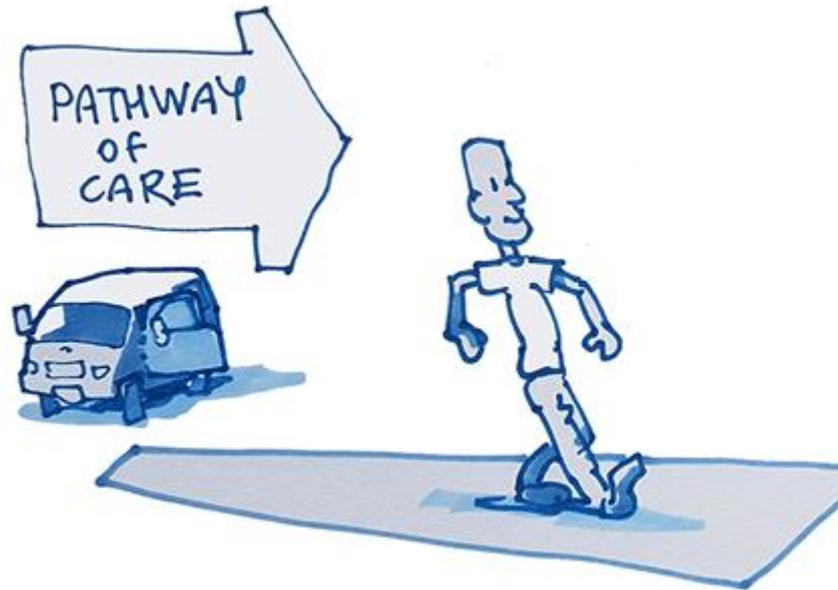


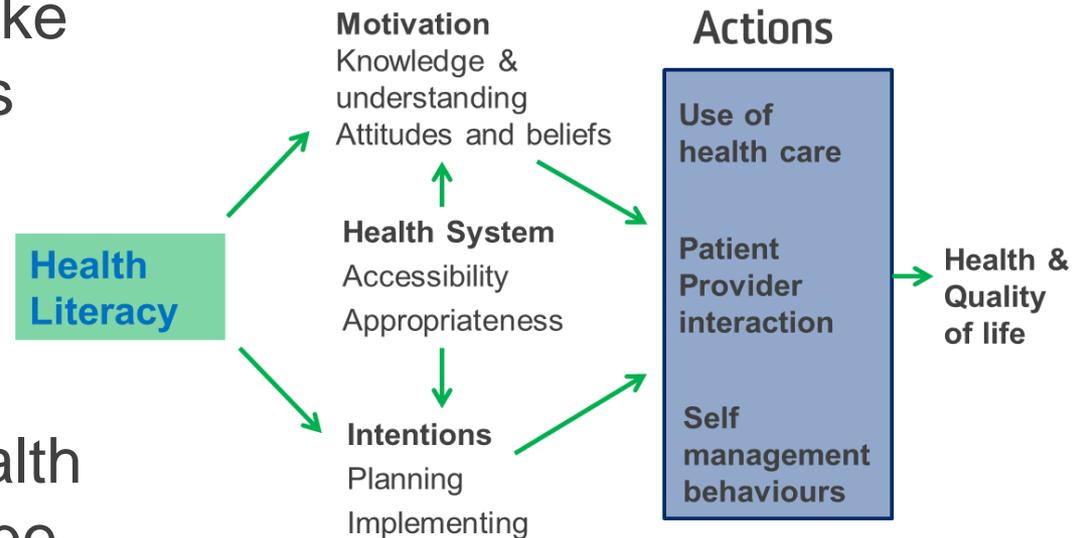
Health literacy and prevention in primary health care

