Using national health literacy survey data as a basis for national intervention strategy for chronic disease prevention and treatment, using a systems approach

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Health Literacy as a Vehicle for Empowerment – How?

2 Strategic Options for Intervention:

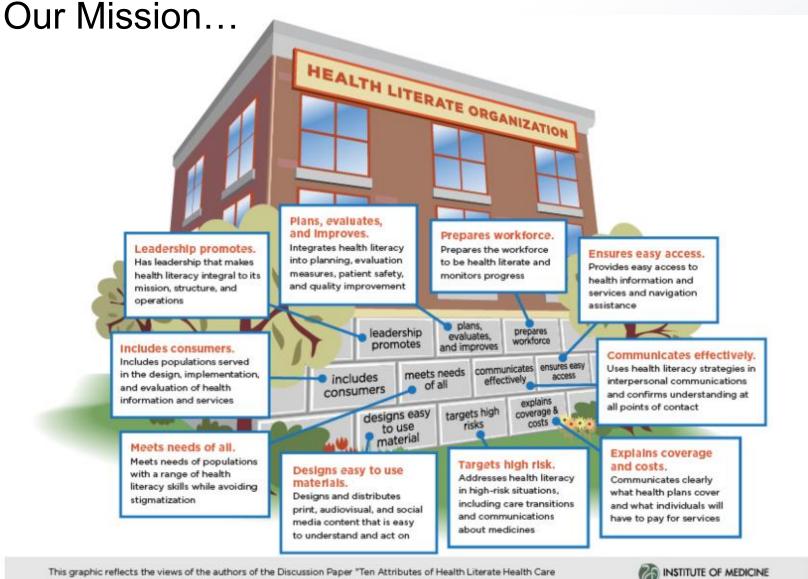
- Improving levels of health literacy

And

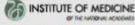
 Adapting action/ intervention to health literacy needs

Introduction

- The evidence base for health literacy: low health literacy is significantly associated with poorer health status, less adherence to medical recommendations, less use of preventive services, and early mortality.
- Most of the research has focused on functional health literacy, and has been conducted among special populations.
- National data, based on measuring health literacy according to the broad sense of the concept, is essential for health promotion planning, particularly when developing health literate organizations.



Organizations" and not necessarily of the authors' organizations or of the IOM. The paper has not been subjected to the review procedures of the IOM and is not a report of the IOM or of the National Research Council.



Advising the nation - Improving health.

Components of Health Literate Organization

- Ensures easy access to health information
- Prepares workforce
- Targets high risk situations
- Leadership promotes
- Communicates effectively
- Designs easy to use materials
- Meets needs of all avoiding stigmatization
- Explains coverage and costs
- Includes consumers
- Plans, evaluates and improves

Directions!

Therefore, we need to know where we stand regarding the public we are serving:

