

**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.

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**Functional Literacy:** The skills needed to accomplish everyday tasks.



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

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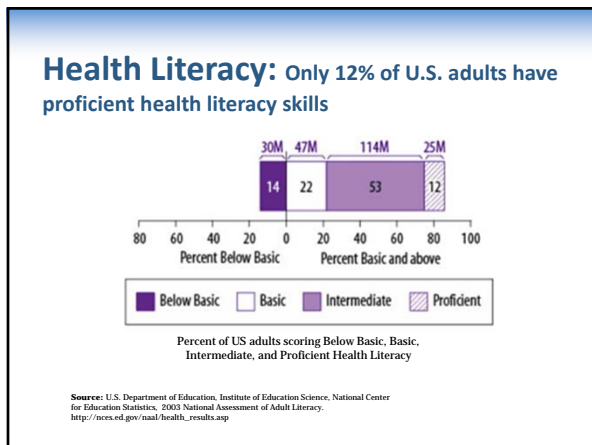
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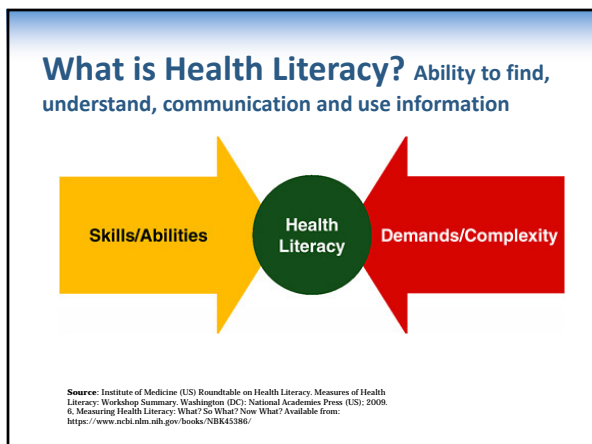
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**Readability Studies:** Show reading level of written information exceeds patient skills.

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



Source: Institute of Medicine Committee on Health Literacy: A Prescription to End Confusion. Nielsen-Bobman L, Panzer AM, Kindig DA, eds. Washington, DC: The National Academies Press; 2004.

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**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



Source: Berkman N, Sheridan S, Donahue K, et al. Health Literacy Interventions and Outcomes: An Updated Systematic Review. Evidence Report/Technical Assessment No. 189. Prepared by RTI International/University of North Carolina Evidence-based Practice Center under contract No. 290-2007-10056-1. AHRQ Publication Number 11-E006. Rockville, MD. Agency for Healthcare Research and Quality; 2011.

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**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: U.S. Department of Education, Institute of Education Science, National Center for Education Statistics. 2003 National Assessment of Adult Literacy. [http://nces.ed.gov/ipeds/health\\_results.asp](http://nces.ed.gov/ipeds/health_results.asp)

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**Intersectionality:** Health literacy is a minority health issues



- **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.

Source: Andrulis, DP and Brach, C. (2007) Integrating Literacy, Culture, and Language to Improve Health Care Quality for Diverse Populations. *Am J Health Behav.* 31(Suppl 1): S122-133.

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**Activity**  
**The need in Context**

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

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**Integrate:** Health literacy and cultural competency interventions for best results

- **Oral communication:**  
Avoid Jargon +  
**Interpretation** +  
Teach-back



- **Written communication:**  
Plain language +  
**Translation** +  
Cultural Relevance



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**Avoid Jargon:** Words used by dietitians and nutritionists that are difficult for others to understand

| <u>Medical Jargon</u>      | <u>"Weekend" Language</u> |
|----------------------------|---------------------------|
| Cardiovascular disease.... |                           |
| Hypertension.....          |                           |
| Hypercholesterolemia.....  |                           |
| Heavily marbled meat.....  |                           |
| Cruciferous vegetables.... |                           |

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**Avoid Jargon:** Words used by dietitians and nutritionists that are difficult for others to understand

| <u>Medical Jargon</u>      | <u>"Weekend" Language</u>                                |
|----------------------------|--|
| Cardiovascular disease.... | Heart disease  |
| Hypertension.....          | High blood pressure                                      |
| Hypercholesterolemia.....  | High cholesterol   |
| Heavily marbled meat.....  | Fatty meat   |
| Cruciferous vegetables.... | Broccoli, cauliflower, cabbage, kale and Brussel sprouts |

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**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



Source: HRSA (2007). *Unified Health Communication 101: Addressing Health Literacy, Cultural Competency, and Limited English Proficiency*. <http://www.hrsa.gov/healthliteracy/training.htm>

