What We Know About Health Literacy

What We Know About... reports are a quick summary of new health communication research and trends of interest to CDC and its partners. They intend to keep health communication and marketing professionals up-to-date on new findings and their implications for public health communication.

Brought to you by the Marketing and Communication Strategy Branch in the Division of Health Communication and Marketing, National Center for Health Marketing, Centers for Disease Control and Prevention (CDC).

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Health Literacy

Everyday, the public receives health-related information that leaves many with unanswered questions.

As public health professionals, we have a responsibility to ensure that the health information and services we design are easy to understand, accessible, and that audiences are able to comprehend and apply our recommendations. Successful health outcomes are achieved when audiences feel empowered to improve their own personal health and that of their communities. This is the cornerstone of health literacy.

What is “Health Literacy”?

The Department of Health and Human Services’ Healthy People 2010 report defined health literacy as “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions”.

Much of the work on health literacy has focused on problems and solutions in the healthcare context, such as communication between healthcare providers and patients, medication management, and informed consent. Health literacy, however, is just as important in public health. After all, the average American spends only one hour a year in the doctor’s office, hospital, or pharmacy. Consumers access and make decisions about the majority of health information and services in their homes and communities.

Therefore, it is important to consider the implications of health literacy when designing health messages, services and programs for the public.

To understand health literacy, it is important to first understand how it relates to literacy:

- Literacy is a set of reading, writing, basic math, speech, and comprehension skills. We need these skills to function on the job and in society everyday.
• When we apply these skills to a health context, such as reading a nutrition label or getting a flu shot, it’s called health literacy. Health literacy is more than being able to read or write. Health literacy is a constellation of skills including listening, analytical, and decision-making skills, and the ability to apply these skills to health situations.

“The biggest barrier is realizing it is not just about reading and writing about health. It is a social issue. We must assume that everyone has some limited health literacy. An estimated 88% of adults—almost all of us—do not have the health literacy skills to proficiently interact with the healthcare system.”

-- Andrew Pleasant, PhD,
Assistant Professor at Rutgers University;
Director of Health Literacy and Communication at the Canyon Ranch Institute

Why is Health Literacy Important?

Studies show that nearly 9 out of 10 adults may lack the skills needed to manage their health and prevent disease (2003 National Assessment of Adult Literacy Study). The problem of limited health literacy has been found to be even greater for older adults, those with limited education, minorities, the poor, and those with limited English proficiency. In its 2004 report, Health Literacy: a Prescription to End Confusion, the Institute of Medicine (IOM) noted that adults with limited health literacy report less knowledge about their medical condition and treatment, worse health status, less understanding and use of preventive services, and a higher rate of hospitalization. Limited health literacy affects people’s ability to:

• Understand instructions on prescription drug bottles and nutrition labels
• Act on health-related news and announcements (e.g., severe weather alerts)
• Share personal and health information with providers
• Manage chronic health conditions
• Understand and act on concepts like preparedness and risks associated with unhealthy behaviors and environmental issues (e.g., vote on an environmental issue like smoking bans)
• Understand how to locate and access affordable health care for themselves and their children.
• Recognize bias in health information reported by the media (e.g. pharmaceutical sponsors)

For health professionals, health literacy requires an organized and systematic approach to ensure our health messages, programs, services, and policies are accessible and easy-to-use by the intended audience. Health professionals and the media often make assumptions about the level of skill and knowledge of the intended audience. Often times, the skills required to complete a task do not match the skills, knowledge, and experiences of the intended audience. While many individual factors contribute to limited health literacy, changing the way health professionals provide health information and services offers the best opportunity for improvement. Poor understanding by the public often comes from:

• Use of technical and medical terminology in public communications (e.g., use of cardiovascular disease instead of heart disease; and use of the term sodium instead of salt)
• Inclusion of statistics or terms that audiences find confusing to explain risk (e.g., high prevalence of stroke among older adults instead of a large number of older adults have had a stroke).
• Relying on an inappropriate mode of communication (e.g., print materials for persons with limited reading skills).
• Focusing on awareness and information rather than action and behavior (e.g., explaining consequences of uncontrolled glucose vs. steps to take to control uncontrolled glucose)
• Limited targeting of information and interventions to diverse cultural preferences and practices (e.g., healthy eating tips would differ for African American and Hispanic groups due to cultural preferences).
Health literacy research dates back to the 1960’s with a significant focus on written materials. The field continues to grow with new areas of interest. Today, leaders in the fields of public health and adult education are shifting the focus from the hospital to the community to improve how people understand and use health information in their daily lives. New evidence-based strategies to address health literacy and public health literacy are emerging from the fields of communication, healthcare, public health, and adult education including:

