Leveling the Challenges of Health Literacy with Ask Me 3
Which health crisis is described by the following?

- It impacts nearly **9 out of 10 adults** living in the United States.
- **Everyone is susceptible** regardless of age, race, education, or income.
- It costs the United States health system as much as **$236 billion** per year.

Limited health literacy is a serious issue facing patients

“Nearly 9 out of 10 US adults have difficulty using the everyday health information that is routinely available in our health care facilities, retail outlets, media and communities.”

Overview

• What is health literacy?
• Limited health literacy
  – Prevalence
  – Levels
  – Impact
• Risk factors and red flags
• What can providers do?
• Using Ask Me 3®
What you need to know about health literacy
What is health literacy?

“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.”

Affordable Care Act, 2010.
Prevalence of limited health literacy

Data from the only population-level study of health literacy skills conducted to date show the prevalence of LHL

- Below Basic: 12%
- Basic: 14%
- Intermediate: 53%
- Proficient: 22%

Levels of health literacy

Below Basic and Basic

– Over a third (36%) of US adults have below basic or basic health literacy\(^1\)

– These patients “may fail to understand critically important warnings on the label of an over-the-counter medication.”\(^2\)

\(^1\) National Assessment of Adult Literacy (NAAL), 2003.
Levels of health literacy

Intermediate

– 53% of US adults have intermediate health literacy \(^1\)
– These patients are able to “perform moderately challenging activities, such as summarizing written text, determining cause and effect and making simple inferences.” \(^2\)
– But they may still “find it difficult to define a medical term from a complex document about an unfamiliar topic.” \(^3\)

\(^1\) National Assessment of Adult Literacy (NAAL), 2003.
\(^2\) CDC, Health Literacy—A Public Health Priority Module.
\(^3\) Koh et al, 2012.
Levels of health literacy

Proficient

– Just 12% of US adults are proficient in health literacy and able to use health information effectively.¹

– These patients can “perform complex activities, such as integrating, synthesizing and analyzing multiple pieces of information.”²

– They “might find the information required to define a medical term by searching through a document.”²

¹ Koh et al, 2012; National Assessment of Adult Literacy (NAAL), 2003.
² CDC, Health Literacy—A Public Health Priority.
Impact of health literacy on health outcomes

LHL is consistently linked to poor health outcomes

- LHL is negatively associated with self-reported health
- Adults with below basic health literacy skills are more likely to report their health as poor (42%)

Impact of health literacy on resource utilization

Patients with LHL have higher resource utilization

– “Have higher rates of hospitalization, emergency care visits and lower rates of flu immunizations”¹
– “Experience more preventable hospital visits and admissions”²
– “Have higher medical costs and use an inefficient mix of services”³

¹ CDC, Health Literacy—A Public Health Priority; NNLM, Health Literacy, 2013.
² HRSA, Effective Health Care Communications Course.
Impact of health literacy on comprehension

Research has linked LHL to poor comprehension

– Misunderstanding prescription medication instructions
– Greater likelihood of taking medications incorrectly
– Poor comprehension of nutrition labels
– Poor understanding of preventative care information

Benjamin, 2010.
Comprehension by patients

Proportion of adults aged 18 and over who reported that their health care providers always explained things so they could understand

Healthy People 2020 (citing Medical Expenditure Panel Survey data), 2013.
Psychological impact of limited health literacy

- Patients with LHL are often embarrassed and feel a “sense of shame.”\(^1\)
- Patients go to great lengths to conceal their LHL.\(^1\)
- Most patients have never shared their LHL struggles with anyone, even family members.\(^2\)

\(^1\) HRSA, Effective Health Care Communications Course; National Action Plan to Improve Health Literacy, 2010.
\(^2\) Johnson et al, 2013.
Coping mechanisms

Patients with LHL employ various coping mechanisms, including:

- Making excuses to avoid reading health information (e.g., saying “I forgot my glasses.”)\(^1\)
- Postponing decision making (e.g., saying “I will read this when I get home.”)\(^2\)

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\(^1\) HRSA, Effective Health Care Communications Course.

