

COMPARE-PHC



CENTRE FOR OBESITY MANAGEMENT & PREVENTION RESEARCH EXCELLENCE IN PRIMARY HEALTH CARE

Health Literacy & clinical practice

Scientia Professor Mark Harris



What is health literacy?

The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions

Functional literacy

Basic skills in reading and writing and the capacity to apply these skills in everyday situations

Communicative literacy

More advanced cognitive and literacy skills, greater ability to obtain relevant information, derive meaning, and apply new information to changing

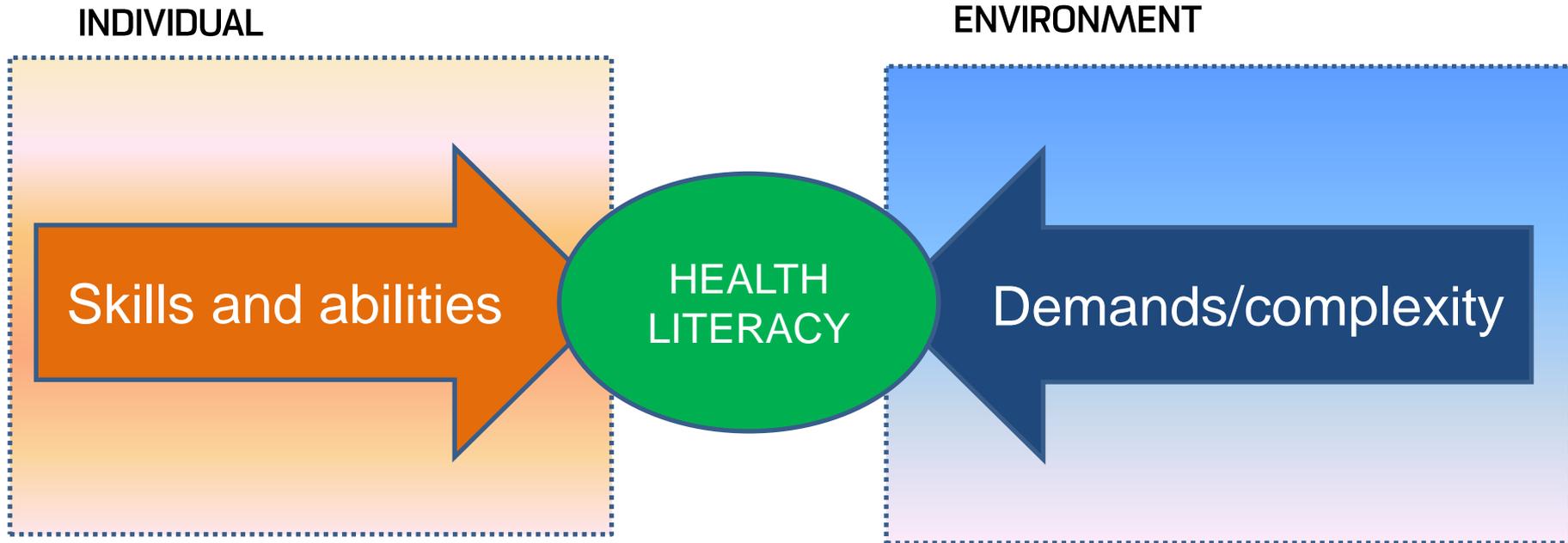
Critical literacy

Most advanced cognitive and literacy skills, critical analysis of information, ability to use information to respond, adapt and control life events and situations

From Don Nutbeam April 2010 presentation, "The evolving concept of health literacy"