- Evaluating numeracy as a critical skill for health communication. Numeracy skills are essential for understanding nutrition labels and terms such as prevalence, normal, and risk.
- Exploring the health environment to measure how organizations provide services (i.e., patient navigation, signage) and how health literacy is incorporated into their organizational goals.
- Determining whether health literacy interventions at a younger age will change the health trajectories of adults.
- Studying how health professionals speak and listen to their audience and how they assess comprehension.

Health Literacy is a complex issue with numerous contributing factors. Further research is needed to establish standards of practice for health care providers and communicators.

“Make health literacy a meaningful part of practice. Acknowledge that it is crucial to our work and allow it its rightful place at the table.” — Ruth Parker, MD, Professor of Medicine, Emory University

Ten Tips for Health Marketing and Communication Practitioners

Whether you are designing and delivering public information campaigns, conducting community outreach and education, providing local services such as immunizations or restaurant inspections, and/or issuing warnings or alerts, the following are practical tips for improving health literacy.

1. **Health literacy is a two way street.** In all outreach efforts, aim for shared understanding between you (public health professional) and the public. Don’t assume everyone will understand your messages and/or how to manage their health. For example, if you want to include an illustration in your campaign materials, make sure to test it with your audience to ensure they understand its intended meaning.

2. **Know your audience.** Take an audience-centered approach. Who will do what differently as a result of your program/service? Who can you influence most effectively? What do they care about? What do they struggle with? Take time to learn about your audience and develop materials and programs accordingly. Avoid the one-size-fits-all approach. For example, older adults tend to rely on their health care providers to make medical decisions on their behalf. Therefore, health care providers may be an important audience to consider as a channel for reaching older adults with health information.

3. **Involve your target audience.** When members of the target audience participate in designing and testing communication, outcomes are more successful, including those for people with limited health literacy. Ask for feedback from your intended audience on everything you do from choosing the right words, colors, and visuals for a brochure to piloting a new training program or service.

4. **Don’t stop at rewriting materials.** Health literacy is more than testing readability levels. Assessing whether your audience can actually apply and use your information is the important part. Your audience should be able to demonstrate the skills or explain in their own words (teach-back) what you are asking them to do. For example, if your brochure explains how to assemble an emergency home kit, have the audience show you what they have learned.
5. **Keep it simple.** Present audiences with no more than 3 or 4 main messages. Give specific actions in clear language and recommendations. Skip the ‘nice to know’ details. For example, give specific steps for keeping foods safe. Detailed descriptions of bacteria that cause food-borne illness may not be necessary.

6. **Include resources for additional learning.** It is safe to assume that there are members of your target audience who have limited health literacy. Develop materials with the knowledge that everyone prefers health information that is clear and actionable. Provide a list of resources for those who may want to learn more.

7. **Develop key partnerships.** Identify partners who know your audience. Collaborate with traditional partners; as well as, adult educators, journalists, and other non-traditional partners to help increase the dissemination of health information to the public. Partners can assist with gaining access to communities where issues of trust and fear may exist and offer expertise and knowledge of their communities.

8. **Consider their culture and language. Not ours.** Health professionals have their own culture and language as a result of their training and work environments. It is important to remember that our audiences do not speak our professional jargon and that culture influences how people communicate, understand, and respond to health information.

9. **Evaluate your environment.** Assess how easy it is to access and use your services, programs, and materials. For example, settings with a large number of signs can be intimidating and overwhelming for persons with limited health literacy skills. Consider internal changes to improve access and enhance navigation within your agency.

10. **Put it on your agenda.** Educate yourself and offer to educate senior leaders and staff on the importance and implications of health literacy. Advocate for all staff to participate in health literacy trainings and presentations.

**References**


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