- Organizational Surveys
 - National Surveys

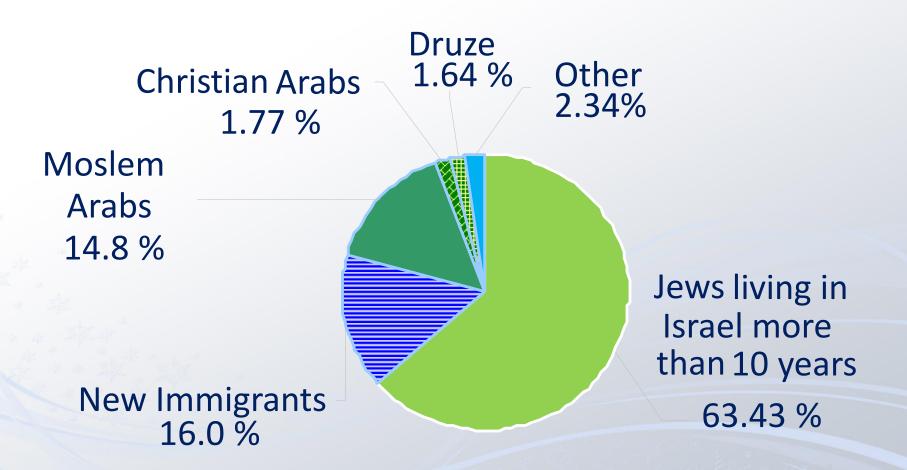
Clalit Health Services

- 4.5 million members; 54% of Israel's population
- Over 40,000 workers
- 1,400 primary and specialized care community clinics
- 14 major teaching hospitals: 8 general, 2 psychiatric, 1 pediatric, 2 geriatric, 1 rehabilitation
- 416 pharmacies
- 40 diagnostic imaging centers
- 67 laboratory centers
- 83 physiotherapy units
- 30 occupational therapy units
- 87 diet & nutrition consultation units
- 22 mental health clinics, 70 dental clinics
- 20 alternative medicine clinics

4 HPH and more on the way

2nd largest non-government health care organization in the world

Israel - A Country of Cultures



Health Literate Organizations – Targets High Risk Populations

National Strategy for Health Literacy and Chronic Illness - Overview

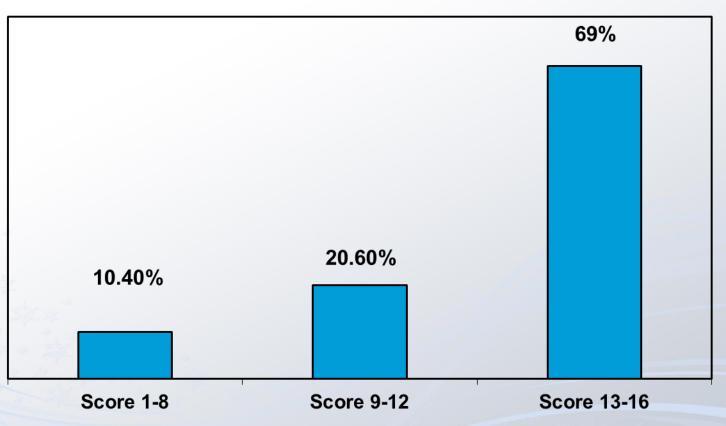
- Patient Ed Kits & Internet
- In-service Training for Primary Care Teams
- Lifestyle and Self-Management Workshops
- Tailored Programs for Special Populations

Goldfracht M, Levin D, Peled O, Poraz I, Stern E, Brami JC, Matz E, Fruman A, Weiss D, Lieberman N. Dreiher J. (2011) Twelve-year follow-up of a population-based primary care diabetes program in Israel. International Journal of Quality in Healthcare. August 2011.

The Israel Health Literacy Study

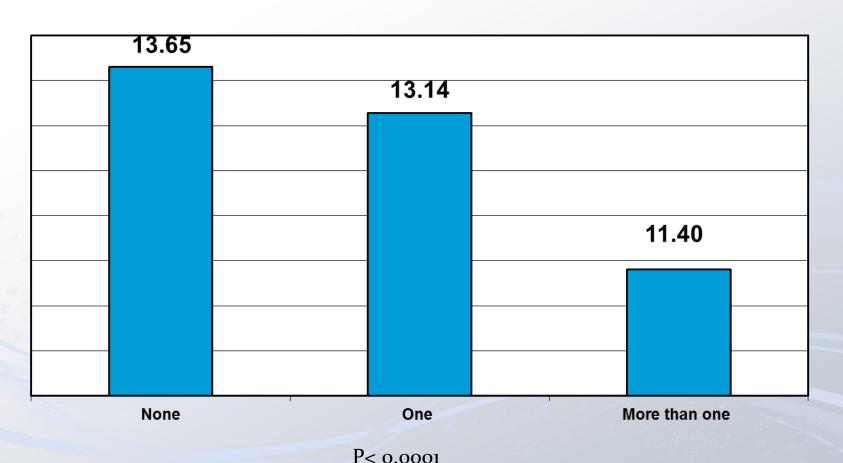
- National survey: close collaboration with HLS-Euro
- Objective: To assess the level of health literacy in the Israeli population and to study the association between health literacy, social determinants, and association with measure of healthcare service use, health behavior, and reported health.
- Methodology: Face-to-face home interviews among a representative sample of 600
- Four languages: Hebrew, Arabic, Russian & Amaharic
- Instrument validated via focus groups with key informants

