



# Exploring Population Health Literacy: The Gold Standard Measures

#### Dr Ahmad Shahrul Nizam Isha

Institute for Health Behavioral Research
Ministry of Health Malaysia

#### Health Literacy

The term "health literacy" itself has come to mean different things to various audiences and has become a source of confusion and debate (Baker, 2006).

#### **Health Literacy**

 Health literacy the health literature for at least 30 years (Nutbeam, 2000)

• First used, in 1974, in a discussion of health education as a policy issue affecting the health system (Simonds, 1974)

#### What is health literacy?

Health literacy is a widely used term that encompasses a range of ideas and definitions

### Definition of health literacy

- Institute of Medicine 2004: The individual's capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions.
- Yost et al. 2009: Health literacy is the degree to which individuals have the capacity to read and comprehend health-related print material, identify and interpret information presented in graphical format (charts, graphs, tables), and perform arithmetic operations in order to make appropriate health and care decisions.

### Definition of health literacy

- WHO 1998: The cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand and use information in ways which promote and maintain good health.
- **Kicbusch et al. 2005:** The ability to make sound health decision(s) in the context of everyday life at home, in the community, at the workplace, the healthcare system, the market place and the political arena.

# ability information

make

evaluate decisions needed interpret literacy access capacity maintain individuals process life obtain care communicate under the communicate system use the

#### Why health literacy?

New international studies (America, Australia, Europe, Taiwan, Thailand) shows that the Public Health and Health Promotion still do not meet the needs of those with low literacy.

 HL was accepted as a priority at International Union for Health Promotion and Health Education (IUHPE)

(Osborne, 2010)

## The association between Health Literacy and Health Outcomes

- Inadequate knowledge about health & healthcare system
- Increased hospitalisation
- Higher health care costs
- Poor access and utilisation of health services
- People with lower health literacy ~ 1.5 to 3 times more likely to experience poor health event

#### How to measure health literacy?

• The different definitions of HL imply different sets of abilities make up HL and so different measurement tools likewise do the same (Chisolm & Buchanan, 2007)' meaning at present, there is no 'gold standard' for HL measurement (Parker, 2000).

#### The Approach & Existing Measures

Clinical approach: Mostly American

Population approach: Australia, Canada and

Switzerland

## Test of Functional Health Literacy in Adults (TOFHLA)

- Developed using actual hospital materials.
- Two-part test: The first part provides participants with medical information or instructions about various scenarios.
   Participants review the scenarios and then answer questions that test their understanding of the information in the scenarios.

## Test of Functional Health Literacy in Adults (TOFHLA)

Description	<ul> <li>Instruments developed to assess literacy skills using health-context materials.</li> <li>Test of Functional Health Literacy in Adults (TOFHLA), instrument most often used for literacy assessment in health care research. The length of time required for administration of the TOFHLA (18 to 22 minutes for the full version and 7 to 10 minutes for a short version).</li> </ul>		
Measurement	Inadequate health literacy: 0-53 Marginal health literacy: 54-66 Adequate health literacy: 67-100		
Strengths	<ul> <li>Valid and reliable indicator of patient ability to read health-related materials.</li> <li>Tested on a variety of populations (young, elderly)</li> <li>Shorter administration time for S-TOFHLA</li> </ul>		
Limitations	Measuring only selective domains that are thought to be markers of an individual's overall capacity (Baker 2006)		

Parker RM, Baker DW, Williams MV et al. The Test of Functional Health Literacy in Adults (TOHFLA): a new instrument for measuring patients' literacy skills. J Gen Intern Med 1995;10:537–42.

#### **Prescription Label:**

If you were going to eat lunch at noon, what time should you take the medicine before lunch?