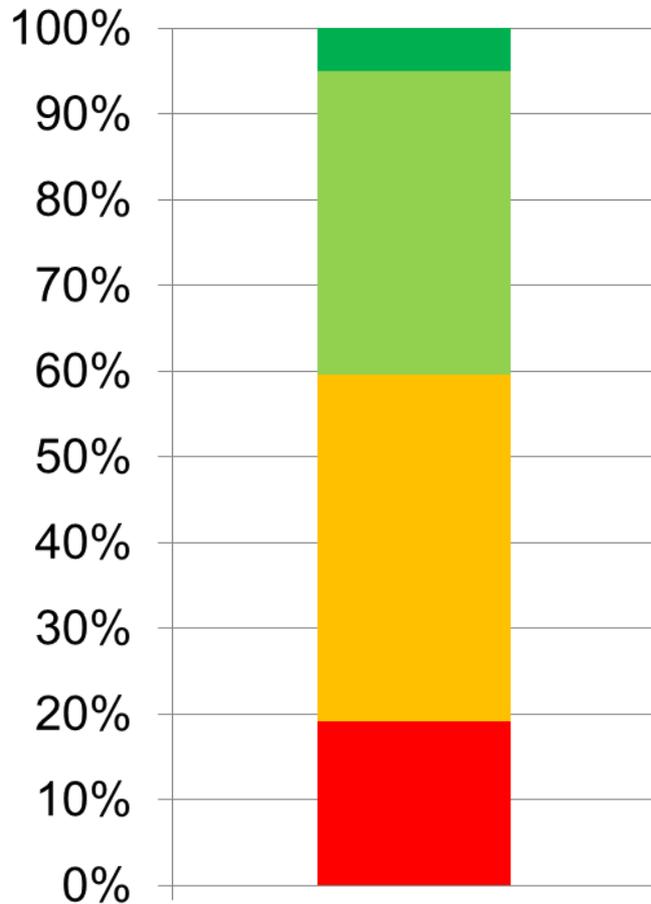


Health literacy is two-way



Source: Parker R. Measuring health literacy: Why? So What? Now what? In: Hernandez L (Ed) Measures of Health Literacy: Workshop Summary; Roundtable on Health Literacy 2009. National Academies Press.

Health Literacy in Australia 2006 (ABS)



