com) (Pfizer Health Literacy Initiative)
- [www.reachoutandread.org](http://www.reachoutandread.org) (Reach Out and Read)
- [www.chcs.org](http://www.chcs.org) (Center for Health Care Strategies: Fact Sheet on Health Literacy)

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Medica
Notes:
Health Literacy Post-Assessment

1. True or False. Older patients are more likely to have a problem with health literacy.

2. True or False. Your patient will tell you if they have problems reading.

3. True or False. Most people with a literacy problem are also low income.

4. True or False. A person who is able to sign their name but who is unable to find the expiration date on a license is functionally illiterate

5. True or False. The number of years of school is a good general guide to determine literacy level.

6. The following could be red flags for identifying a patient with low literacy
   a. Non-compliant with medications
   b. Unable to name medications
   c. Skipped tests or referrals
   d. All of the above
   e. None of the above

7. The consequences of low health literacy include
   a. Lower health knowledge and less healthy behaviors
   b. Greater health costs
   c. Poorer health outcomes
   d. All of the above
   e. None of the above
Notes:

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