UCLA Center for Maximizing Outcomes & Research on Effectiveness- C-MORE

To Measure or Not to Measure? Usability of Common Health Literacy Assessment Tools for Race/Ethnic Populations

C-MORE Health Literacy Seminar Series

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C-MORE Health Literacy Seminars

OBJECTIVES

- Provide a forum for the scholarly exchange of evidence-based, comparative effectiveness research & innovations for defining and enhancing the acquisition of general and disease specific health literacy
- Promote interactive discussion of current & new models and methods for enhancing the usability of health information & health-related surveys
- Inculcate rigorous application of qualitative methods to examine and promote linguistic & cultural appropriateness of health literacy interventions & measures
- Increase awareness of patient-centered and ethno-medical perspectives for implementing health services research addressing health literacy among vulnerable populations (aging, the poor, race/ethnic minorities)

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C-MORE Perspective 1

Primary Objective of Improving Health Literacy?

To enhance a person's capacity to effect behavioral changes that may translate into improved health-related quality-of-life outcomes

Behavioral Change!!

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Health Literacy-Institute of Medicine

Ability to obtain, process, & understand basic health information needed to make appropriate health decisions and follow instructions for treatment

ability to obtain Access

process Navigation understand Knowledge

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Health Literacy-World Health Organization

Achieving a level of <u>knowledge</u>, personal <u>skills</u> and <u>confidence</u> to take action to improve personal and community health by <u>changing personal lifestyles</u> and living conditions

knowledge Learning

personal skills Self-management

confidence Self-efficacy

Behavioral Change

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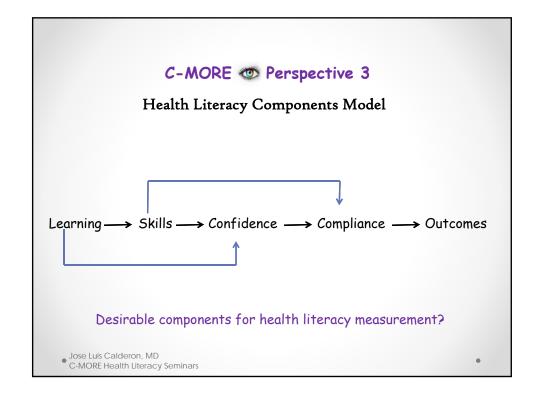
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Between ability to obtain (IOM) and achieving (WHO) health literacy there remains a substantial gap in our understanding about how best to improve access to understandable and culturally relevant health information to enhance health literacy and usable surveys to assess health literacy

Barriers to Mitigating Health Disparities

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Components of Health Literacy based on the IOM & WHO definitions Learning Skills building Confidence Compliance Outcomes



Translating Health Literacy Components to Constructs for Health Literacy Measurement

HL Component

HL Construct

♣ Learning

knowledge

♣ Skills building

self-management

♣ Confidence

self-efficacy

♣ Compliance

behavioral change

♦ Outcomes

HRQoL

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C-MORE Perspective 4 Types of Health Literacy

General Health Literacy

What everyone should know about health in general

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Disease Specific Health Literacy

What a person must know about their specific health condition

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General Health Literacy

Things everyone should know about!

• Chronic diseases: Epidemiology and community level risks

• Primary prevention: Immunization, nutrition, physical activity

Secondary prevention: Screening- mammography, biomarkers

Access to healthcare: Insurance types, uninsured access

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Disease Specific Health Literacy

The degree to which a person's level of knowledge,

self-management skills & confidence permits compliance

with clinical management of disease-specific health

conditions, and effects HRQoL outcomes

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Disease Specific Health Literacy

• Knowledge: Risk factors, signs & symptoms, prevention

• Skills: Self-management, nutrition, physical activity

Confidence

• Compliance Visits, testing, monitoring, specialty-care, treatment

Outcomes general, physical and emotional well-being

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Health Literacy Measures?