**Everything gets interpreted**

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**Apply Teach Back:** A method of checking for understand and re-teaching if needed



Source: Schillinger D, et al. Closing the Loop Physician Communication With Diabetic Patients Who Have Low Health Literacy. Arch Intern Med/Vol 163, Jan 13, 2003

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**Activity**  
**Teach back practice**

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

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**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)

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### 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



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### 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***

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

- Emphasize plain language
- Do not expect word-for-word
- Localize and field test



Action for Boston Community Development

Source: Andralis, DP and Brach, C. Integrating Literacy, Culture, and Language to Improve Health Care Quality for Diverse Populations. Am J Health Behav. 2007;31(Suppl 1):S122-133.

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**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**

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**Activity**  
**Plain Language Writing Practice**

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

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**Practice: Word Choice**

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

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### 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.

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### 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

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### 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.

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### 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

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### 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

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

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### 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)

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**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 applied to changing circumstances
- **Critical health literacy** – cognitive and social skills applied for social political change

Source: Nutbeam D. Health literacy as a public health goal: a challenge for contemporary health education and communication strategies into the 21<sup>st</sup> century. *Health Promotion International*, 15, 259-267, 2001.

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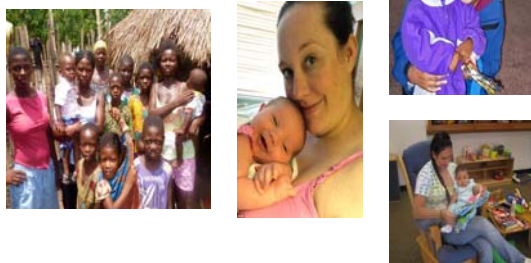
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**MPower: Empowering Mothers for Health**



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**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.

Sources: Resnikert and Nutbeam (2000); WHO (2013). Health Literacy: The Solid Facts; Center for Health Literacy Promotion – <http://healthliteracypromotion.com>

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### 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].

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### Methods

|   | Scotland/Vietnam*  | U.S.  | Haiti  |
|---|--|---|--|
| Phase 1:<br>Develop Research Team & Initial Data Collection | <ul style="list-style-type: none"> <li>• Interviews – health care providers</li> <li>• Interviews – mothers/ pregnant women</li> </ul> | <ul style="list-style-type: none"> <li>• FG/Surveys – health care providers</li> <li>• FG/Surveys – mothers/pregnant women (summer 2019)</li> </ul> |  |
| Phase 2:<br>Pilot Metrics & Programming                     |  | <ul style="list-style-type: none"> <li>• Empowerment Training - Community Health Workers</li> </ul>   | <ul style="list-style-type: none"> <li>• Empowerment Training- Community Health Workers (spring 2019)</li> </ul> |

\*With partners in Australia; Red text = completed tasks.

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### Methods

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|---|---|
| <p><b>Phase 3: Multi-Site Studies {women-led interventions}</b></p> <ul style="list-style-type: none"> <li>• In facilitated group process, <b>mothers design interventions</b> to address health issues <b>they prioritize</b>.</li> <li>• Multiple sites: Ghana, UK, Australia, US, Haiti, etc.</li> <li>• Mixed methods prospective cohort design</li> <li>• Metrics: <b>Life Skills Progression Scale</b> (Smith, 2009)</li> </ul> | <p><b>Phase 4: Global Strategy Development</b></p> <ul style="list-style-type: none"> <li>• <b>Ultimate Goal is for mothers' action plans</b> to inform the development of a global strategy and methods for adaption across cultures.</li> </ul> |
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**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/>



Welcome to the *Always Use Teach-back!* training toolkit

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### Health Literacy & Public Health

<https://www.cdc.gov/healthliteracy>



Health Literacy Basics

Background information on what health literacy is and why it matters in public health.

Learn more about the Health Literacy 1000 Goals

Health Literacy Activities by State

**DEVELOP & TEST**  
Assesses health literacy, culture, plain language resources, visual communication,...

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### Health Literacy Online

<https://health.gov/healthliteracyonline/>



Health Literacy Online Strategies Checklist

The information in this guide is designed to help you create user-friendly health websites and digital health tools. Below is a portable checklist of the strategies outlined in Health Literacy Online.

**Write Actionable Content**

- Identify user motivations and goals
- Put the most important information first
- Describe the health behavior—put the basics

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health literacy for all

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IHLA The Health Literacy Solutions Center

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### 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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