GARFIELD IM 16 Apr 93 FF941862 Dr. LUBIN, MICHAEL

DOXYCYCLINE

100 MG

20/0

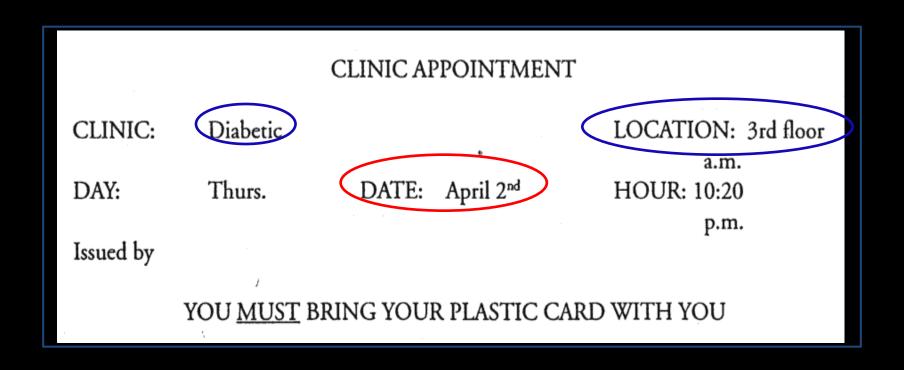
Take medication on empty stomach one hour before or two to three hours after a meal unless otherwise directed by your doctor.

02 11

(0 of 20)

#### **Appointment Slip (Document):**

When is your next appointment? Where?



### Quantitative Skills (Numeracy):

Is your blood sugar normal today?

Normal blood sugar is 60 - 150.

Your blood sugar today is 160.

## Reading Comprehension: Medicaid Rights and Responsibilities

PASSAGE B
I agree to give correct information to if I can receive Medicaid.  a. hair b. salt c. see d. ache
I to provide the county information to any
a. agree b. probe c. send d. gain  a. hide b. risk c discharge d. prove
a. emphysema b. application c. gallbladder d. relationship
the to get such proof. I that for  a. inflammation
Medicaid I must report any  a. changes b. hormones c. antacids d. charges

TOFHLA • Large Print Version, English 14 point font

## Rapid Estimate of Adult Literacy in Medicine (REALM)

Description	The REALM is a 66-item word recognition and pronunciation test that measures the domain of vocabulary.  Average administration time: 3-6 min.
Measurement	<ul> <li>Low health literacy (At or below 3<sup>rd</sup>-grade reading level): 0 to 18 (4<sup>th</sup> to 6<sup>th</sup>-grade reading level): 19 to 44</li> <li>Marginal health literacy (7<sup>th</sup> to 8<sup>th</sup>-grade reading level): 45 to 60</li> <li>Adequate health literacy (9<sup>th</sup>-grade reading level): 61-66</li> </ul>
Strengths	<ul> <li>Word-recognition tests are useful for predicting general reading ability in English.</li> <li>Extensively used in research settings.</li> </ul>
Limitations	<ul> <li>Not designed to measure comprehension skills.</li> <li>Most useful in a research context.</li> </ul>

Davis TC, Long SW, Jackson RH, Mayeaux EJ, George RB, Murphy PW, and Crouch MA. Rapid Estimate of Adult Literacy in Medicine: A Shortened Screening Instrument. *Clinical Research and Methods*. 1993, 25(6):391-395.

#### **REALM**

Scored REALM							
RAPID ESTIMATE OF ADULT LITERACY IN MEDICINE (REALM)®				Grade Range Estimates			
Patient Name/ Subject # Date 7/15/9/	4-0005	PhD • Michael Croud	•	Reading Livel	(4-6th)	Raw Score* 0-18	Grade Range Estimates Third Grade and Below May not be able to read most low-literacy materials May need repeated oral instructions, materials composed primarily of illustrations, or audio- or video tapes
Lis fat flu	# <u>+</u>	List : fatigue pelvic	2 <u>+</u>	List allergic menstrual	<u>v</u>	<b>19-44</b>	Fourth to Sixth Grade May need low-literacy materials; may not be able to rea prescription labels
pill dose		jaundice infection	V V	testicle	HHHHH	45-60	Seventh to Eighth Grade  May struggle with most currently available patient education materials
eye stress	+ + + + + V	exercise behavior	+ + +	emergency medication	<u>+</u> + +	61-66	Ninth Grade and Above Should be able to read most patient education materials
smear nerves	<u></u>	prescription notify	+	occupation sexually	+	* Number of	correct responses out of a possible 66

