Health Literacy in Canada: A Primer for Students

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Instructor’s Manual

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Chapter 1: Why a Book on Health Literacy from a Canadian Perspective?

Suggested In-Class Activities

1. Understanding Health Literacy

Part One:
Divide students into small groups. Have groups discuss health questions that have come up for them in the past few weeks/months.

Part Two:
Next, have groups discuss the challenges faced by those who cannot access, read, or understand health information at the basic level.

2. Defining Health Literacy

Part One:
Ask students to spend 5 minutes writing down a definition of health literacy.

Part Two:
Next, regroup as a class, ask students to share their definitions, and write down key words on the board as they do so.

Part Three:
Discuss the various challenges students may have experienced when defining health literacy and some of the reasons for variation in definitions (see pages 2–3).

Part Four:
Finally, outline the standard definition that you will use for the remainder of the course.

3. The Importance of Health Literacy

Part One:
For homework, ask students to find a recent example from the media (newspaper, television, magazine) that illustrates the importance of health literacy in our society. Students should bring their example with them to class for participation points.

Part Two:
Next, divide students into small groups to share their examples. Each group should then select one example to present to the class.

Part Three:
Groups should summarize the example and address how it represents the importance of health literacy.

**Suggested Assignments**

1. **Critical Thinking Essays**
   
   Provide students with a statement or question that relates to the chapter’s subject matter. Ask students to spend 10–15 minutes writing a response essay.

   **Chapter 1 Sample Topics:**
   
   - Discuss the ways in which health literacy is a global problem.
   - Why is health literacy considered an urgent public health issue?
   - According to Chapter 1, how might immigration trends in Canada influence health literacy?
   - Define social justice, equity, and human rights in the context of health literacy.

2. **Take-Home Assignments**
   
   A. In Chapter 1, Hoffman-Goetz, Donelle, and Ahmed state that “there are many research studies showing that low literacy (and low health literacy) is linked to poor health outcomes” (p. 4). Explore the literature and select five examples of peer-reviewed sources that illustrate this point. You should provide an annotated bibliography of the five sources in which you provide a summary and also highlight the ways in which each resource illustrates that low literacy is linked to poor health outcomes.
   
   B. In Chapter 1, Hoffman-Goetz, Donelle, and Ahmed ask you to reflect on the effects that low health literacy has on health (p. 7). The authors ask you to select one factor and think about a province-wide public health strategy to improve health literacy. With this reflection question in mind, create a brochure that focuses on one direct or indirect effect that low health literacy has on health. The brochure should be designed to promote awareness of the effect and to highlight ways that Canadian society can improve that effect through health literacy. Be creative and thorough—incorporate statistics, published studies, images, and pertinent websites.
   
   C. Select a key Canadian association, organization, or initiative that has had an impact on the health literacy movement. Write a 2–3 page paper that describes your selection; explains why you chose the association, organization, or initiative; provides a summary of the association, organization, or initiative; and highlights how that association, organization, or initiative has impacted health literacy in Canada (positively or negatively).

   Organizations and initiatives highlighted in your text that you may select include:
- The Canadian Public Health Association
  - The National Literacy and Health Program
- Ontario Public Health Association
- Frontier College
- The Centre for Literacy
- Canadian Council on Learning
- Canadian libraries
- Health Literacy Network
- The Healthy Aboriginal Network
- The Healthy Living Performance Standards for schools in British Columbia
- The Literacy Audit Kit in Alberta
- The “It’s Safe to Ask” project and the Literacy and Health project in Manitoba
- The To Be Born Equal—To Grow to Health program in Quebec
- Health Literacy in Rural Nova Scotia Research Project
- Discussion paper for Inuit communities on literacy and health in Nunavut
- Hispanic Health Literacy Video Project and Farsi-speaking TV series on health in Vancouver
- Health and Literacy Committee in Prince Albert, Saskatchewan
- Diabetes Management project (Ottawa)
- Literacy and Health project (North Bay)
- Patient Education project (Hamilton)
- “Going to the Doctor” resource prepared by Yukon Learn
- “It’s Your Health” resource prepared through the Nova Scotia Heart Health Partnership
- Manitoba Cervical Cancer Screening Program
Chapter 1:
Why a Book on Health Literacy from a Canadian Perspective?
Outline

- What is health literacy?
- Health literacy as a public health issue
- Effects of health literacy
- Canadian context
- Social justice perspective
Health Literacy Defined

Health literacy is a complex and multi-faceted construct.

