

Health literacy and Self Management Support

Presentation for practice teams

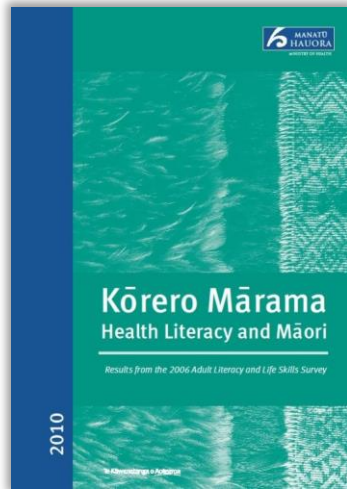
What do you know about health literacy?

What do we mean by health literacy?

Good health literacy means people:

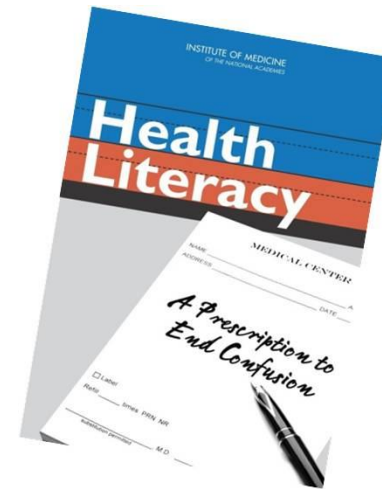
“have the capacity to obtain, process and understand basic health information and services in order to make informed and appropriate health decisions”

Kōrero Mārama, 2010

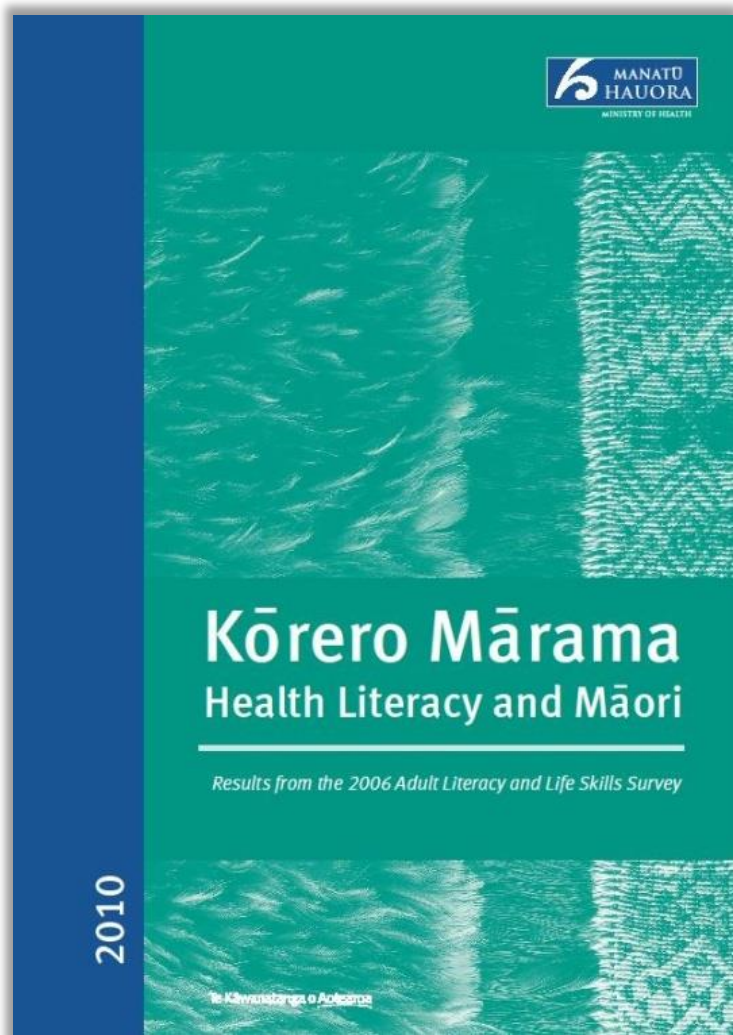


<http://www.moh.govt.nz/moh.nsf/indexmh/korero-marama-health-literacy-maori-feb2010>

Health literacy is an interaction between the skills of individuals and the demands of the health system



Health literacy statistics in New Zealand



More than **56.2%** of adult New Zealanders (**1,626,000** adults) have low levels of health literacy