Level 4/5 Proficient

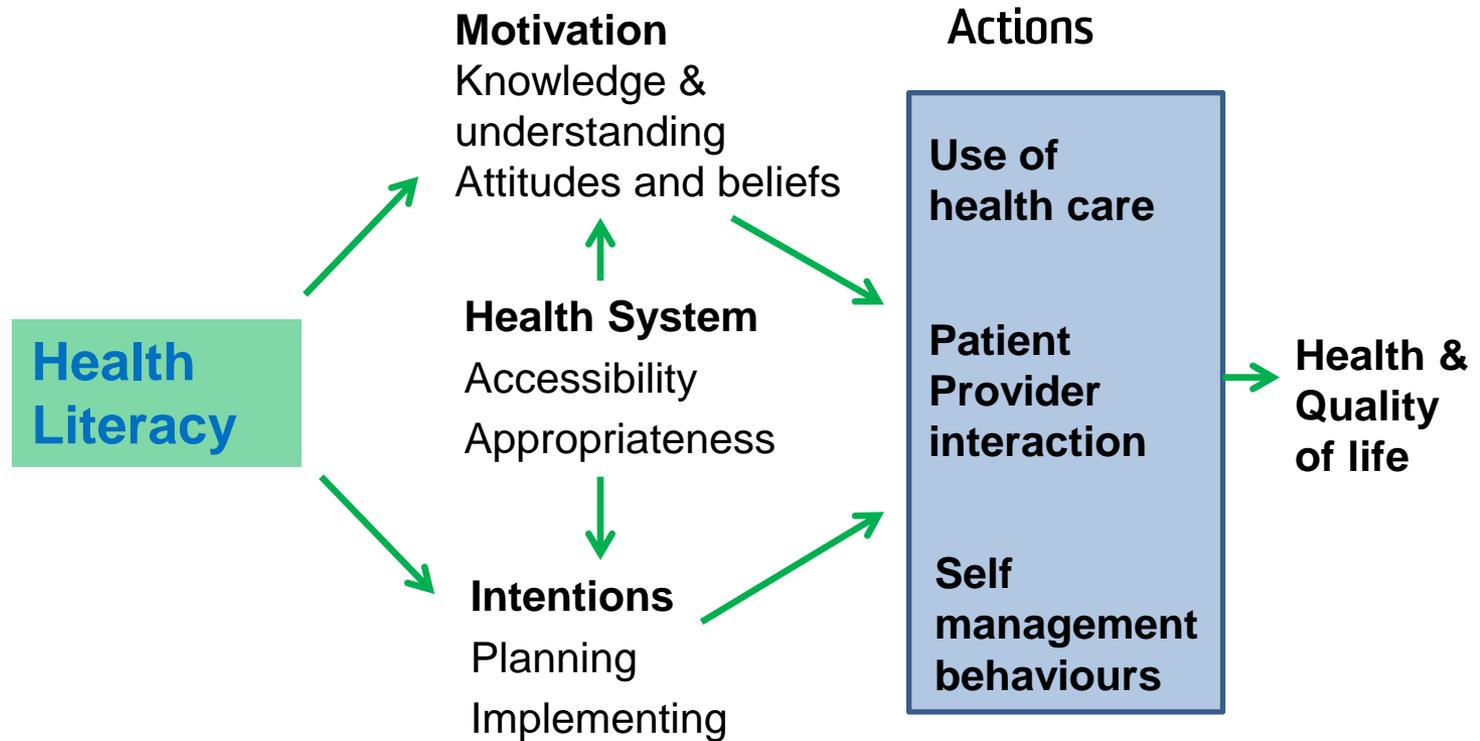
Level 3 Sufficient: to manage health

Level 2 Insufficient: to manage health

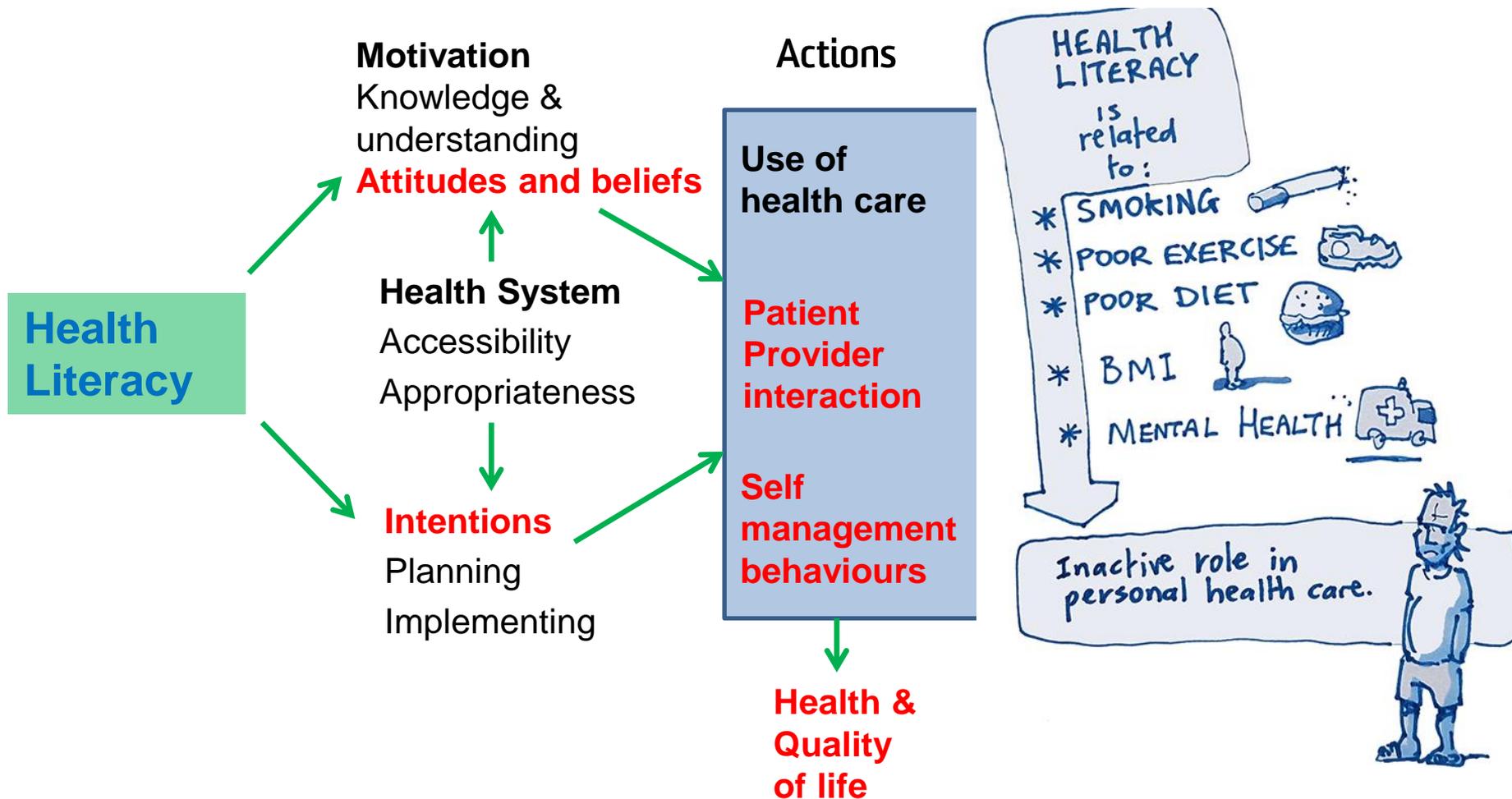
Level 1: Very poor

Framework for health literacy and health action

Paasche-Orlow & Wolf 2007 and von Wagner et al 2009



Our research on health literacy