\(^2\) Johnson et al, 2013.
Identifying patients with limited health literacy

• Often difficult to identify patients with LHL
• Know what to watch for to identify patients who may have LHL
  – Risk factors
  – Red flags

HRSA, Effective Health Care Communications Course.
Recognize at-risk populations

The following populations are most likely to experience LHL:

- Elderly (over the age of 65)
- Limited education
- Low incomes
- Non-native speakers of English
- Racial and ethnic groups other than White
- Recent refugees and immigrants
- Adults with any type of disability, difficulty, or illness

Recognize at-risk populations

Minority groups and lower socioeconomic groups are disproportionately affected by LHL

<table>
<thead>
<tr>
<th>Group</th>
<th>Proficient</th>
<th>Intermediate</th>
<th>Basic</th>
<th>Below Basic</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>14%</td>
<td>58%</td>
<td>19%</td>
<td>9%</td>
</tr>
<tr>
<td>Black</td>
<td>2%</td>
<td>41%</td>
<td>24%</td>
<td>2%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>4%</td>
<td>31%</td>
<td>25%</td>
<td>4%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>18%</td>
<td>52%</td>
<td>18%</td>
<td>7%</td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>7%</td>
<td>45%</td>
<td>23%</td>
<td>2%</td>
</tr>
<tr>
<td>Multiracial</td>
<td>3%</td>
<td>59%</td>
<td>28%</td>
<td>9%</td>
</tr>
</tbody>
</table>

National Assessment of Adult Literacy (NAAL), 2003.
Watch for red flag behaviors

Patients with LHL may exhibit the following behaviors:

- Fail to complete or inaccurately complete registration forms
- Be unable to describe their medication regimen
- Experience “difficulty in explaining medical concerns”
- Be unable to “articulate symptoms or time course of illness”
- Not have a written agenda for their visit

HRSA, Effective Health Care Communications Course.
Listen for red flag responses

Patients with LHL may offer these responses to questions about their medication regimens:

– Unable to name medications
– Unable to explain a medication’s purpose
– Unable to explain timing of medication administration

HRSA, Effective Health Care Communications Course.
Avoid stereotyping

*Remember, most adults struggle with LHL at some point in their lives.*

Adopt universal precautions

- Absence of cues should not be assumed to mean adequate health literacy
- Adopt universal precautions
  - Use clear communication strategies with all patients, regardless of their apparent health literacy skills

HRSA, Effective Health Care Communications Course.
Effective Solutions for Clear Health Communications
Clear communication is key

A provider's communication skills can directly influence a patient's health literacy and comprehension.

HRSA, Effective Health Care Communications Course.
What can providers do?

- Slow down
- Limit, but repeat, information at every visit
- Avoid medical jargon
- Use illustrations to explain important concepts
- Use easy-to-read written materials
- Make visits interactive
- Use “teach-back” to gauge comprehension

Slow down

Speak slowly

– Rapid speech may hinder patients’ comprehension of the information shared, especially for elderly patients.

– Patients with LHL are less likely to ask providers to slow down or repeat information than other patients.

HRSA, Effective Health Care Communications Course.
Roter, 2011.
Limit the amount of information, and repeat it

• Patients have trouble remembering information shared during medical visits
  – There appears to be an “inverse relationship” between the quantity of information shared and how much a patient is able to recall.¹

• To encourage retention of critical information, limit the amount shared and reinforce it
  – Focus on the top 1 or 2 key points that your patient needs to know.²

¹ Roter, 2011.
² HRSA, Effective Health Care Communications Course.
Avoid medical jargon