World Health Organization:
Health literacy is defined as “the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand and use information in ways which promote and maintain good health” (as cited in Nutbeam, 2000, p. 264).

Health literacy is linked to empowerment.
Health Literacy Defined

**Canadian Council on Learning and the Canadian Expert Panel on Health:**

- Health literacy is defined as one’s “ability to access, understand, evaluate and communicate information as a way to promote, maintain and improve health in a variety of settings across the life-course” (Rootman & Gordon-El-Bihbety, 2008, p. 11)
**Health Literacy Defined**

<table>
<thead>
<tr>
<th>The Calgary Charter on Health Literacy:</th>
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<tr>
<td>• A health literate person has skills that help an individual utilize information to promote good health, including the ability to:</td>
</tr>
<tr>
<td>• Read</td>
</tr>
<tr>
<td>• Write</td>
</tr>
<tr>
<td>• Communicate</td>
</tr>
<tr>
<td>• Critically analyze</td>
</tr>
<tr>
<td>• Speak</td>
</tr>
<tr>
<td>• Calculate</td>
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<tr>
<td>• Interact</td>
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<tr>
<td>• Listen</td>
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</table>
Health Literacy Is a Public Health Issue

Health literacy can serve to empower individuals to actively, confidently, and fully participate in multiple life roles.

The transformative power of health literacy can be seen in links to citizen engagement in civil society to issues related to health.
Health Literacy Is Critical to Health, Social and Economic Development

Kickbusch (2004) identified several factors that indicate why the impact of health literacy is a shared concern:

- Citizens’ expectations and goals related to health information and health care
- An aging society
- An expansive health care system that requires complex decision-making by patients
- Increased marketing of health information and products, using both traditional and new media channels
Kickbusch (2004) identified several factors that indicate a shared concern about the impact of health literacy:

- The free movement of persons, goods, and services, giving rise to culturally diverse perceptions and practices of health
- Low levels of health literacy affecting the health care system by limited use of preventive services
- Knowledge of disease management
Social and Health Implications of Health Literacy

Individuals with limited literacy may find it difficult to adequately manage their own health and/or the health of their family members.

Limited health literacy can have negative effects on one’s physiological well-being and self-concept, e.g., feelings of powerlessness.
# Table 1.1 Direct and Indirect Effects of Low Literacy on Health

<table>
<thead>
<tr>
<th>Type of Effect on Health</th>
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<tbody>
<tr>
<td>Direct</td>
<td>Difficulty finding and understanding health information</td>
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<tr>
<td></td>
<td>Having more health-related problems</td>
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<tr>
<td></td>
<td>Making more medication errors</td>
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<td></td>
<td>Having more accidents in the workplace</td>
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<tr>
<td>Indirect</td>
<td>Occupying lower paying jobs and/or being more vulnerable when things go wrong</td>
</tr>
<tr>
<td></td>
<td>Feeling more stress and being more vulnerable when things go wrong</td>
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<tr>
<td></td>
<td>Practicing unhealthy behaviours, such as smoking and getting less exercise</td>
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<tr>
<td></td>
<td>Paying more visits to the hospital and staying in the hospital longer</td>
</tr>
<tr>
<td></td>
<td>Facing more difficulties in navigating the health care system</td>
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</tbody>
</table>
If you were charged with recommending a province-wide public health strategy to improve health literacy, which of the indirect and direct effects would you focus on? Why?
In Canada, health literacy is shaped by:

- Cultural and ethnic composition
- Minority language rights and culture
- Emphasis on social justice and health equity
- Internet use and broadband penetration
- Immigration patterns
Immigration Impacts on Health Literacy

Language

- In 2006:
  - 20% of the Canadian population was born outside of Canada
  - 70.2% of this population’s first language was neither English nor French

Culture

- Culturally bound beliefs, values, preferences, and linguistic frame provide experiential context

Differences in provincial and territorial health care systems impact health information and health resources for immigrants to Canada.
Figure 1.1: Percentage of Immigrants to Canada by Region of Birth, 1971–2006