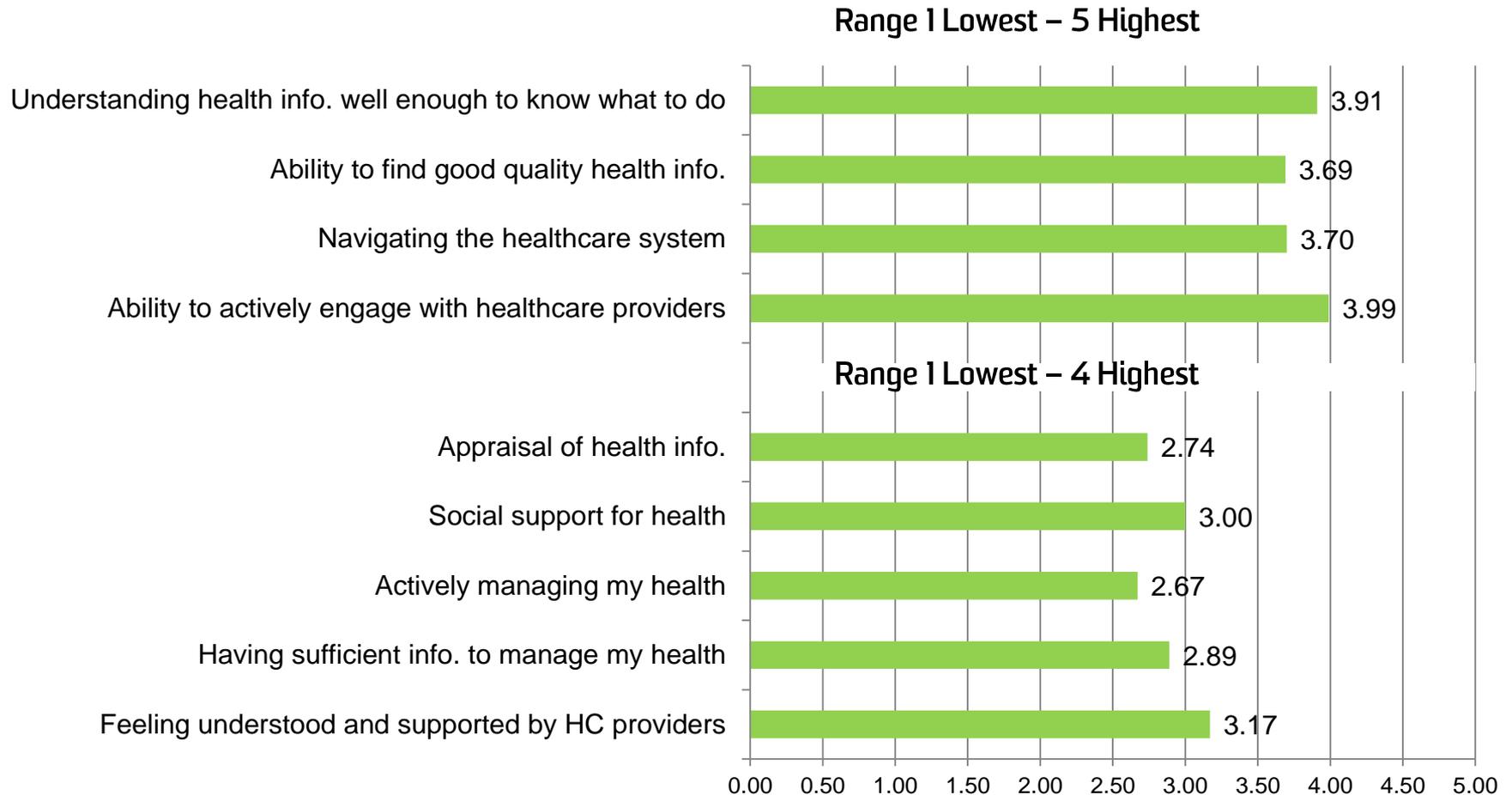
How can we measure health literacy

Health Literacy Questionnaire

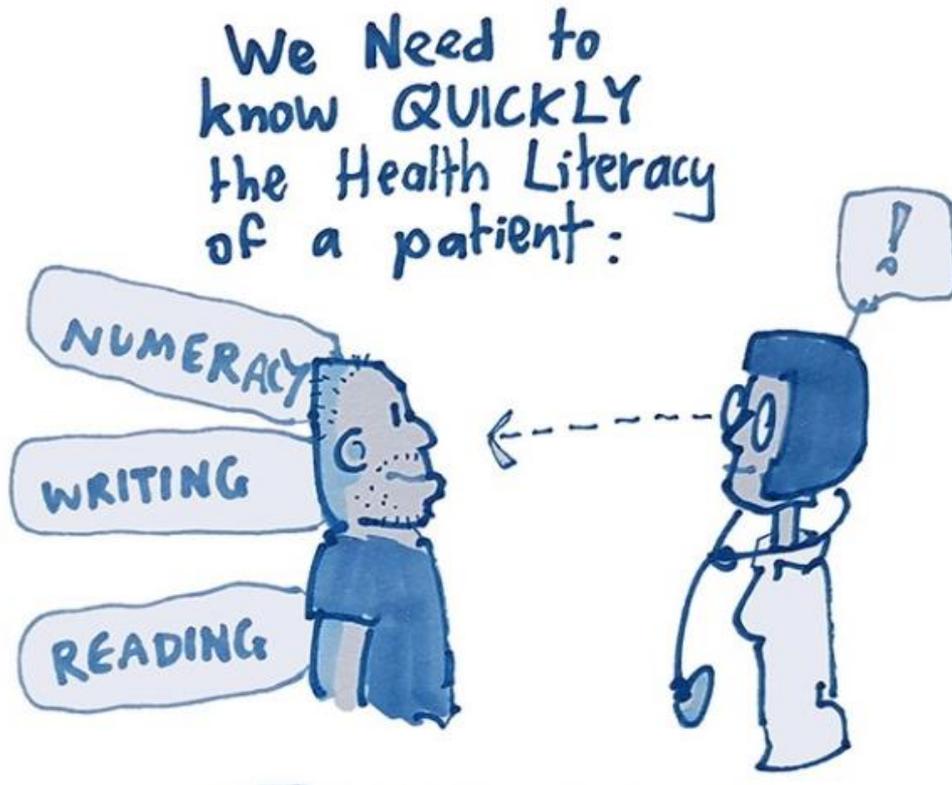
- www.ophelia.net.au/bundles/opheliapublic/pdf/The-HLQ.pdf
- 44 questions that can be either self-administered or orally administered. Nine scales.



HLQ in obese patients in primary health care (BMWGP) (Mean scores)



How do we assess health literacy in clinical practice?



Brief Health Literacy Screen (BHLS)

A. How often do you have someone help you read health information materials?

1. Never 2. Occasionally 3. Sometimes 4. Often 5. Always

B. How often do you have problems learning about your medical condition because of difficulty understanding health information materials?