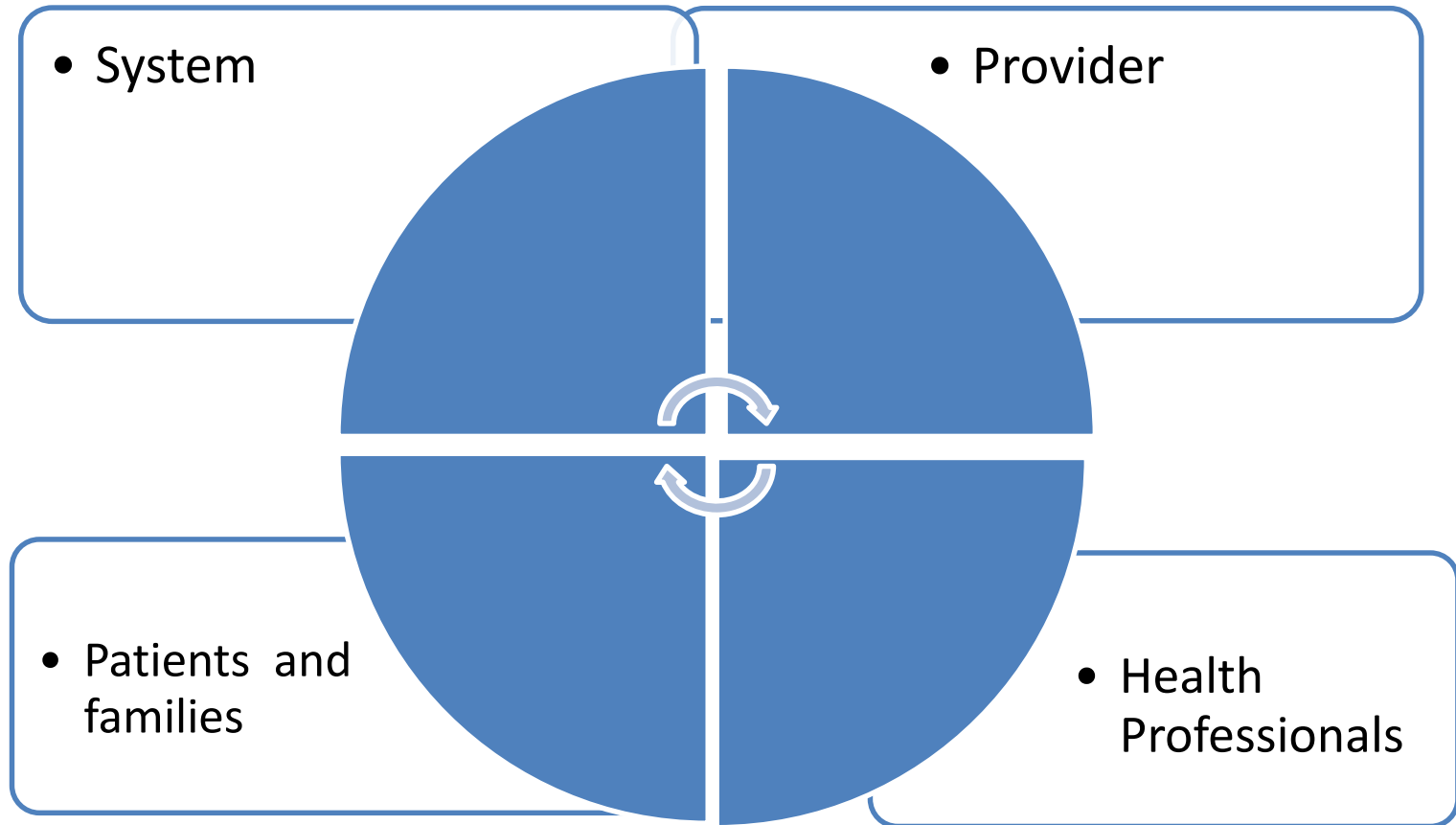
Low levels are a result of **unfamiliarity** and **complexity** of health information

Most people with low skills are **Pākehā** and **employed** and **unaware** they have low health literacy

Everyone will have low health literacy at some stage in their life

Particular issues for Māori, Pacific peoples, non English speakers, rural, younger, older & unemployed adults

NZ's Framework for Health Literacy



<http://www.health.govt.nz/publication/framework-health-literacy>

Health literacy demands

- Reading, writing, listening, speaking, number, counting, calculating, measurement, time, statistics, analysis, critical thinking, problem-solving = health knowledge and skills

For example:

