

Making health easier: Reducing inequalities in child health through addressing low health literacy

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Health literacy is an evolving concept that applies to individuals, health systems and populations

- A health literate person is someone who can find, evaluate, understand and communicate health information to enable them to take care of the health of themselves, their family and their community.^{1,2}
- A health literate health care organization is one that makes it easy for people to navigate, understand, and use information and services to take care of their health.³
- A health literate population can use political processes to encourage governments to take action on the determinants of health: early life experiences, education, health care services, safe food and water, housing, employment, and the physical and social environment.⁴⁻⁶

Components of personal health literacy⁷



Many people in New Zealand do not have good health literacy

Data from the 2006 Adult Literacy and Life Skills Survey indicated that more than half of all New Zealanders have poor health literacy.⁸ Māori had significantly lower health literacy scores than non-Māori.⁸ Even in the highest income and education categories, mean scores indicated barely adequate levels of health literacy.⁸

Research indicates that lower health literacy is associated with worse health outcomes

Most of the research has examined associations between literacy skills, particularly reading ability, and health or health-related outcomes.⁹⁻¹¹

Low health literacy was consistently associated with higher hospitalisation rates; greater use of emergency care; lower receipt of mammography screening and influenza vaccine; poorer ability to demonstrate taking medications appropriately; poorer ability to interpret labels and health messages; and, among elderly people, poorer overall health status and higher mortality rates.¹⁰ There is some evidence that lower health literacy has contributed to racial disparities in health outcomes.¹⁰

A study of children with asthma who attended a university paediatric clinic found that children of parents with low literacy had more emergency department visits, hospitalisations, and days missed from school, and were more likely to have moderate or severe persistent asthma and greater use of rescue medications.¹²

Low health literacy is a powerful mediator of the determinants of health

Many of the social factors associated with poor health literacy, such as low education, low income, and belonging to an ethnic minority population, are also associated with poor health status, both in New Zealand^{8,13,14} and in other countries.¹⁵

The exact nature of the relationship between social disparities and health literacy is still being investigated and so the pathways by which health literacy contributes to social disparities in health outcomes are still unclear.¹⁶

It is possible that one pathway by which low health literacy leads to lower health status is that health systems provides a lower quality of service to people with lower health literacy. A recent U.S. study¹⁷ of caregiver health literacy done in a paediatric emergency department found that both low caregiver health literacy and minority race were associated with less radiologic testing (fewer x rays).

Health literacy is context-dependent

A person's health literacy can vary with their situation: a person may have good health literacy in their native country but poor health literacy in a country where they do not understand how the local health system works and do not understand the local language.

Anyone, no matter how good their general health literacy is, can find it more difficult to take in information when they are in pain, are not feeling well, or are in times of emotional stress, such as when their child is seriously ill.

The evidence on interventions for improving health outcomes for people with low health literacy is limited

- Much of it deals with educational disease management interventions for patients with specific conditions such as asthma, diabetes, cancer or HIV
- Most studies don't do, or are underpowered to do, analysis stratified by health literacy level so they provide only supportive evidence for the effectiveness of interventions to mitigate the effects of low health literacy
- E-health interventions, such as websites, apps, YouTube videos, and patient portals have the potential to increase health literacy but need rigorous evaluation.

The health system needs to make it easier for people to manage their health

There is a mismatch between the knowledge and capabilities of individuals and the demands of the health system.¹⁸

The health system needs to become more user-friendly and:

- Use less medical jargon in both oral and written communication
- Ensure that written materials are not too difficult for most people to read and understand
- Avoid assuming patients' familiarity with mathematical and scientific concepts

Good communication is the key

Patients won't tell you they can't read well or don't understand what you are saying: they are ashamed and embarrassed.¹⁹

Healthcare professionals should take a universal precautions approach. This means that they assume that all patients, regardless of their health literacy level, may have difficulty understanding and using health information.²⁰

There is a wealth of strategies that healthcare providers can use

- Ask me 3[®].²¹ Encourage your patients to ask you:

- What is my main problem?
- What do I need to do?
- Why is it important for me to do this?

- Health literacy checklists: covering the phone system, signage (including graphics and maps), the information desk, whether staff offer assistance with paperwork, whether print materials have features that improve comprehension for people with limited literacy, whether staff use good oral communication practices and whether there is health literacy training for staff.²²
- A hospital walkthrough: Take a patient's appointment letter and use it to get yourself to their appointment, to find out how easy it is for patients to navigate a hospital.^{22,23}
- Patient shadowing: Go with a patient for a day, observing their experiences, listening to what they have to say, and mapping the flow of care.^{24,25}
- Mystery shoppers: Actors who are employed to gain a better understanding of the consumer experience of health and social care services and identify areas for improvement.^{25,26}
- Patient navigators: people trained to help patients overcome individual-level barriers to obtaining healthcare and navigating the healthcare system, especially patients disadvantaged by low health literacy, poverty, belonging to an ethnic or cultural minority, poor English language skills, or lack of social support.²⁷



<http://www.sphintersections.org/2009/10/healing-the-language-of-health-literacy/>

Partnering with healthcare consumers is essential for understanding the patient perspective

Working in partnership with communities and healthcare consumers to develop services and information resources can help to:

- Build people's health literacy²⁸
- Reduce the health literacy demands of obtaining healthcare²⁸
- Ensure health services take a human rights based approach and provide the same standard of care to all²⁹
- Make health services more culturally responsive²⁹
- Reduce health inequalities.²⁹

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