Newest Vital Sign	REALM	SAHLSA	S-TOFHLA
NewestVitalSign.org	Rapid Estimate of Adult Literacy in Medicine	Short Assessment of Health Literacy: Spanish-speaking Adults	Short Test of Functional Health Literacy in Adults
Clinical assessment	Clinical and research	Clinical assessment	Research
Review nutrition label. Respond to 6 items	Read 66 words. Scored on correct pronunciation.	Select meaning of 50 words. Scored on number correct	Fill in missing words in 4 numerical items and 2 prose passages
English Yes Spanish Yes	English Yes Spanish Yes	English No Spanish Yes	English Yes Spanish Yes

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The Newest Vital Sign

Uses an Ice Cream Label

- Administered when other vital signs are measured
- ♣ 6 questions are asked; 1 point per question
- Score of o-1 suggests high likelihood (50% or more) of limited literacy
- Score of 2-3 indicates the possibility of limited literacy
- Score of 4-6 almost always indicates adequate literacy

http://www.pfizer.com/files/health/nvs_flipbook_english_final.pdf

NOTE: Verbal introduction is 4 sentences long with 11th grade reading level $$\it ORACY?$$

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The Newest Vital Sign



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REALM-R

- ♣ The REALM-R is a brief screening instrument
- ♣ Assess adult patient's ability to read common medical words.
- ♣ Designed to assist in identifying patients with poor literacy skills.
- ♣ REALM-R is a word recognition test
- ♣ Not a reading comprehension instrument

http://www.ahrq.gov/professionals/quality-patient-safety/pharmhealthlit/realm-r.html

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REALM-R Examir	ner Record	
Patient Name/ Subject #	Date of Birth	
Date	Clinic Examiner	
Reading Level Grade Completed		
fat	fatigue	
flu	directed	
pill	colitis	
allergic	constipation	
jaundice	osteoporosis	
anemia		
	re not scored. We have previously used a score of 6 or less to trisk for poor literacy.	
Score	(6 or less considered a risk for limited literacy)	
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SAHLSA-50

The Short Assessment of Health Literacy for Spanish Adults

- ♣ Based on the REALMs use of single words
- ♣ Not a word recognition test; a word meaning test
- Subject reads a word and chooses between a key (correct) and a distractor (incorrect) word
- 👃 Includes a 'don't know' option

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Short Assessment of Health Literacy for Spanish Adults (SAHLSA-50)

The Short Assessment of Health Literacy for Spanish Adults (SAHLSA-50) is a validated health literacy assessment tool containing 50 items designed to assess a Spanish-speaking adult's ability to read and understand common medical terms. The SAHLSA was based on the Rapid Essimates of Adult Literacy in Medicine (REALM), known as the most easily administered tool for assessing health literacy in English.

Stem	Key	or Distracter	
 próstata 	glándula	circulación	_no se
2. empleo	trabajo	educación	_no se
menstrual	mensual	diario	_no se
4. gripe	_sano	enfermo	_no se
avisar	medir	decir	_no se
6. comidas	cena	paseo	_no se
alcoholismo	_adicción	recreo	_no se
8. grasa	naranja	manteca	_no se
9. asma	respirar	_piel	_no se
10. cafeína	energía	_agua	_no se
11. osteoporosis	_hueso	músculo	_no se
12. depresión	_apetito	_sentimientos	_no se
13. estreñimiento	_bloqueado	_suelto	_no se
14. embarazo	parto	niñez	_no se
15. incesto	_familia	_vecinos	_no se
16. pastilla	_tableta	_galleta	_no se
17 testículo	óvulo	esperma	no se

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Short Test of Functional Health Literacy in Adults S-TOFHLA

Uses the CLOZE Procedure

4 numeracy items

- Take medication every 6 hours
- Normal blood sugar
- Appointment time
- Taking medication on empty stomach

♣ 2 reading passages

Passage A: Preparation for upper GI 4th grade level
Passage B: Medicaid rights and responsibilities 10th grade level

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Your doctor has sent you to h		S-TOFHLS Passage A
	a. stomach	C 1 Offile 1 assage 1
	b. diabetes	
	c. stitches	
	d. germs	
You must have an	stomach when you con	ne for
a. take	,	a. is
b. empty		b. am
c. incest		c. if
d. anemi	a	d. it
The X-ray will from	1 to 3 to do.	
a. take		
b. view	b. brains	
c. talk	c. hours	
d. look	d. diets	
THE DAY BEFORE THE X-	RAY	
For supper have only	snack of fruit	and jelly, with coffee or tea.
a. little	a. t	coes
b. broth	b. 1	hroat
c. attack	c. t	oast
d. nause	a d. 1	thigh
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