



Help Your Patients Understand Their Health and Health Care

HEALTH LITERACY AND CULTURE

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Purpose of this guide

This guide is intended to show you and your staff how to help patients understand their health and health care so they can manage their health needs and feel comfortable discussing those needs with you.

Using this guide

- 1.** Review this guide in detail with your staff.
- 2.** Practice and reinforce plain language programs and methods, such as teach-back¹, with your office staff. Encourage team accountability.

¹Abrams MA, Rita S, Kurtz-Rossi S, Nielsen G. Unity Point Health. Always Use Teach-back! Toolkit. 2012. www.teachbacktraining.org.

What Is Health Literacy?

Health literacy is the degree to which an individual has the capacity to obtain, communicate, process and understand basic health information and services to make appropriate health decisions.

Why is health literacy important?

Only 12% of adults in the United States have proficient health literacy skills, and 1 in 3 U.S. adults have basic or below basic health literacy skills. Limited health literacy (LHL) affects everyone, regardless of racial and ethnic group, or education level. Those with LHL often experience difficulty with common health tasks, such as following directions on a prescription drug label or deciphering childhood immunization schedules.

LHL is linked to poor health outcomes, including higher rates of hospitalization and less frequent use of preventive services.

Who is at greatest risk for having LHL?

- Older adults.
- Racial and ethnic minorities.
- People with less than a high school degree or GED certificate.
- People with low income levels.
- Non-native English speakers.
- People with compromised health status.

Know your patients

- Up to 80% of patients forget what their doctor tells them as soon as they leave the doctor's office.
- Nearly 50% of what patients do remember is recalled incorrectly.
- Patients may not ask questions because they are ashamed to admit they do not understand.

Signs your patient may have LHL

- Not getting their prescriptions filled or not taking medications as prescribed.
- Consistently arriving late to appointments.
- Returning forms without completing them.
- Requiring several calls between appointments.

Patients with LHL may make statements like:

- "I'll take this home for my family to read."
- "What does this say? I don't understand this."





Clearly Communicate with Your Patients

USE PLAIN LANGUAGE WHEN COMMUNICATING WITH YOUR PATIENT.

Keep it simple

- Avoid jargon.
- Do not use acronyms.
- Avoid technical language. Define it if you must use it.
- Give information in small chunks. Focus on key behaviors or actions that the patient must take.

Reinforce

- Speak slowly and at a normal volume.
- Use body language to support what you are saying.

- Draw pictures or use posters, models or physical demonstrations.
- When using written materials, circle or highlight key information.
- Read written instructions aloud.

Get help

- Use video and audio media as an alternative to written information.
- Use medically trained interpreters.
- Utilize written translation services.

ALWAYS USE THE TEACH-BACK TECHNIQUE.

What is teach-back?

Teach-back is a research-based health literacy intervention that promotes adherence to medications, any type of doctors orders or recommendations, quality of care and patient safety. It is a way to make sure the patient understands what you tell them; it is not a test or quiz of patients.

How do I use teach-back?

1. Ask the patient (or family member) to explain what they need to know or do using their own words.
2. If the patient is not able to teach-back correctly, explain it again and re-check.
3. Once the patient has explained everything to you, reaffirm the directions by stating, “Yes, that’s correct.”

Tips for using teach-back

Ask open-ended questions. Avoid questions that can be answered with a simple yes or no.

Emphasize that the responsibility to explain clearly is on you, the provider.

Use reader-friendly print materials.

Document the patient’s response and use of teach-back.

Teach-back can also help patients with:

Access to care. How to make, reschedule, or cancel an appointment or how to navigate the referral process may be difficult for some patients.

Covered benefits. When patients hear that a service is a covered benefit, they often think that means it is free and comes with no copayment or coinsurance. Sometimes there may be a copayment or coinsurance if a test or procedure is ordered as a result of a preventive visit. Help your patients understand covered benefits by:

- Giving them the procedure or diagnosis code. Have them call us at the telephone number on the back of their member ID card. We can explain their coverage.
- Asking them to read the handout that explains healthcare coverage terms.

Sample teach-back questions

“I want to be sure I explained everything clearly. Can you explain it back to me so I can be sure I did?”

“What will you tell your husband/wife about the changes we made to your medications today?”

“We’ve gone over a lot of information. In your own words, please review with me what we have talked about.”

“I want to make sure that I have answered all of your questions. What questions do you think that your family members may ask of you about your doctor’s visit?”

“Can you show me how you will check your blood sugar levels?”



Culture and Health Literacy are Linked

CULTURE AFFECTS HOW PATIENTS DO THE FOLLOWING:

Select their providers and take their medication.

Some cultures have a range of healing practices and treatment from which to select. Encourage your patients to let you know all of the healing practices and treatments that they may be using.

Check botanical or home-based treatments for contraindications to prescribed medications.

Talk with their providers.

Each culture has its own way of expressing health-related information. For example, depression may be expressed as lethargy or pain may be expressed as a burning sensation.

Involve their families.

The family plays an important role in many cultures. Involve the family in your patients' healthcare if that is important to them.

Make food choices.

Foods that are commonly eaten by certain cultures may need to be restricted because of patients' conditions. Explain to your patients how they can modify their intake of these foods. Show them culturally relevant alternative food choices.

Advocate for their health.

Some cultures feel that speaking up is challenging the doctor and that it is disrespectful. Let your patients know you would like them to speak up and ask you questions.

ACCESS FOR PEOPLE WITH DISABILITIES

We encourage participating providers to maintain reasonable accommodations for members with disabilities, including seniors and persons with disabilities (SPD), in accordance with the Americans with Disabilities Act (ADA) of 1990. Access generally includes ramps, elevators, restroom equipment, designated parking spaces and drinking fountain design.

Reasonable accommodations ensure that:

- Individuals with disabilities can participate in services and programs.
- Facilities are accessible to people with disabilities.
- Services are provided in the most integrated setting appropriate for a person's needs.

Examples of reasonable accommodations can include, but are not limited to:

- Flexible scheduling.
- Modification of policies.
- Interpreter or translation services.
- Accessible methods of communication.
- Safe and appropriate physical access.
- Wheelchair-accessible weight scales, restrooms, and exam rooms; and, if requested or needed, any assistance for individuals to safely transfer out of a wheelchair and onto an exam table.