A journey over the past 7 years



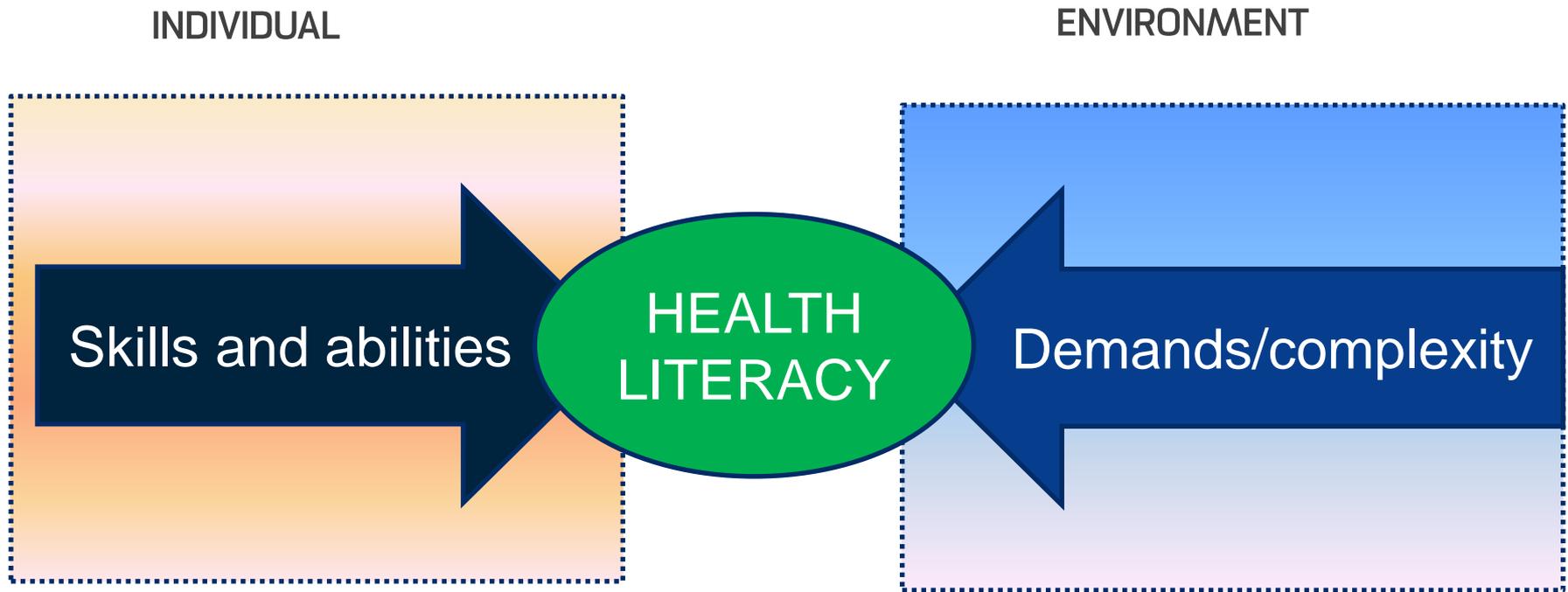
Health literacy is important

- Low health literacy is a significant barrier to uptake of preventive care and its effectiveness in clinical practice.
- Communication from health care providers needs to be in proportion to the skills and abilities of patients.



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

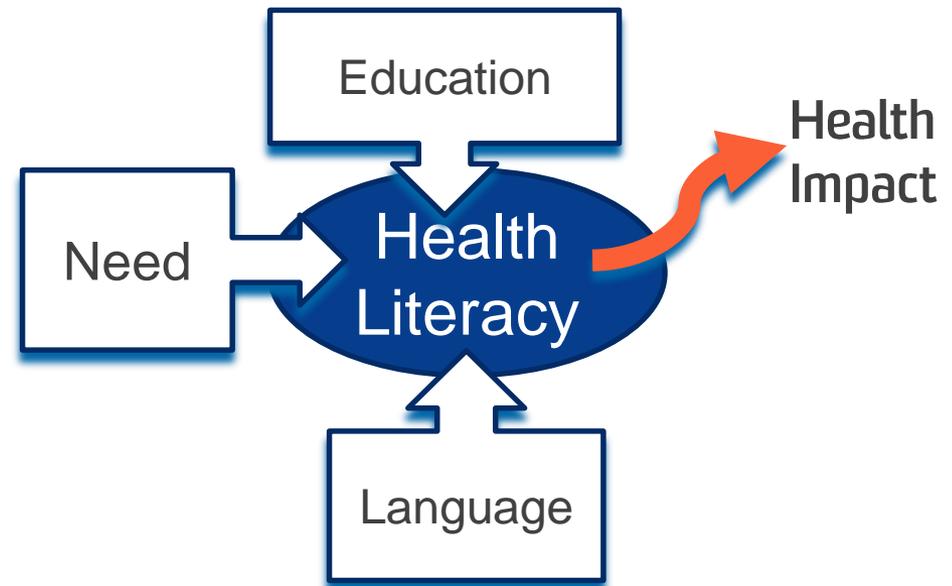
Health literacy is two-way



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 is linked to education, language and need

- Low education attainment
- Overseas born, first language other than English.
- Older and with poorer health



Low health literacy is common in primary health care and is associated with increased risk