Davis TC, Long SW, Jackson RH, Mayeaux EJ, George RB, Murphy PW, and Crouch MA. Rapid Estimate of Adult Literacy in Medicine: A Shortened Screening Instrument. *Clinical Research and Methods*. 1993, 25(6):391-395.

## Newest Vital Sign (NVS)

Description	This 6-item assessment measures reading and comprehension of a nutrition label. Average administration time: 3 min Maximum administration time: 6 min
Measurement	Patients with low literacy: 0-4 questions answered correctly Patients unlikely to have low literacy: 5-6 questions answered correctly
Strengths	<ul> <li>Tests for numeracy, reading ability and interpretation skills.</li> <li>May be more sensitive to patients with marginal health literacy than other functional health literacy assessments</li> </ul>
Limitations	<ul> <li>May overestimate the percent of patients with low literacy, due to its specificity</li> <li>Does not differentiate between adequate and marginal literacy well</li> </ul>

Weiss BD, Mays MZ, Martz W, Castro KM, DeWalt DA, Pignone MP, Mockbee J, and Hale FA. Quick Assessment of Literacy in Primary Care: The Newest Vital Sign. Annals of Family Medicine. 2005, 3:514-522.

### Newest Vital Sign

Figure 1A. The newest vital sign — English.		
Nutrition Facts		
Serving Size	1/2 cup	
Servings per container	4	
Amount per serving		
Calories 250	Fat Cal 120	
	%DV	
Total Fat 13g	20%	
Sat Fat 9g	40%	
Cholesterol 28mg	12%	
Sodium 55mg	2%	
Total Carbohydrate 30g	12%	
Dietary Fiber 2g		
Sugars 23g		
Protein 4g	8%	

<sup>\*</sup> Percent Daily Values (DV) are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs.

Ingredients: Cream, Skim Milk, Liquid Sugar, Water, Egg Yolks, Brown Sugar, Milkfat, Peanut Oil, Sugar, Butter, Salt, Carrageenan, Vanilla Extract.

Note: This single scenario is the final English version of the nevert vital sign. The type size should be 14-point (as shown above) or larger. Patients are presented with the above scenario and asked the questions shown in Figure 1b.

		ANS\ CORR	
		YES	NO
of a pint of ice or	T: This information is on the back of a container ream.		
QUESTIONS			
1. If you eat the en	ntire container, how many calories will you eat?		
Answer 🗆 1	,000 is the only correct answer		
	ed to eat 60 g of carbohydrates as a snack, ream could you have?		
<b>Answer</b> Any	of the following is correct:		
<b>-</b> 1	cup (or any amount up to 1 cup)		
o F	Half the container		
ic	te: If patient answers "2 servings," ask "How much te cream would that be if you were to measure it to a bowl?"		
your diet. You u includes 1 servir many grams of s	ises you to reduce the amount of saturated fat in sually have 42 g of saturated fat each day, which ag of ice cream. If you stop eating ice cream, how saturated fat would you be consuming each day?		
Answer 55	is the only correct answer		
daily value of ca	at 2500 calories in a day, what percentage of your alories will you be eating if you eat one serving? % is the only correct answer		
	re allergic to the following substances: ts, latex gloves, and bee stings.		
5. Is it safe for you  Answer 💷 N	to eat this ice cream? No		
	patient responds "no" to question 5): Why not? ause it has peanut oil.		
	Total Correct		

#### Health and Adult Literacy Survey (HALS)

The first analysis of population-based health literacy skills among adults was undertaken by Rudd, Kirsch, and Yamamoto (2004).

