Health Literacy

LEARNING ACTIVITIES

Description

Ratzan and Parker (2000) define health literacy as the degree to which individuals have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions. Only 9 in 10 Americans have sufficient health literacy skills to navigate individual and family health needs. Health literacy concepts and provider practices are fundamental to patient interactions and help address health equity, clear communication, patient satisfaction, safety and quality of care.

Competencies

- C2. Effective Communication and Health Literacy
  - 2.1. Health Literacy
    - Name one or more definitions of health literacy.
    - Identify the basic literacy skill domains (reading, writing, speaking, listening, and numeracy) and examples of health care related demands put on patients for each domain, including difficulties navigating health care systems.
    - Differentiate between the ability to read and reading comprehension, and why general reading levels do not ensure patient understanding.
    - Summarize the prevalence of low or limited health literacy among U.S. adults and the increased risk of certain subgroups.
    - Recall that the average U.S. adult reads at a 5th grade reading level, but that most patient education materials are written at a much higher reading level.
    - Understand that adults with low or limited health literacy tend to experience shame, and hide their lack of skills from oral health care providers.
    - Understand that it is not possible to determine a patient’s health literacy skills by their appearance.
    - Recognize “red flag” behaviors which may suggest a patient has low or limited health literacy.
    - Recall that tools are available for estimating individuals’ health literacy skills, but that routine screening for low or limited health literacy has not been proven safe or acceptable.
    - Recall health literacy is context-specific and may change from one clinic visit to the next (e.g. during times of physical or emotional stress).
- Express attitude that everyone regardless of literacy level benefits from and prefers clear communication.
- Recognize that patient stressful life events and transitioning across health systems, insurance carriers or providers are especially vulnerable times for communication errors needing closer attention and follow-up.
- Understand importance, rationale, and principles of a universal precautions approach in all health communication interactions.
- Describe best practice principles of clear communication, plain language, accessibility (508 compliance), numeracy, cultural competency, informed consent and patient-centered care.
- Describe the direct relationship between health literacy and knowledge about one’s chronic disease(s) and medications, adherence to medications and treatment plans, receipt of preventive health services, health outcomes or risk of harm, and excess healthcare costs.
- Recognize ethical and legal implications for inadequately conveying health information to patients with low or limited literacy or health literacy.

- C3. Administration and Management Practices
  - Describe the 10 Attributes of a Health Literate Organization.
  - Describe the 14 Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) Standards.

### Learning Outcomes

- Describe definitions, models and concepts in health literacy.
- Understand the connection between health equity and health literacy.
- List some risk factors for limited health literacy and scope of the problem.
- Describe different health literacy measures and their strengths and limits in practice.
- Understand the implications of limited health literacy to patient understanding, health outcomes, health care costs and legal/ethical ramifications.
- Create a 60-second elevator pitch that makes the case for why health literacy is important to address within an organization.
- Develop an organization health literacy plan.

### Activity 1: Introduction

Instructor will deliver a Health Literacy 101 didactic lecture. Assessment can involve either a quiz and/or student-led discussion.

### Activity 2: Health Literacy Definitions

Students will read the following resources:
Activity 3: Measures of Health Literacy

Students will review the following website:


Next, students will have an instructor-led classroom discussion on health literacy measures.

1. What are pros of current health literacy measures? How can they be used?
2. What are cons of current health literacy measures?
3. In what context, would it be useful and appropriate to measure health literacy in a population? In an individual or patient?

Activity 4: Making the Case for Health Literacy

Students will read the following:


Next, students will develop a 60-second elevator pitch for health literacy. The pitch will have no more than 3 key messages targeted to someone in a leadership role. The messages should answer the question – why should I (my organization) address health literacy? Students could focus on how health literacy affects patient safety and health outcomes, quality of care, patient
experience, healthcare costs or legal and ethical considerations. Students will practice their pitch in groups.

Activity 5: Building a Health Literacy Plan

Student will review the following resources:

- Building Health Literate Organizations: A Guidebook to Achieving Organizational Change (UnityPoint Health, 2014)
- Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) Standards
- Minnesota Action Plan to Improve Health Literacy (2016)
- Ten Attributes of a Health Literate Health Care Organization (IOM, 2012)

Next, students will develop an Organization Health Literacy Plan that addresses five strategies to improve health literacy. The organization can be one in which the student is currently employed, or a general organization such as a dental clinic or public health agency. Students will present their plan to the classroom.

Student Assessment

- Quiz on definitions, models and concepts in health literacy.
- Level of participation in group discussion and activities.
- Instructor grades Health Literacy Plan based on a scoring criteria that covers key components of an organization’s plan.

Resources

Books


Videos
• Health Literacy DVD by NALA. March 4, 2011.

Websites
Suggested Placement within Curriculum

Learning Activities 1-5 advance the students’ level of health literacy knowledge and critical thinking. Sequencing these activities throughout the dental or health-related curriculum will comfortably progress the student from basic understanding to application, drawing connections to justifying a stance, and lastly empowering students to be capable of creating their own organization’s Health Literacy Plan.