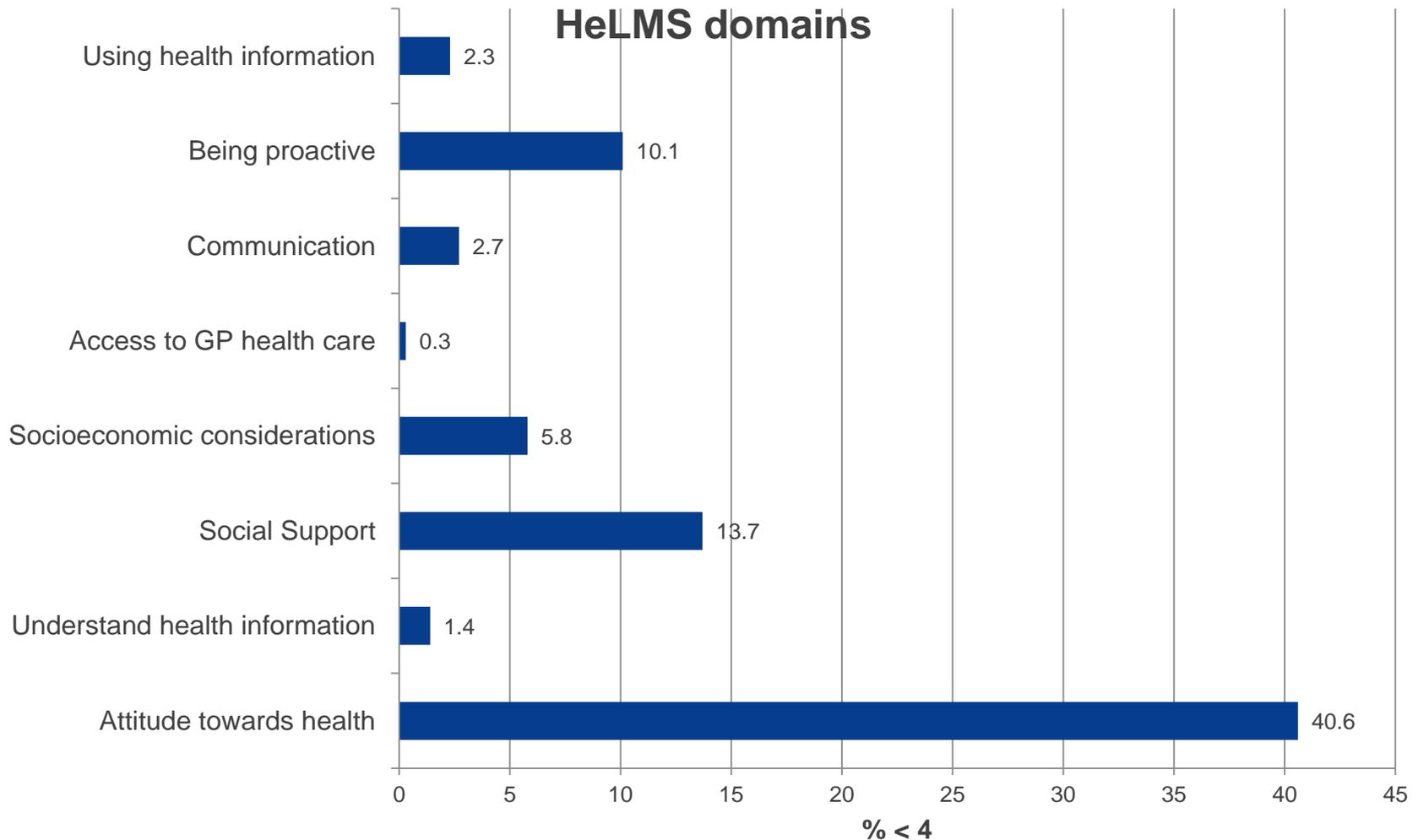
Difficult to research

People with low health literacy are less likely to participate or respond to invitations to participate in research because of:-