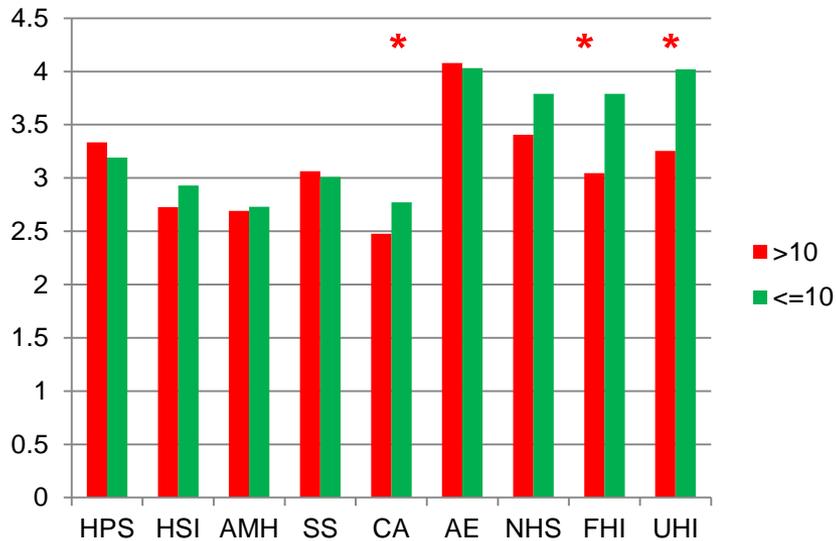
1. Never 2. Occasionally 3. Sometimes 4. Often 5. Always

C. How confident are you filling in medical forms by yourself?

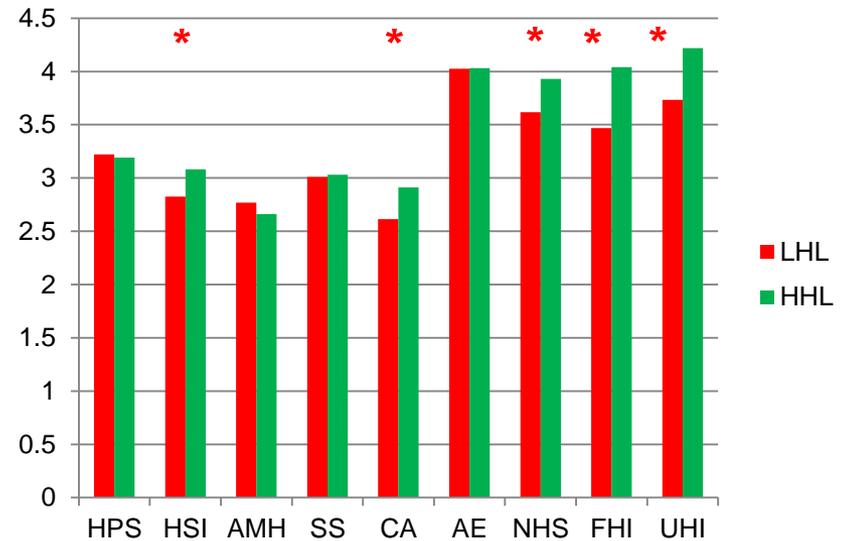
1. Extremely 2. Quite a bit 3. Somewhat 4. A little bit 5. Not at all

HLQ by BHLS screening (BMWGP)

Total score



Question C >2



* p<0.05

What can we do about it?