Subsequently undertaken in:

Canada, Italy, Mexico, Norway and Switzerland (2003) Hungary, Netherlands, New Zealand and South Korea and Australia (2006).

#### **Health and Adult Literacy Survey (HALS)**

Description	191 health-related items across these four domains in five health-related activities: health promotion (60 items), health protection (64 items), disease prevention (18 items), health care maintenance (16 items), and systems navigation (32 items)
Measurement	The HALS includes prose, quantitative, and document items in 5 health-related areas: health promotion, health protection, disease prevention, health care and maintenance, and systems navigation
Strengths	<ul> <li>Understanding health-related reading capacities at the population level</li> <li>Explore different kind of abilities in a different domains</li> </ul>
Limitations	<ul> <li>The length of the HALS will prohibit its use in most research studies</li> <li>Takes approximately 1 hour to complete</li> </ul>

Kutner M, Greenberg E, Jin Y, Paulsen C. The Health Literacy of America's Adults: Results from the 2003 National Assessment of Adult Literacy (NCES 2007 - 483). Washington DC: U.S. Department of Education, National Center for Education Statistics, 2006.

#### HALS five health-related activities

- 1. Health promotion: the ability to enhance and maintain health (e.g. plan an exercise regime or purchase health foods) by locating and using health-related articles in magazines and brochures, or information contained on charts of food or product-safety labels.
- 2. Health protection: the ability to safeguard individual or community health (e.g. the ability to select from a range of options) by reading newspaper articles, information about health and safety, or air and water quality reports, or participating in referenda.

- 3. Disease prevention: the ability to take preventive measures and engage in early detection (e.g. determine risks, seek screening or diagnostic tests and follow up on courses of treatment) by understanding health alerts on TV or in newspapers or understanding letters about test results.
- 4. Health care maintenance: the ability to seek and form a partnership with health care providers, including providing health history forms or following directions on medicine labels, or being able to understand and discuss the merits of alternative forms of treatment with a health professional.

5. Systems navigation: the ability to understand and to access needed health services by completing application forms, reading maps to locate appropriate facilities or understanding health benefits packages.

Kutner M, Greenberg E, Jin Y, Paulsen C. The Health Literacy of America's Adults: Results from the 2003 National Assessment of Adult Literacy (NCES 2007 - 483). Washington DC: U.S. Department of Education, National Center for Education Statistics, 2006.

#### **Common Health Literacy Findings**

Common findings in all HL using a different HL measurement tools are:

- Health literacy is strongly related to educational attainment
- The average HL scores of younger adults are significantly higher than those of older
- Race or ethnicity

#### Health Literacy Way Forward

- Future research needed to develop the assessments tool that enable to capture the broadness of skills and agents characteristic for health literacy as a complex phenomenon (Mårtensson & Hensing, 2011).
- We need a new framework for health literacy grounded in the experience of consumers and patients (Osborne, 2010)

#### A gap...

 With concerns about the psychometric properties and breadth of current health literacy tools we sought to develop a new scale (Osborne, 2010)

## The Gold Standard for health literacy measure ......

- Assess individual ability to seek, understand and utilise health information within the healthcare setting
- Generic and potentially modifiable abilities and factors
- Target populationAdults
- SettingClinical or population

#### The Holistic Approach!

#### Latest approach in EU:

- Capturing health literacy in terms of healthcare, disease prevention and health promotion
- Capturing functional, interactive and critical health literacy
- Capturing health literacy in a broader population, not only in clinical settings

#### The HLS-EU 'all inclusive' working definition

Health literacy entails people's capacities, skills, knowledge, motivation and confidence to access, understand, appraise and apply health information in written, spoken or digital form to form judgments and take decisions in everyday life in terms of healthcare, disease prevention and health promotion to improve quality of life during the life course (Sørensen et al. 2010)

## THANK YOU

**QUESTIONS**????