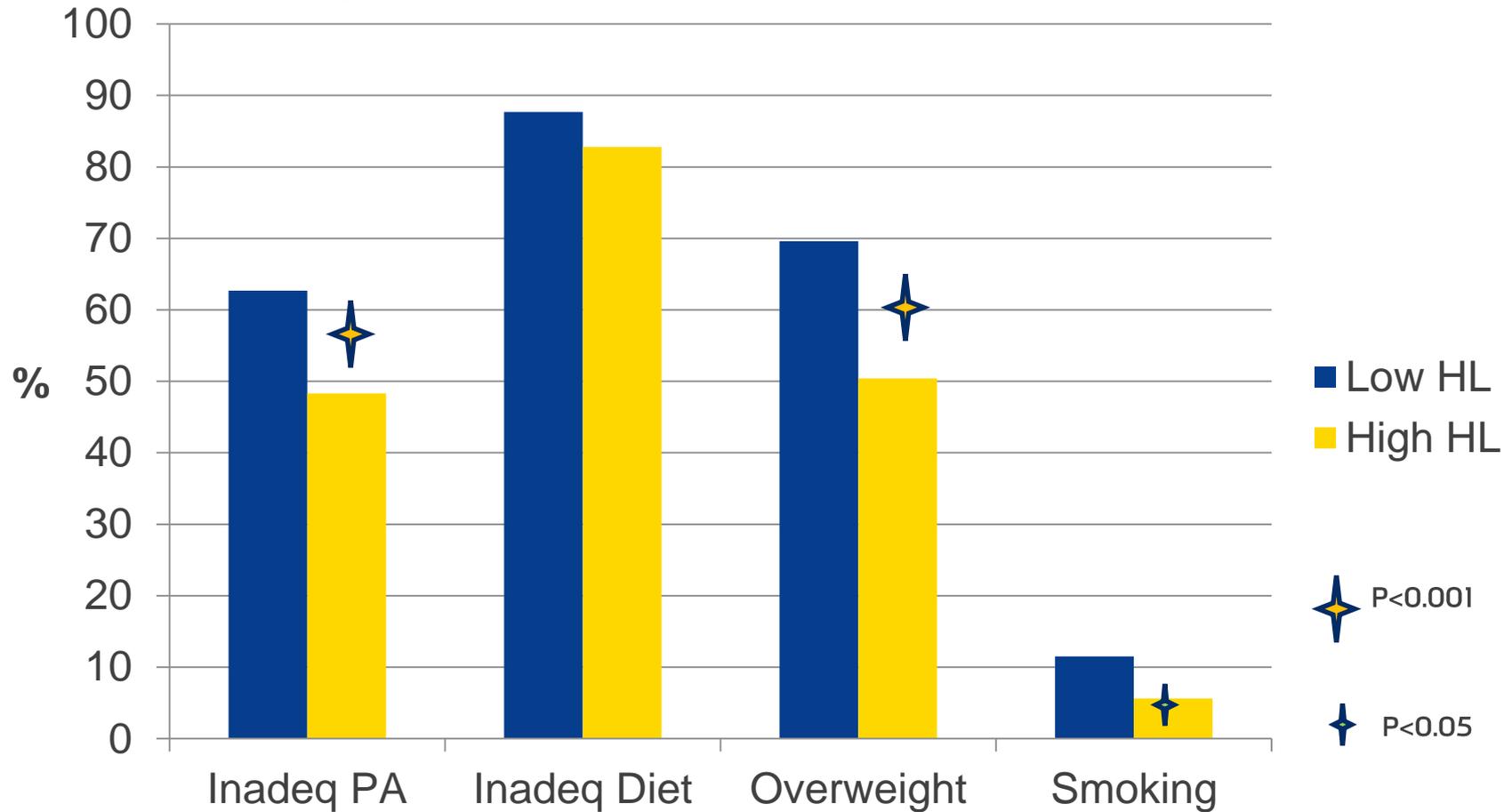
- Lack of knowledge or trust in research, stigma
- Arms length recruitment and complex information and consent procedures
- Difficulty reading or understanding questionnaires or survey forms

This means that most research in clinical practice excludes patients with low health literacy.

Preventive Evidence into Practice with Patients with low health literacy



Health Literacy was related to risk factors (GP patients)



There are effective interventions with most focusing on education and self monitoring.



Systematic Reviews on HL Interventions

Taggart J, Williams A, Dennis S, Newal A, Shortus T, Zwar N, Denney-Wilson E, Harris MF. A systematic review of interventions in primary care to improve health literacy for chronic disease behavioral risk factors. *BMC Family Practice* 2012; 13:49

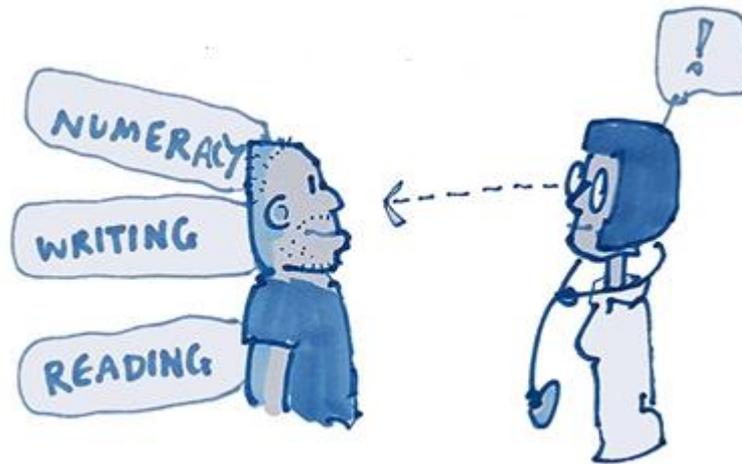
Dennis SM, Williams A, Taggart J, Newall A, Denney Wilson E, Zwar N, Shortus T, Harris MF. Which providers can bridge the health literacy gap in lifestyle risk factor modification education: a narrative synthesis. *BMC Family Practice* 2012; **13**:44.

Faruqi N, Spooner C, Joshi C, Lloyd J, Dennis S, Stocks N, Taggart J, Harris MF. Primary healthcare-level interventions improving health literacy for weight loss: A systematic review of the literature. *BMC Obesity* 2015, 2:6 DOI: 10.1186/s40608-015-0035-7

Systematic Review Conclusions

- Interventions were more likely to be effective if they were:-
 - of at least medium intensity
 - delivered by a range of health professionals (including nurses and CHW),
 - addressed both diet and PA and
 - used goal setting, education and support and improved symptom monitoring,
- Financial, language and cultural barriers reduced uptake.

