Scotland and health literacy

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I’m like that, ‘Oh no, they’re wanting me to write something,’ start panicking and that seems to take over you and sometimes you’re like that, ‘What was they saying there?’ because the anxiety’s took over what’s going on.

(Louise, female, 40s)
<table>
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<tr>
<th>Literacy Levels</th>
<th>Description</th>
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<td>Very poor skills. May not be able to determine the amount of medicine to take</td>
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<tr>
<td>Weak skills. Can only deal with well laid out simple material and tasks that are not complex</td>
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<td>Skills at or above level required for coping with demands of everyday life</td>
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Health literacy

- Definitions include:
  - ability to read, understand and use health information
  - navigation of health system
  - making appropriate decisions

- Measures often consider functional literacy and not wider aspects

- Concept of literacy in a healthcare context
Why does it matter?

- People with low literacy/health literacy have trouble adhering to courses of medicine and understanding labels, they are less likely to engage with health promotional activities such as influenza vaccination and breast screening.

- 49% do not have the ability to understand the instructions for using the National Bowel Cancer Screening kit.

- 43% English working age adults were unable to understand instructions to calculate a childhood paracetamol dose.
Use of health services

People with low literacy have:

- higher risk of hospital admission
  (Baker, David W et al. Am J Public Health 1997;87:1027-1030)

- higher use of emergency department
Managing health problems

People with low literacy more likely to be more unwell, have lower knowledge, not use inhalers properly and more likely to go to an emergency department

(Williams, MV et al. Arch Int Med 1998;158:166-172)

…… less diabetes knowledge, less likely to understand and act on diabetes monitoring, less likely to control their blood glucose and more likely to have eye problems

(Schillinger, D et al. JAMA 2002;288:475-482)
You can’t always tell

- 36% of patients that resident physicians did not think had literacy problems could not read 6 out of 8 common medical words

- Of 58 patients with low literacy, two thirds had not revealed the problem to their spouses and one in five had revealed it to no one
I’ve been to the hospital a few times and they’ve been like ‘Oh you were meant to bring a urine sample’ and I was ‘Oh I didn’t know’ cos I just read the date, the time and the ward.

Half of the signs are gibberish.

I could read the word ‘endoscopy.’ I actually thought an endoscopy was down here [indicating throat].

... you’re saying ’could you show me, cos I’m not too sure’ and they go ‘Oh we’ve already gave you a leaflet’
Big words that doctors seem to make up

Gobbledygook

Big fancy words

24 letter words

Doctor words

Blah blah blah blah blah
Feeling the stigma of low literacy

Research participants reported:

- Hiding literacy problems
- Feigning understanding
- Not asking questions; Not asking for help
- Fearing staff would ‘look down on them’

.... they never explain anything properly. It’s always their own big words and I just say, uh hmm, yeah, okay and I go home and I’m like, ‘I don’t know what that meant.’  
(Megan, female, teens)
Universal precautions recommended

I think it should be done with everybody even though people are… most people can read and write and stuff but if you was to put it across the board, it would look less of a stigma. If everybody’s got it rather than if nobody’s got it, you know (Ralph, male, 30s)

National Health Literacy Action Plan for Scotland to include development of national toolkit
Health literacy in Scotland

Health Literacy in Scotland (HL Scoping report) leads to NHLAG (National Health Literacy Action Group). NHLAG is connected to Clinical lead. NHLAG is part of the National health literacy action plan. The NHS Quality Strategy includes Safe, Effective, and Person-centred health and care programme.
Q. How do you improve people's computer literacy?
What do patients want?

- Don’t assume that people can read or write well
- Use a variety of media to share information
- Oral explanation in simple terms
- Keep forms simple and explain
- Offer to help without labelling
- Don’t put people on the spot
- Send forms out before appointments
Our vision is for Scotland to be a health literate society in which...

We all have the confidence, knowledge and skills to live well on our own terms, with any health condition we have, within an enabling health and social care environment.

**Access**. Services make it easy for us to access help and support.

**Collaboration**. We are enabled to work in partnership with health and social care staff.

**Support for Self-management**. We have the confidence to safely self manage our health.

**Organisations** promote health literacy as a priority in tackling health inequalities.

**Organisations** simplify communication and services so that they are easier for us to engage and use.

**Person-centred communication**. We are able to let our health professionals know what matters most to us.

Our professionals understand and can support us according to our health literacy needs.

The toolkit will contribute to and include elements from all of these.

A National Toolkit.

Activities

Secondary Driver

Primary Driver

We*, includes all the diverse people who live in Scotland. Particular attention should be given to people with additional access and communication needs relating to cognitive ability, English language or functional literacy, to which services should respond in order to support the achievement of health literacy.

Health literacy is for Scotland to be a health literate society in which...
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