- Making an appointment over the phone
- Completing an enrolment form
- Taking the correct dose of medicine at the right time
- Working out if a visit to the doctor is needed
- Understanding how to negotiate an urgent appointment and what the alternatives are

Health literacy demands of a health condition e.g. newly diagnosed Type 2 diabetes



diabetes and healthy food choices

Eating healthy food is an important part of self-managing diabetes

NUTRITION INFORMATION		
Servings per package: 1	Average quantity	
Serving Size: 170g	Per serving	Per 100g
Energy	410kJ	240kJ
Protein	5.2g	3.1g
Fat - total	2.8g	1.7g
- saturated fat	0g	0g
Carbohydrate	11.5g	6.7g
- Sugars	3.5g	2.1g
Dietary fibre	2.2g	1.3g
Sodium	30mg	17mg
Potassium	335mg	210mg
Gluten	0mg	0mg
Iron	2.0mg	1.2mg



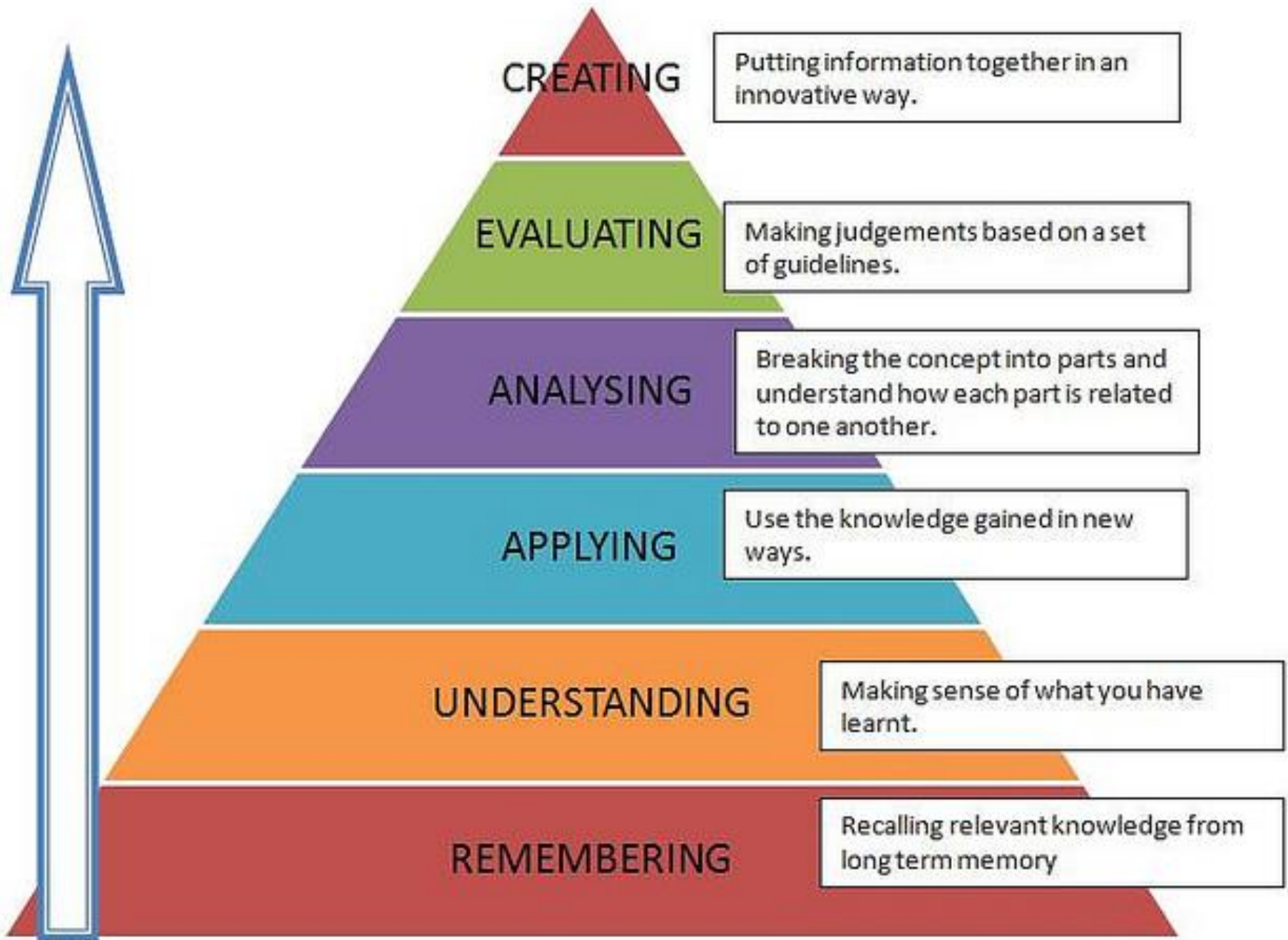
Navigation: what must a person do/know to join the portal?