There are some very good measures of health literacy



Measuring health literacy

Health Literacy Questionnaire

- 44 questions and can be either self-administered or orally administered.
- 9 domains



We Need to
know QUICKLY
the Health Literacy
of a patient:



Assess: Health Literacy Screening

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

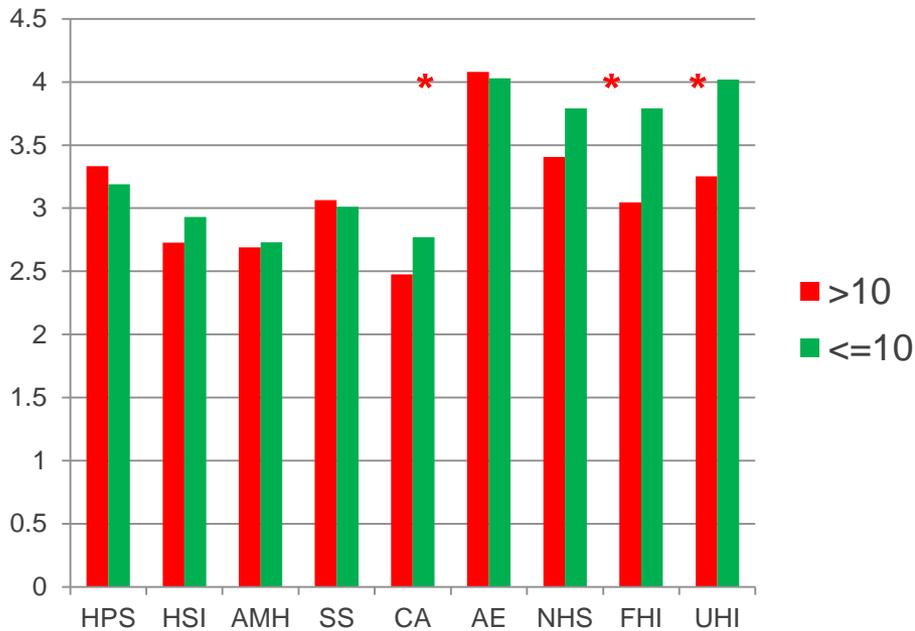
C. How confident are you filling in medical forms by yourself?

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



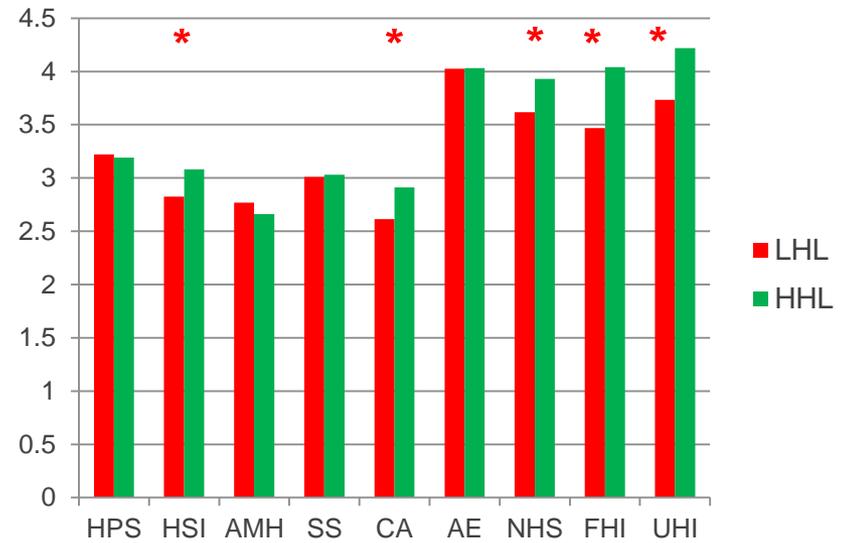
HLQ by BHLS screening (BMWGP)

