Health Literacy &
Plain Language

Communicating Nutrition Education to Diverse Populations

2019 SNEB Annual Conference

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Disclosure: I have no reportable disclosures or relevant financial relations

• The presenters [Sabrina Kurtz-Rossi & Elena Carbone] are responsible for the content of this presentation, which does not necessarily represent the views of TUSM, UMass, or those of the SNEB.

Functional Literacy: The skills needed to accomplish everyday tasks.
Health Literacy and Plain Language: Communicating Nutrition Education to Diverse Populations

Literacy is Contextual: A high level of literacy is expected and often assumed.

Health Literacy: Only 12% of U.S. adults have proficient health literacy skills

What is Health Literacy? Ability to find, understand, communication and use information

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**Readability Studies:** Show reading level of written information exceeds patient skills.

- Hundreds of studies show reading demands of health materials exceed patients reading ability
- Studies of Web-based health information show similar results

**Low Health Literacy:** Linked to healthcare disparities and poor health outcomes.

- Under-utilization of services
- Increased medication errors
- Poor knowledge about health
- Increased hospitalizations
- Poor health outcomes
- Increased healthcare costs

**Who is at Risk? Everyone.**

- Nearly 50% of adults with less than a high school diploma had Below Basic health literacy
- Only 3% of adults age 65 and older have Proficient health literacy


Source: Sabrina Kurtz-Rossi, M.Ed.
Elena Carbone, DrPH, RDN, FAND
Intersectionality: Health literacy is a minority health issue

- Literacy: Among adults with limited health literacy, 45% are from a racial or ethnic minority groups.
- Language: People with limited English proficiency (LEP) may have limited literacy in their language.
- Culture: Individuals from diverse cultures may not find materials useful if Western constructs assumed.

Activity
The need in Context

What is the need in your context?
HINT: Who, what, where, and why?

Integrate: Health literacy and cultural competency interventions for best results

- Oral communication:
  Avoid Jargon + Interpretation + Teach-back
- Written communication:
  Plain language + Translation + Cultural Relevance
Avoid Jargon: Words used by dietitians and nutritionists that are difficult for others to understand

**Medical Jargon**  
“Weekend” Language

<table>
<thead>
<tr>
<th>Medical Jargon</th>
<th>“Weekend” Language</th>
</tr>
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<tbody>
<tr>
<td>Cardiovascular disease.</td>
<td>Heart disease</td>
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<tr>
<td>Hypertension.</td>
<td>High blood pressure</td>
</tr>
<tr>
<td>Hypercholesterolemia.</td>
<td>High cholesterol</td>
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<tr>
<td>Heavily marbled meat.</td>
<td>Fatty meat</td>
</tr>
<tr>
<td>Cruciferous vegetables.</td>
<td>Broccoli, cauliflower, cabbage, kale and Brussel sprouts</td>
</tr>
</tbody>
</table>

Work with Interpreters: Experienced or trained in healthcare interpreting

- Clarify interpreter’s role
- Note mode of interpretation
- Work with a trained interpreter
- Practice Triadic Interview
- Use first-person
- Maintain transparency

Everything gets interpreted
Apply Teach Back: A method of checking for understanding and re-teaching if needed


Activity
Teach back practice

How would you illicit teach back?
HINT: Open ended questions

Use Plain Language: A strategic response to reduce the complexity and improve health literacy

What is Plain Language?
- A way of writing that is understandable on the first read (PLAIN)
- Language, graphics, layout, organization, and interaction that make written materials easier to read (Osborn, 2005)
Plain Language Writing Principles

1. Write in everyday language
2. Define unfamiliar words
3. Include a call to action
4. Use shorter words and sentences
5. Avoid abbreviations and acronyms

Plain Language Design Principles

1. Lots of white space and wide margins
2. Bold, clearly defined headers
3. Larger type (12 point or larger)
4. UPPER AND LOWER CASE—NOT ALL CAPS
5. Avoid italics, script, fancy fonts

Work with Translators: Experienced in health and healthcare vocabulary and concepts

- Emphasize plain language
- Do not expect word-for-word
- Localize and field test
Ensure Cultural Relevance: Involve your audience throughout the development process

- Know and involve your audience
- Specify needs and objectives
- Consider use and format
- Develop the content and field test

Activity
Plain Language Writing Practice

Re-write in plain language
HINT: Consider writing and design

Practice: Word Choice

- Patients with familial hypercholesterolemia shall avoid consumption of the following: fried foods, heavily marbled meats, high fat desserts and dairy products.
Practice: Word Choice

- Patients with familial hypercholesterolemia shall avoid consumption of the following: fried foods, heavily marbled meats, high fat desserts and dairy products.
- If you have a family history of high cholesterol, eat lower fat foods, such as:
  - Fruits and vegetables
  - Lean meats (fish and chicken or turkey without the skin)
  - Low fat or fat free milk, cheeses, sour cream, salad dressing, and mayonnaise.

