

Clues to health literacy skills among patients*	
People with <i>good</i> health literacy skills often:	People with <i>poor</i> health literacy skills often:
Practice preventive care and use preventive services	Do not engage in preventive care or services and have more severe illnesses at diagnosis
Understand early health warning signs	Do not recognize health warning signs and delay obtaining medical care, sometimes resulting in more numerous and lengthier hospital stays
Read and understand written instructions	Make excuses when asked to read or fill out forms; use visual cues such as color and shape, rather than reading
Understand advice from health care professionals	Have trouble understanding advice from health care professionals and bring others along to gather and interpret information
Ask additional questions when they do not understand	Do not ask questions, even when they do not understand
Seek additional information online	Rely on non-health care professionals for additional information
Read new studies critically and place them in context	Are not aware of emerging information about health care conditions
Avoid more costly measures due to early compliance	Use more medical resources, need additional treatments and over- or under-use medications
Display a high level of confidence in interactions with health care providers	Feel shame about their low level of skills and attempt to divert attention when possible
* These clues are general indications only and should not be interpreted as conclusive of health literacy skills. Even those with high general literacy skills can suffer from low health literacy, particularly when faced with a new diagnosis, medication or treatment. To ensure positive health outcomes, it is recommended that health professionals use techniques to ensure understanding of all patients. Look inside for a few suggested methods.	

Learn more

Low health literacy is a national health care crisis. As our nation attempts to resolve today's health care issues, you have the power to effect change in your own organization. Such an initiative can save both time and money—and most importantly, provide better patient outcomes.

For more information, please consider the following sources:

Andrulis, D. P., & Brach, C. (2007). Integrating literacy, culture, and language to improve health care quality for diverse populations. *American Journal of Health Behavior*, 31(Suppl. 1), S122-S133.

Zarcadoolas, C., Pleasant, A. F., & Greer, D. S. (2006). *Advancing health literacy: A framework for understanding and action*. San Francisco: Jossey-Bass.

Kutner, M., Greenberg, E., Jin, Y., & Paulsen, C. (2006). *The health literacy of America's adults: Results from the 2003 national assessment of adult literacy* (NCES 2006-483). U. S. Department of Education. Washington, DC: National Center for Education Statistics.

Safeer, R. S., & Keenan, J. (2005). Health literacy: The gap between physicians and patients. *American Family Physician* 72(3), 463-468.

Other peer-reviewed research: Keywords "health literacy"

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You've Spent Years Learning Your Profession.



Will Low Health Literacy Derail Your Efforts?

As many as eight of ten patients may experience poor outcomes because they just don't understand you. Learn who's at risk and how this national health care crisis affects us all.

It's a great feeling of accomplishment to assist a patient with a medical issue and provide a healing touch. That's the ideal. But is it reality?

Perhaps you've noticed that not all of your patients have the expected outcome. Despite your best efforts, issues sometimes linger.

Recognizing the health literacy crisis

According to the World Health Organization, "Health literacy represents the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand, and use information in ways that promote and maintain good health." This includes all kinds of communication, verbal and written, textual and visual.

In a study conducted by the National Center for Education Statistics in 2003, approximately 88% of the U.S. adult population had intermediate health literacy skills or less.



Adults were defined as those 16 and over. Tasks indicative of intermediate skills included reading a prescription drug label and interpreting what time to take medication in

relationship to eating, identifying potential drug interactions from a label, and using a chart to determine at what age a child should be vaccinated for various health conditions.

Shocked? Research suggests that clinicians overestimate their patients' health literacy—even among those who are seemingly intelligent in other areas. Often, people are able to converse at one to five grade levels *above* their level of reading.

Obviously, low health literacy can affect the individual's care and outcomes. Beyond that, the problem has far-reaching consequences to the nation's health care system as well.

Scope of the problem

The cost of low health literacy to the country's health care system has been estimated at \$70-100+ billion annually. Studies have revealed that patients with low health literacy often fail to make use of preventive services; rely more on emergency care; are more likely to be hospitalized; have difficulty keeping appointments, following doctors' orders, completing insurance forms, following prescription directions; and more.

While health care has been the source of much debate and political controversy in recent years, health literacy has not been a priority topic in the media. Nevertheless, there is hope. The United States Department of Health and Human Services has identified health literacy and health disparities as an

area of major focus in its Healthy People 2010 initiative.

Who is at risk?

Numerous people are at risk, defined either individually or as part of a group. They include, but are not limited to:

- Those with low *general* literacy skills
- The economically challenged
- Ethnically and culturally diverse populations
- Those living in rural areas
- Those with low English proficiency
- The elderly
- Those with lower levels of education (although high levels of educational attainment don't always equate to high levels of comprehension)
- People with low numeracy skills (the ability to understand numbers)
- Any individual with a new diagnosis, medication, or treatment

What can be done?

While a few formal instruments have been developed to assess health literacy of individuals, they are used largely today in research settings, rather than in the clinic. Because of the shame and embarrassment people often feel over their poor literacy skills, these instruments are not currently recommended. Rather, *it is recommended that all health care providers assume poor health literacy skills among all individuals.* As mentioned in the 2003 study, this will be true for about

88% of the U.S. adult population.



Fortunately, there are a few informal methods that can be put to use immediately to help

your patients experience more positive outcomes. A few tips include:

- Get to the point quickly. Give the most important information first.
- Limit the amount of information. Provide only as much as the patient needs to achieve the desired outcome.
- Use plain language, rather than medical terminology or jargon.
- Avoid higher level statistical concepts, such as the use of percentages and other numeracy skills.
- Use both words and pictures in written materials. A majority of patients read at only 5th or 6th grade levels; most health care materials are written at 10th grade level or beyond.
- Use a "teach back" method. Have patients repeat and/or demonstrate what they've been told to ensure understanding.
- Encourage patients to ask questions.
- Offer medical instructions in more than one format, such as written, spoken, and multimedia.

To learn more, please consult additional sources such as those listed on the back panel of this brochure.