Total score



* p<0.05

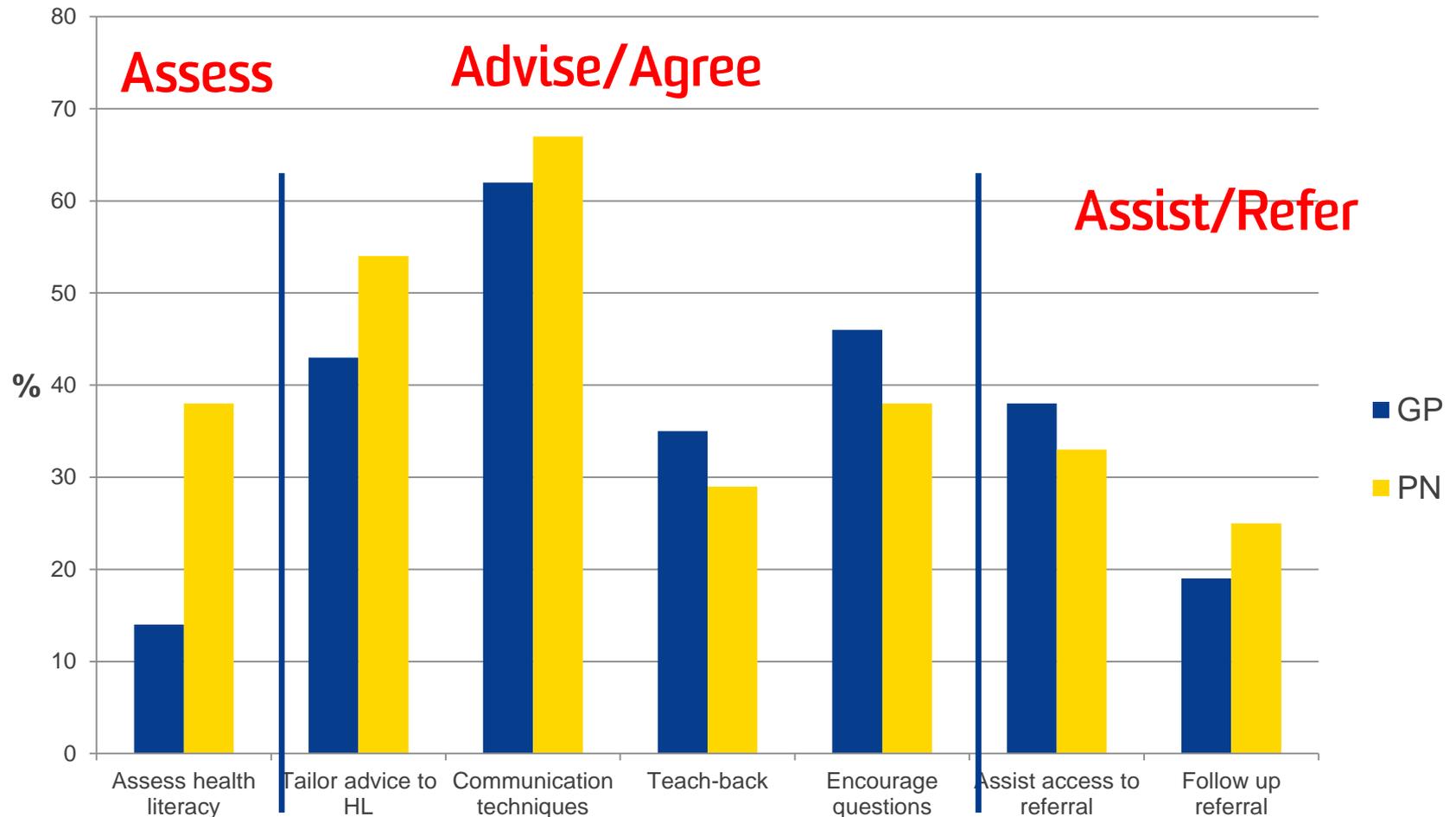
Question C >2



It is feasible to tailor approach to level of health literacy with a variety of techniques to improve communication, goal setting and education.



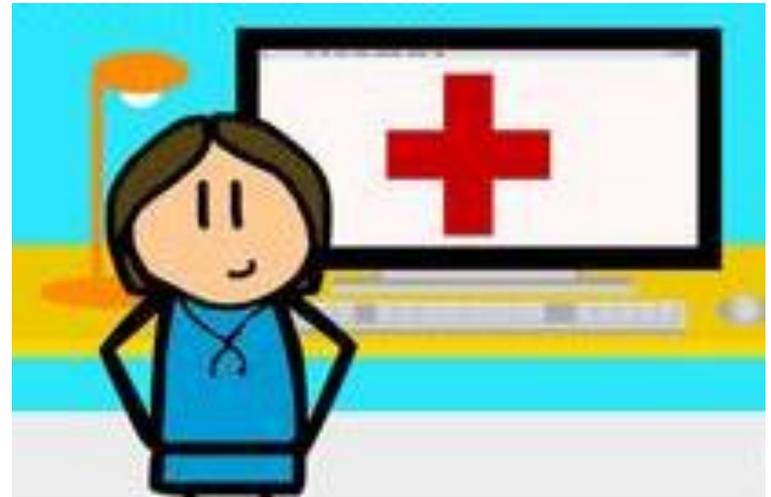
Proportion GPs/PNs tailoring their approach to health literacy often or >60% of the time



