Improving Coherence Between Health Literacy Frameworks and Measures

Session Moderator:

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Session Goals

- To raise awareness about the strengths and limitations of currently available measures to examine an *individual's* level of health literacy, including variation in performance across instruments

- To discuss the extent to which conceptual frameworks for health literacy correspond with the instruments

- To develop a research agenda to advance the conceptualization and measurement of health literacy

Panelists

- **Jolie Haun, PhD, EdS**
  Veteran's Administration, HSR&D and RR&D Center of Excellence, James A. Haley VA Hospital and University of South Florida, College of Public Health

- **Melissa Valerio, PhD, MPH**
  Department of Health Promotion and Behavioral Sciences, School of Public Health, University of Texas

- **Kristine Sørensen, PhD Fellow**
  Department of International Health
  Research School of Primary Care and Public Health
  Maastricht University, The Netherlands

Definitions of Health Literacy

More than 25 different definitions of health literacy

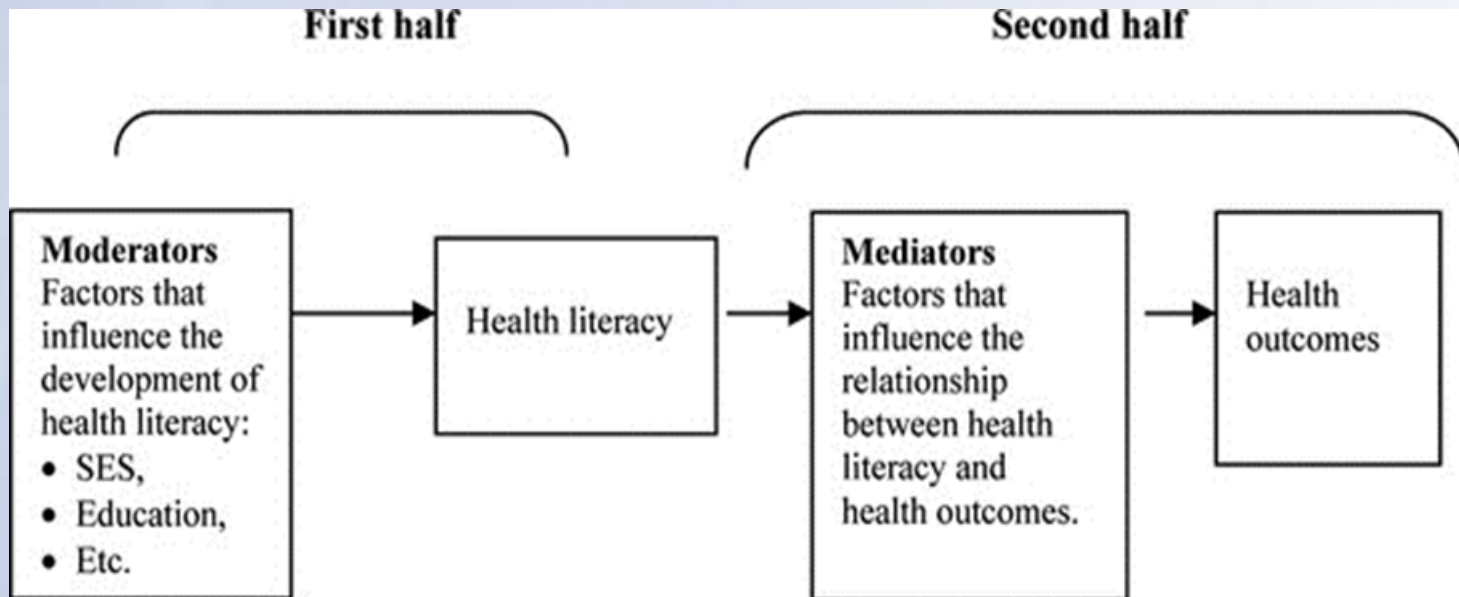| Source	Definition
WHO (1998), Nutbeam (1998)	The cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand, and use information in ways which promote and maintain good health
Ratzan & Parker (2000), IOM (2004), and Healthy People 2010	The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions
American Medical Association (AMA) Ad Hoc Committee on Health Literacy (1999)	The constellation of skills, including the ability to perform basic reading and numerical tasks required to function in the health care environment, such as the ability to read and comprehend prescription bottles, appointment slips, and other essential health-related materials

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Variations in Definitions of Health Literacy