- How do you find out there is a portal?
- How do you find out what a portal is?
- Who do you have to talk to?
- What do you have to read/find?
- What IT skills do you need?
- What information do you have to supply/write?
- What are the sign-up and user steps?

Health Literacy Demands Activity

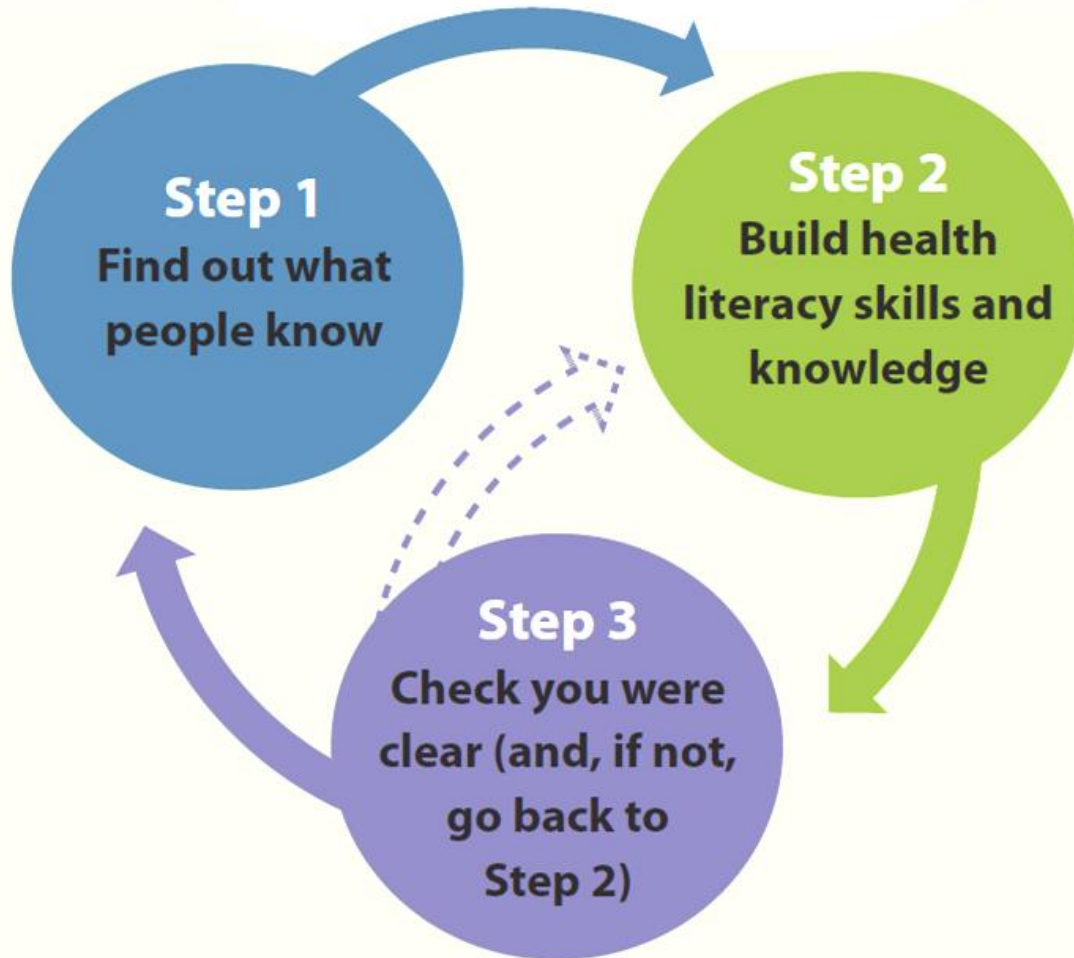
In your tables brainstorm the health literacy demands of a

- patient with a long term condition – think of all aspects of their engagement with the health system
- Or
- system at your practice e.g. making an appointment