BMWGP Intervention

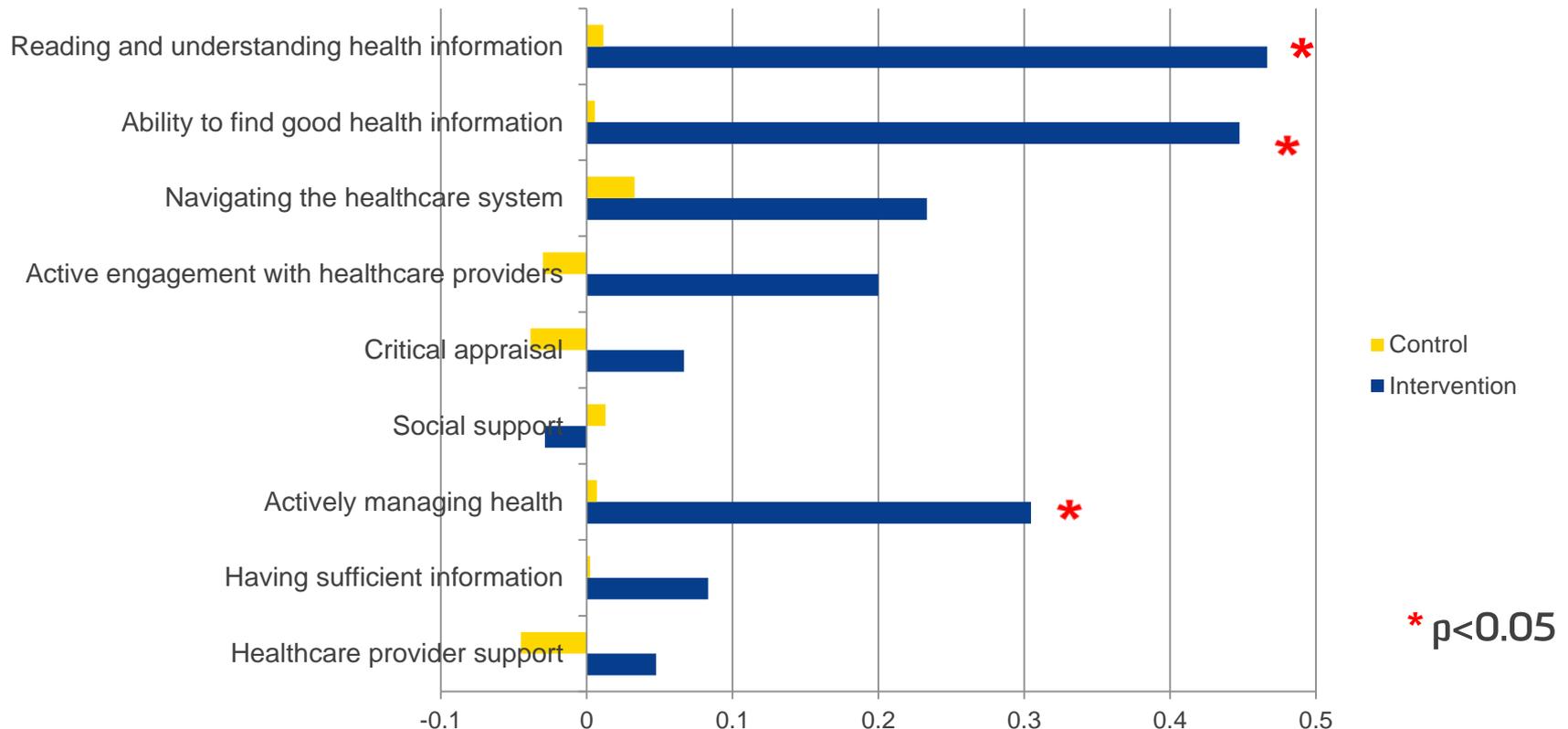
5As-based health check with practice nurses

- Advice using communication techniques such as Teachback
- Goal setting
- Referral to telephone coaching or face to face group program
- Follow up



BMWGP: Can practice nurse support modify health literacy?

(HLQ, baseline to 6 month follow-up, BMWGP)



IMPACT study in SWS: supported access to web based information by patients with T2D

5As-based health check with practice nurses

- Advice using communication techniques such as Teachback
- Goal setting
- Introduction to web based portal for self management education (Arabic or English)
- Follow up

The screenshot shows the website for phn South Western Sydney, an Australian Government Initiative. The header includes a logo, contact information (LOGIN (02) 4632 3000), a search bar, and a navigation menu (ABOUT - HEALTH PROFESSIONALS - COMMUNITY - NEWS - CAREERS - CONTACT -). The main content area is titled "Diabetes Support" and features a grid of 12 resource tiles, each with a title and a representative image:

- manage my weight (Image: healthy food)
- quit smoking (Image: hand holding a cigarette)
- diabetes services (Image: people at a table)
- control my blood sugar (Image: hand using a glucose meter)
- look after my kidney health (Image: back with kidney highlighted)
- look after my feet (Image: foot being examined)
- look after my eyes (Image: close-up of an eye)
- improve my mood (Image: woman in a red dress outdoors)
- get help with my medications (Image: man at a desk)
- drink less alcohol (Image: hand holding a glass of wine)
- diabetes team (Image: smiling couple)
- diabetes terms (Image: calendar)