Strive to use simple, non-medical terms when conversing with patients

Instead of using this word

<table>
<thead>
<tr>
<th>Medical Jargon</th>
<th>Simple, Non-Medical Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benign</td>
<td>Harmless</td>
</tr>
<tr>
<td>Cardiac</td>
<td>Heart</td>
</tr>
<tr>
<td>Chronic</td>
<td>Happens again and again; does not end</td>
</tr>
<tr>
<td>Edema</td>
<td>Swelling; build-up of fluid</td>
</tr>
<tr>
<td>Fatigue</td>
<td>Tired</td>
</tr>
<tr>
<td>Screening</td>
<td>Test</td>
</tr>
<tr>
<td>Intake</td>
<td>What you eat or drink</td>
</tr>
<tr>
<td>Generic</td>
<td>Not a brand name</td>
</tr>
<tr>
<td>Adverse events</td>
<td>Side effects</td>
</tr>
</tbody>
</table>

Consider saying this

Roter, 2011.
HRSA, Effective Health Care Communications Course.
Use illustrations to explain important concepts

Pictures and graphs can reinforce important concepts and recommended actions

– Patients remember visual images better than words or letters.¹

– The use of graphic illustrations can help patients understand and retain information.²

¹ HRSA, Effective Health Care Communications Course.
Use easy-to-read written materials

• All patients, not just patients with LHL, favor simple, straightforward materials

• Well-designed materials should
  – Present information using bulleted lists
  – Focus on only a few key points
  – Leverage headings and subheadings to separate blocks of information
  – Use simple terms; avoid medical jargon
  – Use active voice

1 CDC, Health Literacy—A Public Health Priority Module.
Make visits interactive

• Encourage patients to ask questions
  – Use Ask Me 3

• Rather than leaving questions to the end of a visit, welcome questions throughout

Roter, 2011.
Use “teach-back” to gauge comprehension

• Check for patient understanding using the “teach-back” method
  – Ask the patient to repeat – or “teach back” – the information shared to gauge comprehension.¹

• If patients cannot explain what they have been told, assume that you have not clearly communicated the information.²
  – Commence a new explanation of the topic
  – Ask the patient a second time to “teach-back” the information

¹ Joint Commission, 2007.
² HRSA, Effective Health Care Communications Course.
Use “teach-back” to gauge comprehension

Instead of saying

“Does this make sense?”

Consider saying instead

“Please explain to me how you will take your medication.”

Roter, 2011.
HRSA, Effective Health Care Communications Course.
It only takes a minute!

Estimates indicate that it only takes one minute to put “teach-back” into practice.

HRSA, Effective Health Care Communications Course.
Use Ask Me 3 to Promote Clear Health Communication
What is Ask Me 3?

Ask Me 3 is an educational program promoting three simple, but essential, questions for every health care interaction:

- **What is my main problem?**
- **What do I need to do?**
- **Why is it important for me to do this?**

**Context**

**Diagnosis**

**Treatment**
Ask Me 3 background

• Created by the Partnership for Clear Health Communication at the Pfizer pharmaceutical company
  – Developed by health literacy experts
  – Tested and validated

• NPSF acquired Ask Me 3 under a licensing agreement with Pfizer in 2007
Ask Me 3 benefits

• Assists patients in becoming more involved in their health care
• Organizes the provider-patient conversation
• Focuses discussion on the answers to key questions
• Ensures that patients acquire the information they need to take care of their health
Ask Me 3 brochure

- Provides an overview of the Ask Me 3 program
- Instructs patients to ask their health care providers the three main program questions
- 8-page and 2-page versions available
Ask Me 3 poster

• Instructs patients to ask their health care providers the three main program questions
Ask Me 3 website

- Provides an overview of the Ask Me 3 program and available resources
- Includes a video featuring a patient speaking to his physician about his condition using the Ask Me 3 questions
Conclusion

• Everyone is susceptible to low health literacy
• Low health literacy has been linked to poor health outcomes, high resource utilization, and poor comprehension
• You can help by identifying red flag behaviors and
  – Speaking slowly
  – Limiting the amount of information you give patients, and repeating it
  – Avoiding medical jargon
  – Using illustrations to explain important concepts
  – Making visits interactive by using “teach-back” and Ask Me 3
References


References continued


Questions?

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