

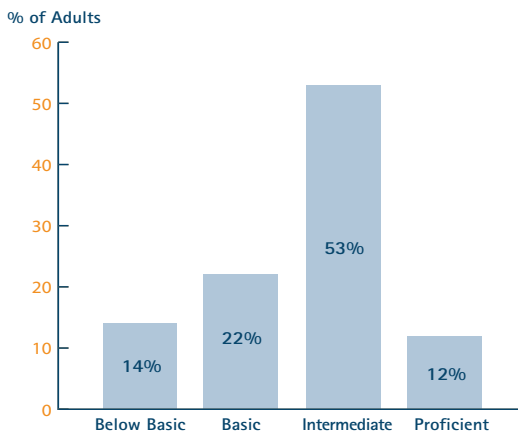


HealthVoices

Health Literacy – A Key to Better Health for Georgians

Issue 2, 2007

One-third of Adults Struggle with Basic Health Information



Source: National Center for Education Statistics, 2003 National Assessment of Adult Literacy

When should I take my medicine? Why do I need a medical test? What is a mammogram? One-third of American adults struggle to understand this basic health information.¹ They need help knowing what questions to ask their doctor, nurse, pharmacist or health insurer – and to understand their answers.

The inability to obtain, process, and understand basic health information and services prevents over 2 million adults in Georgia from taking the right prescription drugs, making doctor's appointments, and completing health insurance forms.^{2,3} Addressing health literacy requires a two-pronged approach – improvements in the quality of health information from health care providers, health care organizations, and insurers, combined with improvements in consumer literacy. With health literacy programs and policies in place, Georgians will be better equipped to make appropriate health decisions.

The Most Vulnerable Are at Greatest Risk

Although low health literacy affects individuals of every age, race, education and income level, the elderly, minorities, immigrants, poor, homeless, prisoners, and persons with limited education are more likely to have low health literacy skills. People who are managing multiple chronic diseases and/or multiple insurance systems are also likely to have greater difficulty understanding health messages.

Many Georgians have low health literacy because of low educational achievement and low English proficiency. Georgia is 49th in the country in high school completion⁴ and has the fastest growing immigrant population in the nation, having more than doubled in the last five years.

Low Health Literacy = Poorer Health and Higher Costs

People with low health literacy:

- report poor health status,
- make more medication errors,
- are less likely to understand insurance benefits,
- are less likely to comply with treatments, and
- are less likely to obtain preventive services or manage their own health care effectively.

Recent studies demonstrate a higher rate of hospitalization and use of emergency services among patients with limited literacy. Higher utilization leads to higher health care costs.^{5,6}

"Clear communication is critical to successful health care."

2004 IOM Report, Health Literacy: A Prescription to End Confusion



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Challenges Navigating the Health Care System

Health care providers and insurers have limited education, training, and experience in providing health information for individuals with low literacy. Consumer health information is usually written at the 12th grade level, while the average American has an 8th grade reading level. Yet, changes in the American health care system have put more responsibility on patients to be active participants in their health care...

- Patients with chronic medical conditions are expected to self-administer prescription drugs rather than be treated by a doctor in a hospital.
- Biomedical research has led to a broader array of treatment options, making patient decisions more complex.
- Employers offer a wider variety of health insurance plans which complicates the choices for their employees.

Questions for Patients to Ask

Every time you talk with a doctor, nurse, or pharmacist, use these questions to help you understand your health.

1. What is my main problem?
2. What do I need to do?
3. Why is it important for me to do this?

<http://askme3.org>

The result? A growing gap between expectations and the ability of Americans to access, understand, and apply health information and navigate the health care system.

The consequences? Poorer health for Georgians, particularly those who are already more vulnerable to disease, disability, and premature death.

Low Health Literacy Widens Health Disparities.

Healthy People 2010, the nation's roadmap for improving public health, addresses the connection between health literacy and health disparities. It states that "Equitably distributed health communication resources and skills, and a robust communication infrastructure can contribute to the closing of the digital divide and the overarching goal of *Healthy People 2010* – to eliminate health disparities."

