

Executive Summary

Health literacy in America might finally be at a tipping point. Beginning with the Health and Human Services National Action Plan to Improve Health Literacy in 2010, subsequent federal initiatives have continued to put health literacy in the spotlight.

More than just the ability to read, health literacy is defined as one's ability to obtain, understand and use health information to make appropriate health decisions.

According to Dr. Koh, Assistant Secretary for Health for the U.S. Department of Health and Human Services, if 88 percent of adults are not proficient in health literacy, then people are not the problem; the problem is the healthcare system.¹ If this is indeed the case, then the system can be redesigned to accommodate the unpredictability of limited health literacy skills.²

Building on this premise, Koh et al. have proposed a Health Literate Care Model that calls for first approaching all patients with the assumption that they are at risk by not understanding their health conditions or how to deal with them, and then, subsequently, confirming and ensuring patients' understanding.³ The authors believe use of the model will make health literacy an organizational value while introducing health literacy universal precautions, such as confirming patient understanding through "teach back," into the care system. Teach back is a proven method of ensuring patient comprehension by having patients explain back key health concepts in their own words.

Combating low health literacy can seem like a formidable task given the pervasiveness of the problem. The 2010 Health and Human Service's National Action Plan seems to put the responsibility of health literacy squarely on the shoulders of the medical community.⁴ The plan is based on the principles that (1) everyone has the right to health information that helps them make informed decisions and (2) health services should be delivered in ways that are understandable and beneficial to health, longevity, and quality of life.⁵ While the second principle is difficult to measure, it is the crucial part of every clinician and patient interaction.

Which raises the question: if the medical community were to approach health literacy as the equivalent of curing a disease, what might that do to the problem?

- ¹ Koh, HK, Brach C, Harris LM, and Parchman M. A "proposed health literate care model" would constitute a systems approach to improving patients' engagement in care. *Health Aff.* 2013;32(2): 356-357.
- ² Rudd RE. Improving Americans' health literacy. *New England Journal of Medicine.* 2010;363, 2283 – 2285. doi: 10.1056/NEJMp1008755
- ³ Koh, HK, Brach C, Harris LM, and Parchman M. A "proposed health literate care model" would constitute a systems approach to improving patients' engagement in care. *Health Aff.* 2013;32(2): 356-357.
- ⁴ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. *National Action Plan to Improve Health Literacy.* Washington, DC: Author; 2010.
- ⁵ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. *National Action Plan to Improve Health Literacy.* Washington, DC: Author; 2010.

- ⁶ IOM and Nielsen-Bohlman L, Panzer AM, Kindig DA. *Health Literacy: A prescription to end confusion*. Washington DC: The National Academies Press; 2004.
- ⁷ Howard DH, Sentell T, Gazmararian JA. Impact of health literacy on socioeconomic and racial differences in health in an elderly population. *Journal of General Internal Medicine*. 2006;(8): 857-61.
- ⁸ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. *National Action Plan to Improve Health Literacy*. Washington, DC: Author; 2010.
- ⁹ Kutner M, Greenberg E, and Baer J. *A first look at the literacy of America's Adults in the 21st century*. National Center for Education Statistics; 2006.
- ¹⁰ Baur C. Calling the nation to act: Implementing the national action plan to improve health literacy. *Nursing Outlook*. 2011;59(2), 63-69. doi:10.1016/j.outlook.2010.12.003.
- ¹¹ Weiss B. "Health Literacy: A Manual for Clinicians," *JAMA*; 2007; 306 (10): 1122-1129.

A Brief History of Health Literacy

Healthcare professionals encounter numerous patients throughout the course of any given day, and it can be difficult to discern what a patient can or cannot understand. This communication breakdown can be the case for patients of all socioeconomic backgrounds, ages, and ethnicities.

The impact of low health literacy on individual patients is significant since it often means poorer overall health status and a lower likelihood of using preventative care.⁶ Now, as the Affordable Care Act goes into effect, the advantages of increased health literacy could be significant since inpatient spending for patients with limited health literacy increases by approximately \$993.⁷

Health literacy often begins with health care institutions and public health systems because they are often the first point of contact with a patient. However, decades of research indicate that today's health information is presented in a way that simply isn't usable for most Americans.⁸

Despite an emphasis on comprehension skills, reading levels and health literacy remain inextricably linked. The average reading level of adults nationwide is at a 8th grade level; however, the majority of health-related information is distributed at a 10th grade reading level.⁹

One of the challenges of low health literacy is that the problem lacks a clear-cut solution. Education efforts might benefit those with limited health literacy, but this doesn't solve the problem of verbal communication breakdowns between doctors and patients. Meanwhile, of all the clinical disciplines, nurses have a unique relationship to health literacy because they deliver the majority of patient, caregiver, and community health education and communication.¹⁰

The High Cost of Limited Health Literacy

Low health literacy has two main ramifications: higher healthcare costs and poorer overall health status. Complicating the issue even more, studies have shown patients with low health literacy may hide their confusion from doctors and caregivers because they are too embarrassed to ask for help. As a result, research suggests that incorrect medication dosages are taken, instructions aren't followed correctly, and follow-up visits aren't scheduled correctly.