Note: “Other” includes Greenland, St. Pierre and Miquelon, the category “Other country,” and a small number of immigrants who were born in Canada.
Canada is recognized as an international leader in the field of health literacy.
The Canadian Public Health Association (CPHA)

Offers:

- Directory of plain language health information
- Plain language and clear verbal communication training manual for health professionals
- Easy-to-use guide to work with low-literacy youth and seniors
The Canadian Public Health Association (CPHA)

Expert Panel on Health Literacy formed in 2006 to:

- Assess nature and scope of health literacy levels in Canada
- Identify barriers to health literacy
- Assess effectiveness of existing interventions
- Evaluate implications of evidence for policies and programs
National Literacy and Health Program (NLHP)

Established in 1994 by CPHA

Formed partnerships with national health associations to:

- Raise awareness among health professionals about the links between literacy and health
- Improve health services for consumers with literacy difficulties
The Literacy and Health Project, Phase One: Making the World Healthier and Safer for People Who Can’t Read

Sponsored by the Ontario Public Health Association and Frontier College

Demonstrates the literacy and health connection, fosters partnerships between literacy and health organizations, creates clearing house on literacy and health information
The Centre for Literacy

- Offers special collections on literacy and related topics in Canada
- Holds workshops, prints newsletters, conducts research
- Created a health literacy curriculum module for university nursing students, and a training model for health care providers
First Canadian Conference on Literacy and Health

Ottawa, 2000—Addressed problem of access and explored challenges of low literacy skills

Five themes:

- Making health services and health information easy to use for all Canadians
- Looking for ways to improve training of health professionals
- Learning more through research
- Learning from learners
- Building literacy and health partnerships
Canadian Council on Learning (CCL)

Independent, non-profit corporation

Promotes and supports evidence-based research to improve learning across all walks of life in Canada

2007 and 2008 *Health Literacy in Canada* reports stressed the importance of health literacy as a public health goal in Canada
Canadian Librarians and Health Literacy

Library initiatives to promote health literacy

- Listing health literacy outreach as one of the job responsibilities for librarians
- Collaborating with educational institutions and non-profit, community, and public health organizations
  - Example: Irving K. Barber Learning Centre in British Columbia partnering with telecommunication companies to develop online tools supporting health literacy
Table 1.2: Timeline of Health Literacy Activities in Canada

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
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<tr>
<td>Growing interest in literacy in the late 1980s</td>
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<td>OPHA/Frontier College Literacy and Health project (1989–1993)</td>
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<tr>
<td>National Literacy and Health Program (1994–present); CPHA Clear Language Service (1997–present)</td>
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<tr>
<td>National conferences on Literacy and Health (2000, 2004)</td>
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<tr>
<td>CPHA Expert Panel on Health Literacy (Rootman &amp; Gordon-El-Bihbety, 2008)</td>
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<tr>
<td>In-depth analysis of National Health Literacy data (CCL, 2007b, 2008a)</td>
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<td>International health literacy experts, co-hosted by The Centre for Literacy of Quebec and the Calgary Institute on Health Literacy Curricula (2008), create the Calgary Charter on Health Literacy (2009)</td>
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<tr>
<td>Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada (PHAC–British Columbia) National Health Literacy Workshop (2011)</td>
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<tr>
<td>International Health Literacy Workshop hosted by Public Health Agency of Canada (PHAC–British Columbia) (2012)</td>
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<tr>
<td>International Roundtable on Health Literacy hosted by University of British Columbia (UBC) Institute for Heart and Lung Health and Peter Wall Institute (2013)</td>
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Expert Panel on Health Literacy takes a social justice perspective

Reduced inequities in health information access can translate into better informed health decision making and health care use.

Responsibility of individuals and society in enhancing health literacy is shared.

Health literacy is an important determinant of health, a fundamental human right, and a foundation of social justice.

Health inequities

Differences in health that are unnecessary, avoidable, unfair, and unjust (Whitehead 1992).
Health literacy is a person’s ability to access, understand, evaluate, and communicate information in a way to promote, maintain, and improve health in a variety of settings across the life course.

Low health literacy is associated with poor health outcomes.

Canada is a leader in health literacy initiatives.

Health literacy must be seen as both a public health and a social justice issue.