

# Health Literacy Matters...

Guilford County Needs Assessment Summary ~ May 2006



*"Closing the gap in health literacy is an issue of fundamental fairness and equity and is essential to reduce health disparities."*

*(Healthy People 2010)*

## What is health literacy... Why does it matter?

The ability to obtain, understand, and use the information needed to make wise health choices is known as health literacy (DHHS, 2000).

Low literacy among members of populations such as older adults, those with poor reading skills, those with limited mastery of the English language, members of ethnic or cultural minorities, and immigrants is likely a major contributor to health disparities in this country, according to *Healthy People 2010*.

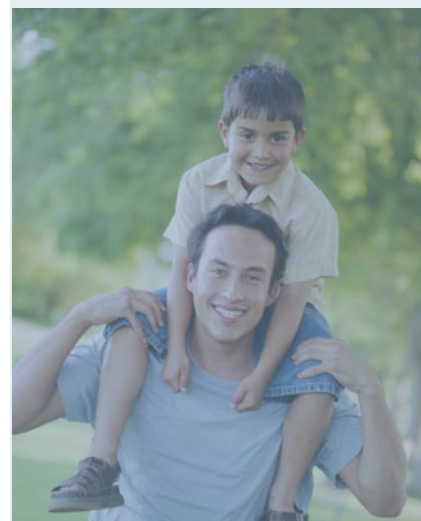
People with low health literacy often lack not only the ability to read well but also knowledge about the body, its functioning, and the nature and causes of different types of disease, as well as how to access and use the health care system.

Low health literacy can affect anyone, regardless of age, race,

education or income. Low health literacy costs the nation's health system as much as \$58 billion a year.

Leading health literacy researcher Darren DeWalt reports in *Literacy and Health Outcomes* that "patients with low health literacy have poorer health outcomes including knowledge, intermediate disease markers, measures of morbidity, general health status, and use of health resources. Patients with low literacy are generally 1.5 to 3 times more likely to experience a given poor health outcome."

*Reference: U.S. Department of Health and Human Services (2000) Healthy People 2010: Understanding and Improving Health, US GPO available at [www.healthypeople.gov/publications](http://www.healthypeople.gov/publications)*



## Cultural Competency: Health Literacy Issues and Recent Immigrants to Guilford County



*"Please open the conversation and understand what soothes them."*

Lay Health Advisor  
Center for New North Carolinians

In focus groups with recent immigrants to Guilford County, participants repeated the need for enhanced cultural awareness. Issues with communication, respect, trust, and treatment compliance could all be addressed with improved cultural understanding between patients and providers.

Cultural understanding is important to immigrants, particularly in defining relationships between men and women, respect, traditional treatment of illness, and issues of trust. One participant noted that if the provider doesn't understand the patient's culture, patients then have a hard time trusting the diagnosis and following

through on the instructions. Also, if the patients do not feel respected, they may just leave and never come back, without ever letting the provider or staff know why.

Understanding medication was noted as perhaps the biggest challenge for non-native English speakers. Participants said they have a hard time understanding the instructions, the labels, and the basic idea that some medications must be taken on an ongoing basis. Also, many people apparently share medications with friends or family members (based on similar symptoms) without understanding the potential dangers of this action.

## Communication is Key

In recent focus groups, providers and patients alike stressed the importance of good communication. Methods of interaction that incorporated respectful questioning of the patients' understanding of instructions were highly rated by both non-native English speakers and adult basic education students. It was noted that pharmacists are typically better at this than physicians, and that having written instructions was helpful in case the patient had questions after the doctor visit.

Providers were quick to recognize the need for better communication, but cited time and financial constraints as key issues limiting their ability to spend the time needed to communicate well.

Adult basic education students further noted frustration with not being understood by their providers. One person stated, "When you say something is wrong they just don't believe you. None of the medicines work and they don't listen." All participants preferred one on one interaction rather than telephonic, computer-based, or written words for learning about health.

*"I don't think they feel safe or trusted because the doctor doesn't know about the culture and they don't really know if the doctor is right about all of his diagnosis."*

Lay Health Advisor  
Center for New North Carolinians



*"They end up being poor and disenfranchised, uninsured and really on the fringes of this society. So, I think that if you are just looking at literacy you are going to run into a whole bunch more than just that. It goes hand in hand with lots of problems, not just maneuvering in the healthcare system but maneuvering in the culture in general."*

Greensboro Health Care Provider



## Improving our Community's Health Literacy

According to the Joint Commission on Accreditation of Healthcare Organizations' (JCAHO) standards on patient and family health education (2002), it is incumbent upon health professionals to identify learning and educational needs, use appropriate educational resources, and to assess the patient's and family's ability to comprehend, use and apply information taught.

Local health care providers have recognized this need and are beginning to undertake new practices to ensure that citizen's health care needs are met appropriately. However, there is much more work to be done. Using the information gathered from the community needs assessment, The Health Literacy Forum is formulating a plan to address priority needs.

Preliminary recommendations include:

- Highlight health literacy as a global issue, affecting everyone in the community
- Train healthcare providers on cultural competency, health literacy assessment and teaching methods
- Ensure that written health materials are available and widely distributed in low-literacy format as well as multiple languages
- Partner with churches and other community gathering places to provide health literacy education and referral information
- Broaden and deepen the reach of the Health Literacy Forum to include community agencies dealing with issues of health, literacy, immigrant and refugee groups, and social justice.



*"To me what it would require to do this really well is a whole revamping of healthcare ... where we individualize care for patients.. assess not only their physical but their social situation and their literacy. What you end up having is a care model."*

Greensboro Health Care Provider

*"People are not comfortable going to the doctor in general because back home they are not used to it because most are from very small towns. "*

Lay Health Advisor  
Center for New North Carolinians



## Guilford County Health Literacy Forum Rallies to Address Community Health

Since June 2005, a group of community agencies has been collaborating to identify community health literacy needs and develop a plan to address priority areas. With leadership from Reading Connections, Moses Cone Health System, Guilford Health Partnership, the United Way of Greensboro, the Community Care Network, the Center for New North Carolinians, and the Center for Youth, Family & Community Partnerships at UNCG, a strategic plan has emerged to improve community health literacy. Support from the Community Health

Improvement Fund of the Moses Cone Wesley Long Community Health Foundation and the Weaver Foundation supplied the funding needed to complete a needs assessment and begin building a comprehensive plan. Multiple applications for ongoing funding are being pursued to implement the specific projects identified as crucial for improving the health of Guilford County residents. For more information or to join the Health Literacy Forum, contact Reading Connections at 336-230-2223.

### Learn More!

Visit these websites to learn more about health literacy and what you can do to get involved...

<http://www.askme3.org>

<http://www.pfizerhealthliteracy.com>

<http://www.iom.edu/?id=19750>

<http://www.nlm.nih.gov/pubs/cbm/hliteracy.html>

*This report was prepared by Jennifer Kimbrough, Associate Director of the Center for Youth, Family & Community Partnerships at UNCG. Special thanks to Hayley Phillips, Graduate Assistant, for assistance with data collection and project coordination. For more information about the results of the needs assessment, contact [jbkimbro@uncg.edu](mailto:jbkimbro@uncg.edu).*

<http://www.worlded.org/us/health/docs/comp/>

<http://www.ama-assn.org/ama/pub/category/8115.html>

<http://www.nifl.gov/nifl/facts/health.html>

*"It doesn't matter if you give them their medicine in Spanish, because 'once' in English is 'once' (eleven) in Spanish. You have to literally show them how many pills to take."*

Lay Health Advisor  
Center for New North Carolinians