Distribution of HLS-ISR scores

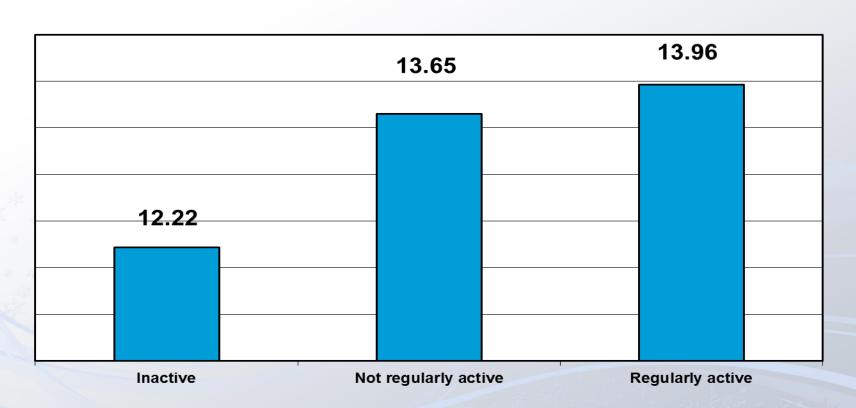


$$= \overline{18}.1 \pm 3.26 \text{ SD}$$

HLS-ISR by prevalence of chronic conditions: low scores = more chronic diseases

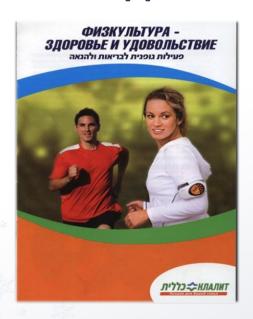


HLS-ISR by frequency of physical activity



Health Literate Organizations - Designs easy to use materials

Support Through Easy- to - Use Materials

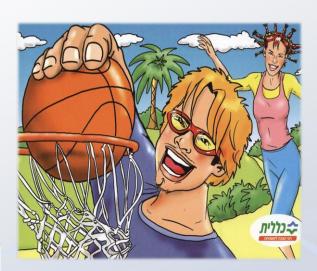




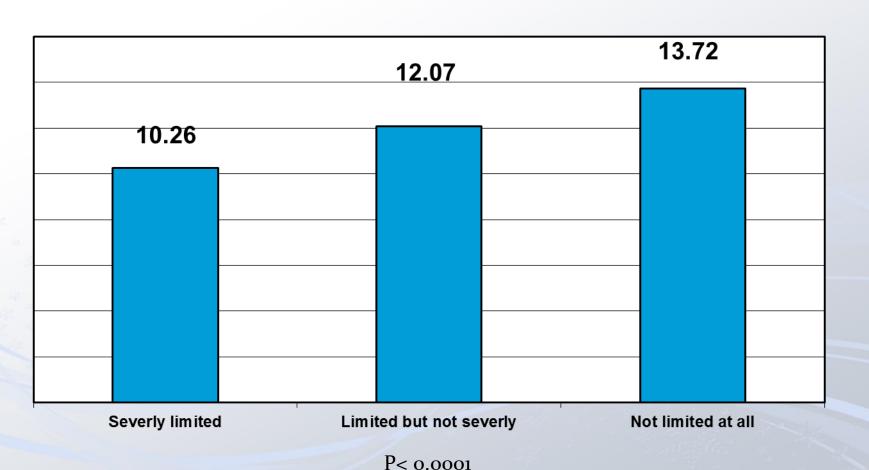




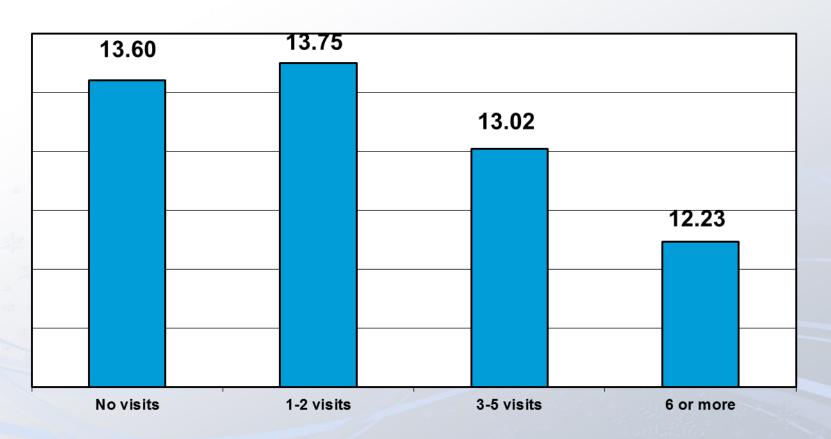




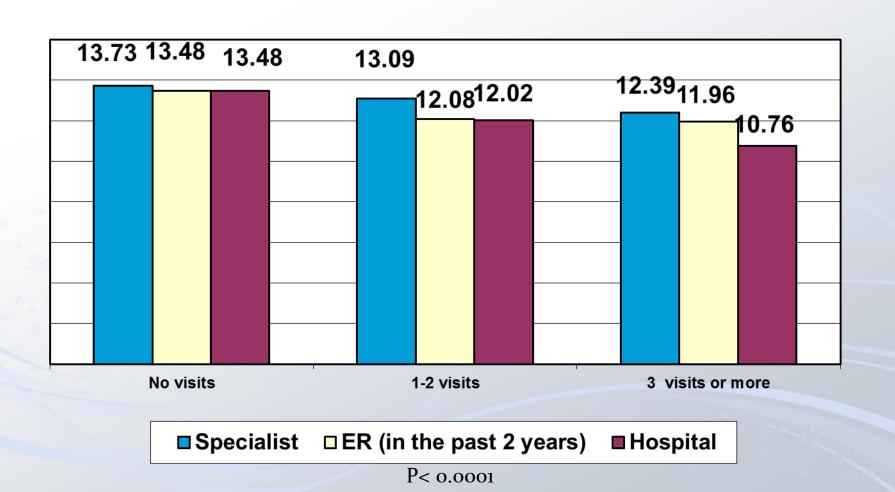
HLS-ISR and limitations due to health problems



HLS-ISR by frequency of doctor visits (in the last 12 months)



HLS-ISR by frequency of health service use



On-Line in Hebrew, Arabic, Russian, French, Portuguese





On-line health information –