Bloom's (Revised) Taxonomy

Three Steps to better health literacy



Super tool 1 Ask open questions – don't assume



Catherine Keenan community pharmacist talking about assumptions



<https://www.hqsc.govt.nz/our-programmes/partners-in-care/publications-and-resources/publication/1194/>

Super tool 2 Listening

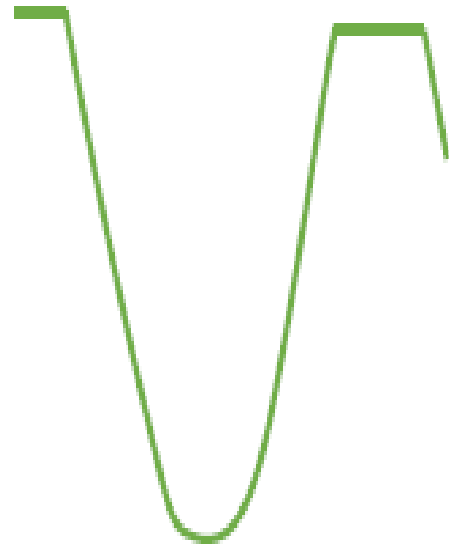
“Most people do not listen with the intent to understand; they listen with the intent to reply.”

Stephen R. Covey

(1932-2012)

InspirationBoost.com

Listening to reply



Rehearsing your answer

Listening to understand



Paying attention and
checking
understanding

It's not about the nail video



I mean, that's the thing that scares me the most,

JH

<https://www.youtube.com/watch?v=-4EDhdAhrOg>

Health literacy demands of oral interactions

“Listening takes place in real time

The listener does not have the option of reviewing the information presented and has little control over the rate of speech.”



Vandergrift, L. (2006) 'Second Language Listening: Listening Ability or Language Proficiency?' in *Modern Language Journal*, Vol. 90, No. 1, pp. 6-18.



Step 1

**Find out what people
know, believe and do**

**This is the most important and easiest step
Get this one right first**

Schema Theory

Everyone relates new knowledge to what they already know, think, do and believe



Activity

- In your tables think of someone you worked with this week who has a long term condition
- Brainstorm that person's prior knowledge, health beliefs, actions and thoughts

Step 1 Ask

- **Ask them what they already know, think, do and believe**
Focus on asking open questions, listening and uncovering person's background knowledge
 - *“Tell me what you know/do about*”
 - *“Tell me what you think/believe about*”
- **Set an agenda**
Today I want to find out how you have been since I saw you last and then talk about your blood tests. Tell me what you would like to talk about (write it down)
And keep asking *anything else – anything else*
- **And then prioritise**
So we may not be able to cover all these things today so tell me what are the most important things you want to cover