Practice: Active Voice

- As an individual with diabetes mellitus, you should give consideration to the following when you travel, unless you do not take insulin daily:
  - Enough supplies and medications
  - Emergency contact information
  - Bring snacks

- If you take insulin every day for diabetes, consider these tips when you travel:
  - Pack enough supplies and medications for your whole trip.
  - Carry emergency contact information.
  - Always bring a snack with you.
Practice: Organization & Layout

There are a number of Food and Nutrition Programs in the state, including the FoodSource Hotline, Project Bread 1-800-645-8333; the Summer Food Service Program, Department of Education 1-781-338-6494; the WIC Nutrition Program, Department of Public Health 1-800-WIC-1007; and the Child and Adult Care Feeding Program, Department of Education, 1-781-338-6494

Practice: Organization & Layout

There are a number of Food and Nutrition Programs in the state:  
- Child and Adult Feeding Program  
  781-338-6494  
- FoodSource Hotline  
  1-800-645-8333  
- Summer Food Service Program  
  1-781-338-6494  
- WIC Nutrition Program  
  1-800-942-1007

Nutrition-Related Health Literacy Definitions

• **Food Literacy**: The ability of an individual to navigate, engage, and participate within a complex food system to make decisions to support achievement of personal health and a sustainable food system considering environmental, social, economic, cultural, and political components.

• **Nutrition Literacy**: The degree to which individuals have the capacity to obtain, process, and understand nutrition information and skills needed in order to make appropriate nutrition decisions.

• **Weight Literacy**: The degree to which individuals can obtain, process, understand, and communicate about weight-related information needed to make informed decisions about weight management.

Sources: Cullen et al., (2015); Silk et al. (2008); Wang, et al. (2018)
Critical Health Literacy: Skills applied to identify and address structural barriers

- **Functional health literacy** – basic skills to function effectively in everyday situations
- **Interactive health literacy** – more advanced skills that can be applies to changing circumstances
- **Critical health literacy** – cognitive and social skills applied for social political change


**MPOWER: Empowering Mothers for Health**

Maternal Health Literacy (MHL)

- MHL is a personal and community asset vs. a risk (deficit).
- Reading proficiency (functional literacy) not sufficient.
- Improvement measured as change that demonstrates skill development. This definition opposes dominant opinion.
- Aimed at promoting empowerment and participation in communities and health care.
- ... addressing MHL requires a whole-of-society approach ... to improve health literacy of individuals and communities and to make environments easier to navigate in support of health and well-being.

Filling the Gaps

The MPower project purposefully addresses gaps in the field of health literacy research by:

- Using **community-based participatory** (CBPR) approach (novel research strategy).
- Focusing on **critical health literacy** skills, **empowerment**, and health literacy for health protection and promotion [expanded focus].
- Identifying both the **women and their communities** as units of analysis [broader target audience].

Methods

<table>
<thead>
<tr>
<th>Scotland/Vietnam*</th>
<th>U.S.</th>
<th>Haiti</th>
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</thead>
<tbody>
<tr>
<td>Phase 1: Develop Research Team &amp; Initial Data Collection</td>
<td>- Interviews – health care providers</td>
<td>- Interviews – mothers/ pregnant women</td>
</tr>
<tr>
<td>Phase 2: Pilot Metrics &amp; Programming</td>
<td>- FG/Surveys – mothers/pregnant women (summer 2019)</td>
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</tr>
<tr>
<td>Phase 3: Multi-Site Studies (women-led interventions)</td>
<td>- Empowerment Training - Community Health Workers (spring 2019)</td>
<td>- Ultimate Goal is for mothers’ action plans to inform the development of a global strategy and methods for adaption across cultures.</td>
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</tbody>
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*With partners in Australia; Red text = completed tasks.

Methods

- In facilitated group process, mothers design interventions to address health issues they prioritize.
- Multiple sites: Ghana, UK, Australia, US, Haiti, etc.
- Mixed methods prospective cohort design
- Metrics: **Life Skills Progression Scale** (Smith, 2009)
**Resources**

**Tools and Techniques**

Visit these web resources
HINT: See slides on conference App

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**Health Literacy Toolshed**
http://healthliteracy.bu.edu/

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**ThinkCultureHealth**
http://www.thinkculturehealth.gov
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Teach Back Tool Kit
http://www.teachbacktraining.org/

Health Literacy & Public Health
https://www.cdc.gov/healthliteracy

Health Literacy Online
https://health.gov/healthliteracyonline/
SNEB Members: In what ways can SNEB support its members to advance health literacy?

1. Name **one thing you learned** from this session about health literacy that you didn’t know before.
2. Describe **one action you will take** as a result of what you learned today.
3. What topics would you like to learn more about? (i.e. plain language, measurement, working across cultures, other)
4. In what ways can SNEB support its members to advance health literacy? (i.e. workshop, policy, special interest group, other).

Optional: Name and email

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Thank You

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