Qualitative feedback from PNs

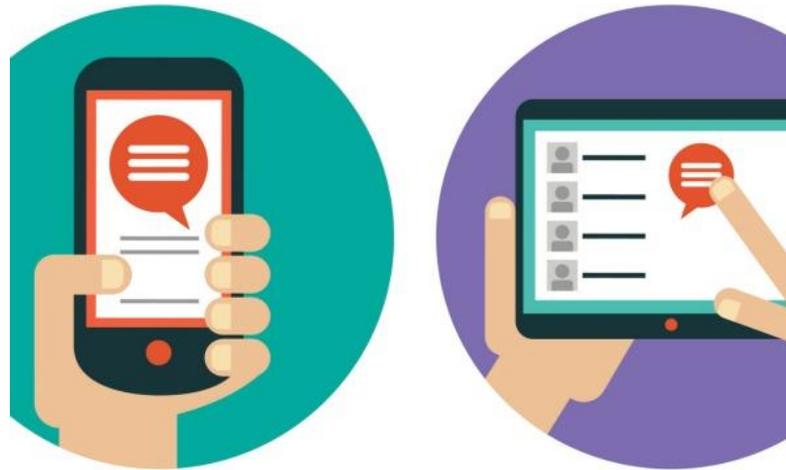
Positive

- Patients say it (the website) is good.
- *Patients report using the website at home when they can*
- *Patient found the site straightforward and easy to use*
- *Patients used some individual pages*
- *Patient is very keen of learning and having up-to-date knowledge*

Negative

- *Patients report being too busy*
- *Patient states that he was having problems navigating through the website*
- *Patient found it too confusing*
- *Patient is not able to use the SWS PHN site as he is not well educated and uses minimum English*
- Patient forgot details.

Can guided tele and m-health interventions reduce the burden on health literacy, engage patients and their families and support improved health literacy?



HELP-GP

Health e-Literacy for Prevention in General Practice



Practice Nurse

- Assess
- Advise
- Agree
- Assist
- Arrange



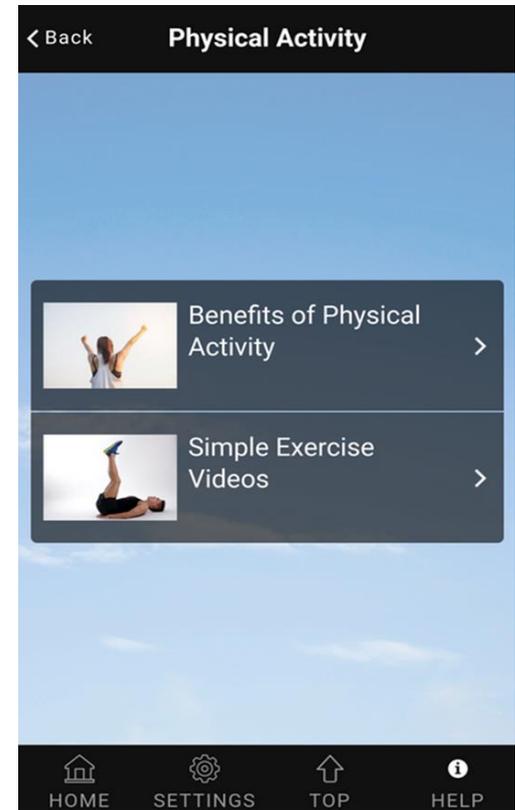
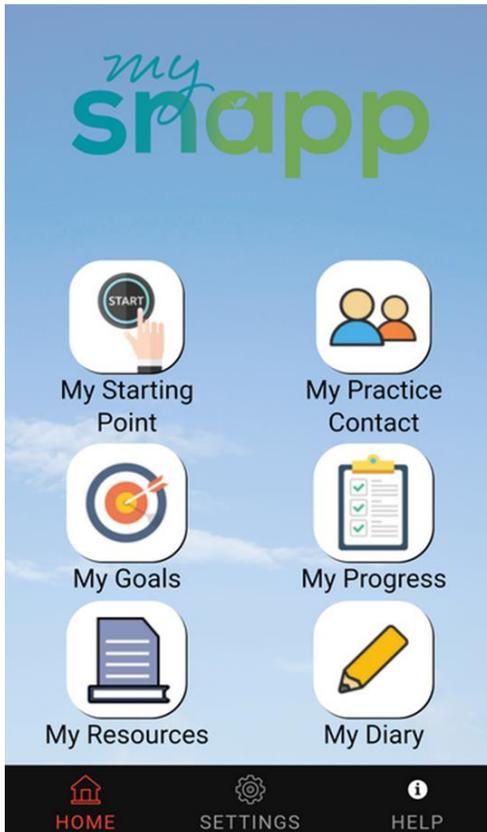
Phone Coach



Lifestyle App
& Text
messages

PN and GP
follow up

my snapp



Conclusions so far

- Lower health literacy is common and associated with risk behaviours and poor outcomes
- Interventions need to focus on both reducing the information demands on patients and supporting the greater health
- GP care usually insufficient to support significant change in health risks.
- Information technology is feasible but needs to be tailored to patients level of health literacy and language and be actively supported by GPs and PNs.

QUESTIONS?