Step 2

**Build health literacy
skills and knowledge
and link them to what
people already know**

If you are talking then you are at Step 2

We think health professionals do some of this already

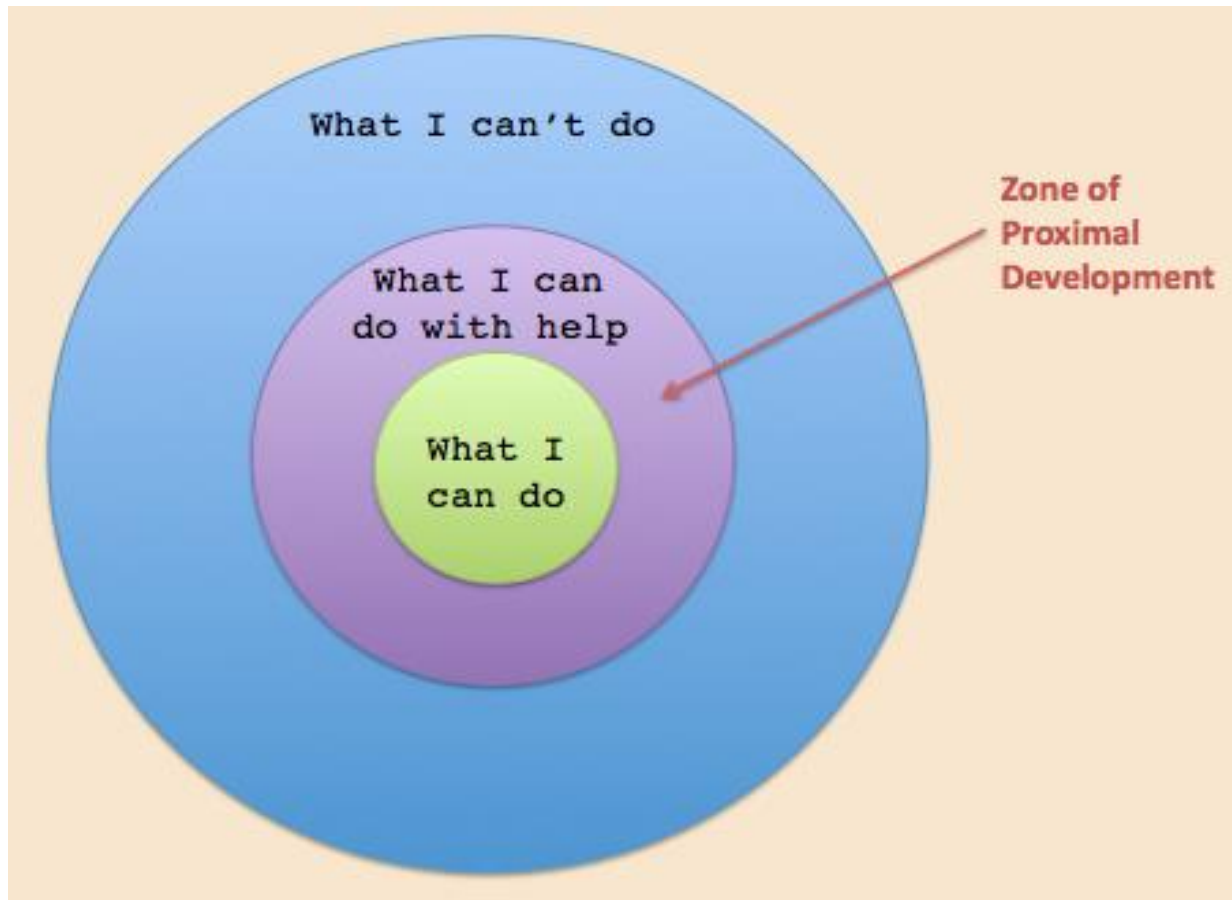
Step 2: Build health literacy skills and knowledge

Link new information to what the person already knows

- **Give information in manageable chunks**
- **Give information in logical steps**
- **Explain technical words**
- **Use visuals including actual equipment**
- **Use written materials**
- **Help people anticipate next steps**
- **Medicine reviews**
- **Reinforce and emphasise**



Zone of proximal development



How people learn new words



Teach people how to say the names of their condition and their medicines. Write down how you say them.

Words are so important

- Pustule
- Diarrhoea
- Practice nurse
- Rehab

- Any others you can think of?

New words and reading

- Adults need 40 exposures to a new word before it becomes part of their vocabulary
- Generally adults will struggle to understand what they are listening to or reading where 80% of the words are not high frequency words

What is type 2 diabetes?

Diabetes is the result of the body not creating enough insulin to keep blood glucose (sugar) levels in the normal range. Everyone needs some glucose in their blood, but if it's too high it can damage your body over time.

In type 2 diabetes, either the body doesn't produce enough insulin, or the cells in the body don't recognise the insulin that is present. The end result is the same: high levels of glucose in your blood.

For many people (but not all) type 2 diabetes can be prevented by making healthy food choices and staying active.

There is a clear link between type 2 diabetes and high blood pressure (hypertension) and / or disordered levels of fats (cholesterol) in the blood (the medical name for this is dyslipidaemia). This combination of diabetes with hypertension and dyslipidaemia is sometimes called 'the Metabolic Syndrome' or Syndrome X.

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Step 3

**Check you were clear
(and, if not, go back to
Step 2)**

This is the hardest step and needs the most practice

Step 3: Check **YOU** were clear

Don't say *"Have you got any questions?"* or *"Do you understand?"*

Most people will not tell you they don't understand because that means they are dumb

Remember It is your responsibility to be clear

Instead say

"We have talked about a lot of things today, I want to check I have been clear can you tell me what is going to happen next and what you are going to do?"

"I want to check I have been clear what are you going to tell your family when you get home?"

We have talked about a lot of things today. Most people have questions.
What are your questions?

References

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<http://www.moh.govt.nz/moh.nsf/indexmh/korero-marama-health-literacy-maori-feb2010>
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- Three Step model to better health literacy
<http://www.hqsc.govt.nz/assets/Consumer-Engagement/Resources/health-literacy-booklet-3-steps-Dec-2014.pdf>
- Zone of Proximal Development
<https://www.simplypsychology.org/Zone-of-Proximal-Development.html>