To quantify the relationship between literacy and health disparities, researchers at Emory University analyzed 1997 data on Medicare managed care enrollees looking at their health literacy, health status, and receipt of vaccinations. They found that differences in health literacy contribute to health disparities. If health literacy levels were the same across educational and racial groups, there would still be differences in health status, but they would be lower.⁷

Health literacy is one of the tools individuals need to access, understand, and act on health information. It enables consumers to navigate our complex health system, to seek and receive

higher quality health care, and to be fully involved in self-management and maintaining good health.

The potential outcomes? Better health, better use of the health system, and lower health care costs.

Successful Health Literacy Efforts in Georgia

The following five programs exemplify successful efforts in Georgia to:

- 1) improve systems for providing information in the health care setting;
- 2) build health literacy into adult literacy education; and
- 3) provide professional education on communicating with low literacy patients.

Systems Approaches

- The Georgia Department of Community Health is providing translation and interpretation services to one million Georgia children and women enrolled in Medicaid and PeachCare for Kids. Contracts with four care management organizations require that Spanish speaking staff are available for outreach and clinical services, that translation services are available by telephone for clients who speak other languages, and that materials are written at the 5th grade level.
- Emory University and Grady Health System launched Pharmacy Intervention for Limited Literacy (PILL) to improve medication use among patients with limited health literacy and evaluate the economic impact. This study uses a "3-P" approach: 1) Phone: reminder telephone calls for prescription refills;



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2) Pharmacists trained to counsel patients in clear language on their medications; and 3) Picture Rx® card: a visual medication schedule.

Building Health Literacy into Adult Education

- *What's Up Doc?*, a curriculum for adult literacy students to learn to communicate with health care providers, was developed and evaluated by the Emory Center for Health Outcomes and Quality. In three 45-minute lessons, the curriculum integrates basic reading and writing skills with lessons about communicating in the health care setting.
- The Office of Adult Literacy in the Georgia Department of Technical and Adult Education developed a curriculum, "*To Your Health*," to help Georgia's adult population better navigate the health care system and make better health decisions. Middle Georgia Technical College in Fort Valley has recently tailored this health literacy program to Hispanic families.⁸

Professional Education

- Emory has developed an effective program to teach medical residents about health literacy and how to communicate with low-literacy patients. The 2½ hour training includes a videotaped standardized patient encounter, interactive small-group workshop, one-on-one feedback with a faculty member, and an individual behavioral prescription for improved communication.⁹

Strategies for Better Health Literacy in Georgia

The Institute of Medicine and the Agency for Healthcare Research and Quality provide valuable guidance on strategies that will improve health literacy in Georgia. The following six priority strategies are based on their findings and successful health literacy programs in Georgia:

- Expand efforts to incorporate health literacy into adult literacy education.
- Expand provision of translation and interpretation services for children and adults served by Medicaid and PeachCare for Kids.
- Provide training to health care providers on health literacy and strategies for communicating more simply with patients.
- Build health literacy skills through professional education programs for dentists, doctors, nurses, pharmacists, public health workers, social workers, journalists and other professionals who convey health information.
- Provide guidelines for health care providers and health nonprofits to use in developing culturally and linguistically sensitive consumer health education materials.
- Build information about health into reading, writing, mathematics, and science curricula for elementary and secondary school students.

Conclusions

Health literacy is fundamental to health care quality, expanding access to care, reduction of disparities, and control of health care costs. Improvement in the health of Georgians depends on the ability of every Georgian to have access to reliable, understandable health information. That means health information that is easily communicated, easily understood, and culturally and linguistically appropriate.

Active collaboration among consumers, government, health care professionals, patient advocacy groups, health care organizations, media, industry, policy makers, and community-based organizations is needed to improve health literacy and achieve the vision of better health for all Georgians.

Patient Tips for Talking to the Doctor

Check off the ones you will try:

- I will ask the 3 questions.
- I will bring a friend or family member to help me at my doctor visit.
- I will write down my health concerns to tell my doctor.
- I will bring a list of all my medicines when I visit my doctor.
- I will ask my pharmacist for help when I have questions about my medicines.



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Endnotes

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HealthVoices is available online at www.healthcaregeorgia.org. For further information, please contact Martha Katz, Director of Health Policy, 404.653.0990 or mkatz@healthcaregeorgia.org.

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