Health Literacy Conceptual Frameworks

Nearly a dozen conceptual frameworks
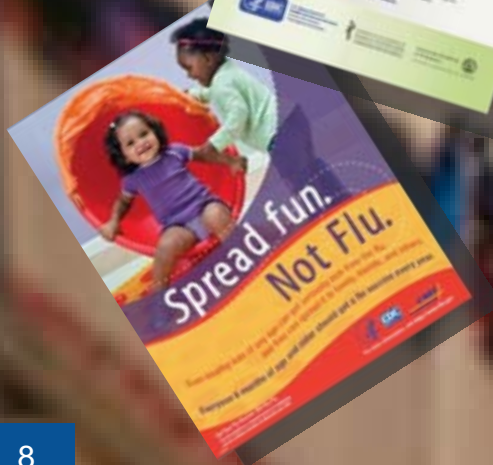
Source	Focus of framework
Baker (2006)	Identifies moderators and mediators; emphasizes role of prior knowledge
Lee et al. (2004)	Focuses on intermediate factors through which HL affects outcomes
Mancuso (2008)	Focuses on interaction between 6 competencies and 3 attributes of HL
Manganello (2008)	Focuses on adolescents; adds media literacy to skills related to HL
Nutbeam (2000)	Identifies 3 progressive levels of HL: basic/functional, communicative/interactive, and critical literacy
Paasche-Orlow (2007)	Causal model focusing on pathways between HL and outcomes
Rootman et al. (2002)	Focuses on the broader concept of literacy (general, health, and other)
Schillinger (2001)	Focuses on association between functional HL and chronic disease
Sørensen et al. (2012)	Based on review of existing models; provides broad perspective of HL
Speros (2005)	Uses concept analysis to clarify attributes, antecedents, and consequences of HL
von Wagner et al. (2008)	Uses constructs from social cognition models to integrate HL into a wider framework of health actions

Two Categories of Conceptual Frameworks
(Squiers et al, 2012)

First half | Second half

Moderators Factors that influence the development of health literacy:
- SES,
- Education,
- Etc.

→ Health literacy →

Mediators Factors that influence the relationship between health literacy and health outcomes.

→ Health outcomes

Variation in Health Literacy Frameworks

No one health literacy conceptual framework or measure is best.

Each brings its own strengths and perspective.

Food for Thought

How do we move toward some consensus on conceptualizing and operationalizing health literacy?

- Where does health literacy begin and end?

- What constructs belong in the frameworks?

- Do we need more new measures? What kind? How should measures vary when used in clinical versus non-clinical settings?

- How will we know when we've got it right? What should the end point or outcomes be?

- What kind of measurement research is needed given where we are now?

Research Agenda for Health Literacy Measurement (1)

Continue '3-tiered' approach to measuring and improving health literacy

- At the individual/person level

- At the health information materials level

- At the health care system level

(while making health care tasks and situations less demanding and the materials easier to understand).

Research Agenda for Health Literacy Measurement (2)

Focus on advancing conceptual frameworks first

▪Integrate existing definitions and frameworks.

▪Think critically about what domains and concepts belong in the framework and how to operationalize them.

▪Be more specific about the variables in the models, including the outcomes. State your hypothesis about the relationships between the variables *a priori* report and what we find.

▪Look at the full pathway between predisposing variables to health outcomes. Consider using health literacy as an intervening variable (mediator) between individual factors and health outcomes. Sometimes health literacy can/should be the outcome.

Research Agenda for Health Literacy Measurement (3)

Continue with measure development but…

- Base it on what we have learned already.

- Take a population level approach.

- Use large, representative samples and multiple modes of data collection when undertaking development studies.

- Critically evaluate reliability and validity.

- Prioritize the development of performance-based measures.

- Are there priority populations or health conditions to focus on when developing measures?

Research Agenda for Health Literacy Measurement (4)

Empirically test frameworks and measures using sound research methods.

▪Develop or refine interventions that can be used to test the frameworks.

▪Field more than one measure of health literacy in each study and compare the results so we can learn more about how they each perform.

▪Work toward the development of a gold standard (or a few gold standards).

Research Agenda for Health Literacy Measurement (5)

Advocate, disseminate, and implement

- Advocate for ongoing, national level surveillance, as well as surveillance in your own communities and clinical care settings.

- Make measures publicly available

- Create an inventory of measures that is accessible to all. Catalogue characteristics of the measures and performance data.

- Educate your non-health literacy colleagues about the importance of measuring health literacy and the challenges the field currently faces.