It could be argued that health literacy should be one of the most important issues in the era of reform because of the impact of low health literacy on care costs alone. For instance, individuals with low health literacy have an average annual healthcare cost of \$13,000 compared to only \$3,000 for those with high literacy levels, according to the American Medical Association Foundation.¹¹

Creating greater awareness of the far-reaching impact of low health literacy could be a driving force in helping clinicians approach patients with greater sensitivity, empathy, and effectiveness.

Our Next Priority

While we are not suggesting specific best practices (since there are too many to list here), our top five reasons why health literacy should be healthcare's next priority include:

1. Costs associated with health literacy are estimated between \$106 billion to \$238 billion annually.¹² By way of comparison, this cost represents an amount equal to the cost of insuring every one of the more than 47 million people who lacked coverage in the United States in 2006.¹³
2. Better health literacy means better potential outcomes since low health literacy increases the risk of preventable, adverse events.¹⁴ The Joint Commission has stressed the importance of health literacy, health communication, and cultural competencies as an element of quality health care.
3. Improving health literacy will not occur unless it is made a priority along with other protocols. Without clear information and an understanding of prevention and self-management of conditions, people are more likely to skip necessary medical tests.¹⁵ Unfortunately, the overestimation of a patient's health literacy by healthcare professionals may contribute to the widespread problem of poor health outcomes and hospital readmission rates.¹⁶
4. When health literacy best practices are followed, the care environment that is created is conducive to better communication. Improving health literacy could have far-reaching affects for the healthcare industry and care recipients alike. Health literacy experts have recommended that all patients be treated as if they have limited health literacy.¹⁷ Some health literacy assessments, such as Newest Vital Sign, take as little as three minutes to administer.
5. If we don't improve health literacy, we will be unprepared for the potential influx of the population with access to health insurance or free services. Approximately 32 million Americans, half of whom have limited health literacy, will be eligible for free preventive services through Affordable Care Act coverage in 2014.¹⁸ Clinicians can help patients with limited health literacy by removing unneeded complexity in their treatment regimens and in the health care system (particularly among those for whom English is a second language), and by using teach-back methods to assess and improve understanding.¹⁹

¹² Vernon J, Trujillo A, Rosenbaum S, DeBuono B. *Low Health Literacy: Implications for National Health Policy*. University of Connecticut. Storrs, CT: National Bureau of Economic Research; 2007.

¹³ Vernon J, Trujillo A, Rosenbaum S, DeBuono B. *Low Health Literacy: Implications for National Health Policy*. University of Connecticut. Storrs, CT: National Bureau of Economic Research; 2007.

¹⁴ IOM and Nielsen-Bohlman L, Panzer AM, Kindig DA. *Health Literacy: A prescription to end confusion*. Washington DC: The National Academies Press; 2004.

¹⁵ IOM and Nielsen-Bohlman L, Panzer AM, Kindig DA. *Health Literacy: A prescription to end confusion*. Washington DC: The National Academies Press; 2004.

¹⁶ Dickens C, Lambert B, Cromwell T, Piano M. Nurse overestimation of patients' health literacy. *Journal of Health Communication: International Perspectives*. 2013;18(1): 62-69.

¹⁷ Dickens C and Piano M. Health Literacy and Nursing: An Update. *American Journal of Nursing*. 2013;113 (6): 52-57.

¹⁸ Brach C and Harris L. Health literacy: Reducing the burden of a complex healthcare system. [Internet] 2011 Oct 13. Available from: <http://www.rwjf.org/en/blogs/new-public-health/2011/10/health-literacy-reducing-the-burden-of-a-complex-healthcare-system.html> Accessed November 1, 2013.

¹⁹ Pashe-Orlow M. Caring for patients with limited health literacy. *JAMA*. 2011;306(10):1122-1129.

Concluding Summary

Several landmark reports have helped move health literacy from a silent epidemic to an issue of health policy and reform. The 2010 Health and Human Service National Action Plan to Improve Health Literacy solidified health literacy as a priority going forward. From higher health care expenses to poorer overall health, limited health literacy has ramifications for people of all ages, but particularly for the elderly. One of the challenges of improving limited health literacy is the lack of a clear-cut solution. As we enter an era of shared responsibility between clinicians and patients, plain language is sometimes the missing ingredient between the clinician-patient exchange.

The current care system must be redesigned to account for a lack of health literacy among care recipients. Since resistance to health literacy efforts by administrators typically comes from a mindset of seeing it as elective, it will require a commitment from leadership at all levels of care to advocate a focus on health literacy.²⁰

As Dr. Koh has said, if public and private organizations make it a priority to become health literate, the nation's health literacy can be advanced to a point where it can play a major role in improving healthcare and health for all Americans.²¹

²⁰ IOM (Institute of Medicine). *Organization change to improve health literacy: workshop summary*. Washington, DC: The National Academies Press; 2013.

²¹ Koh HK, Berwick DM, Clancy CM, Baur C, Brach C, Harris LM, Zerhusen EG. New Federal Policy Initiatives To Boost Health Literacy Can Help The Nation Move Beyond The Cycle Of Costly 'Crisis Care.' *Health Aff.* 2012 Feb;31(2):434-43. doi: 10.1377/hlthaff.2011.1169.

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From Margin to Mainstream:
The Top 5 Reasons Health Literacy Should be Healthcare's Next Priority

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