Assess

Risk & low health literacy

Advise/agree

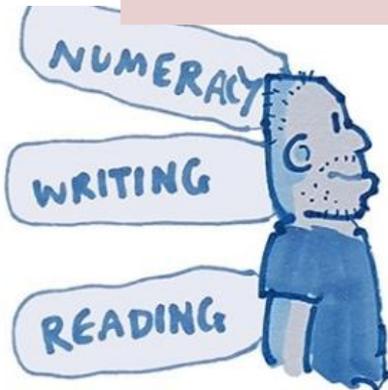
Advice, goal setting, teachback

Assist

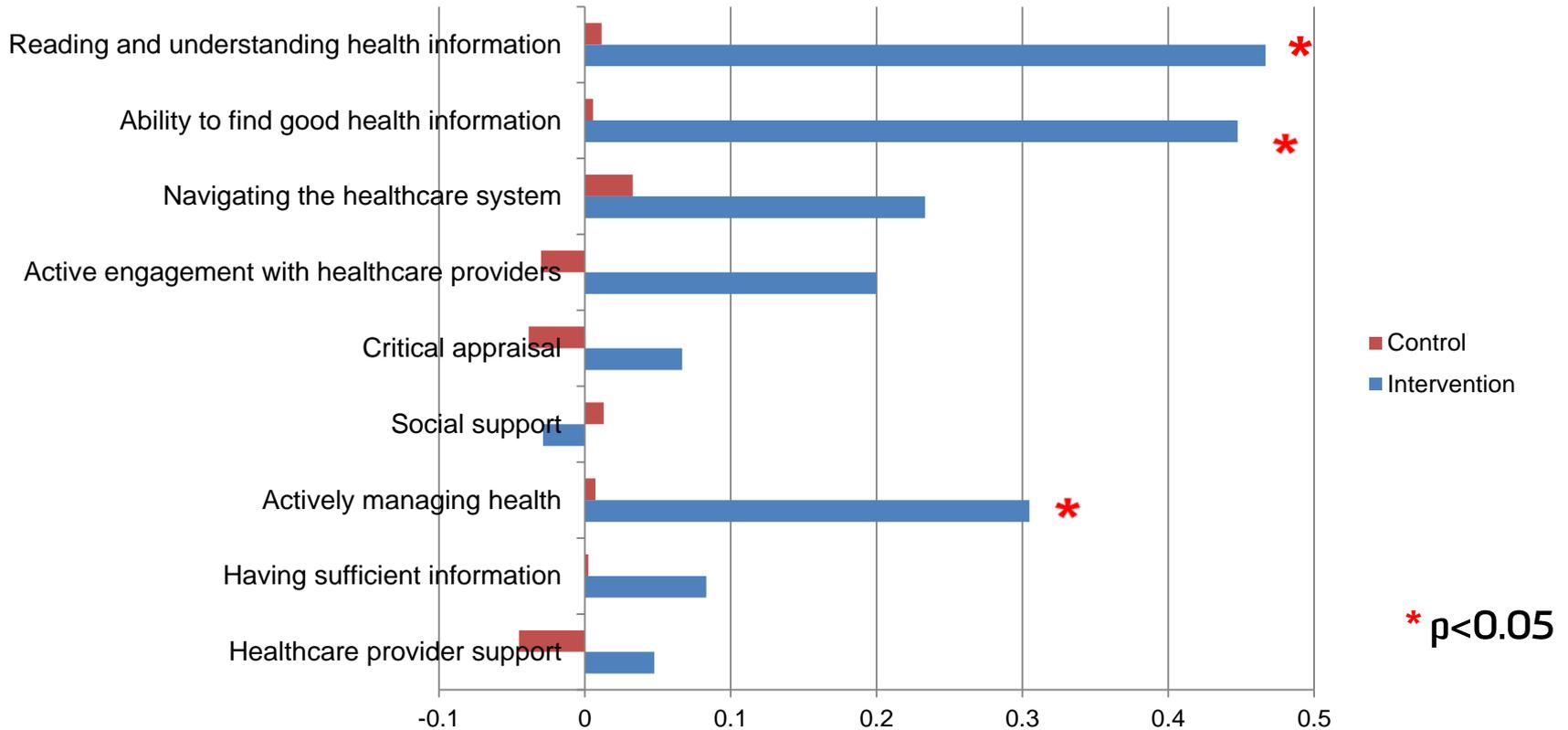
Referral navigation

Arrange

Follow up



Change in patient health literacy (HLQ, baseline to 6 month follow-up, BMWGP)



Conclusions

- PHC can play an effective role across the 5As and working with patients with low health literacy to build skills and manage the information demands on them.
- Pathways for referral to preventive interventions are complex and adherence is low (<50%). We need to provide better communication and more intensive navigation support.
- A health literacy approach needs to be incorporated into all provider and consumer health service pathways.

Acknowledgements

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