2.5 million entries/mo – 80% unique entries

Health Literate organization – including consumers

Subjective measures





Levin-Zamir, D. et al The Use of Focus Groups as a Basis for Planning and Implementing Culturally Appropriate Health Promotion Among Diabetics in the Arab Community, submitted to GHP, 2014

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Relationship Among Patients' Perceived Capacity for Communication, Health Literacy, and Diabetes Self-Care

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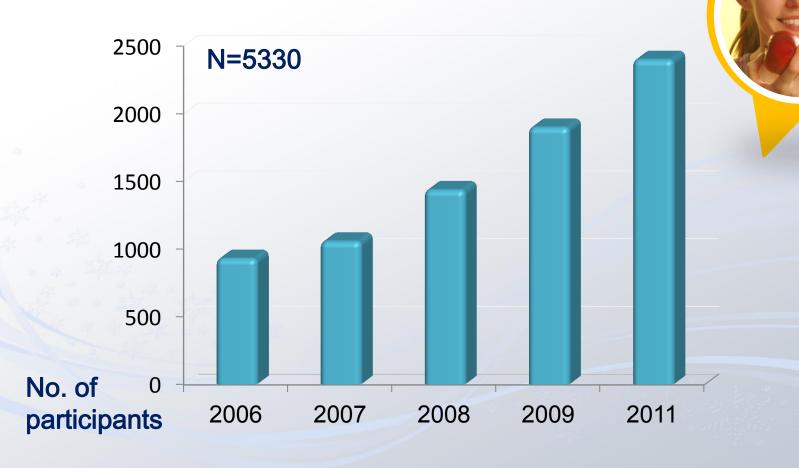
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Health Literacy Action

Health literacy and chronic care





Health Literacy Action

Measuring intervention effectiveness

Healthy Lifestyle and self-management workshops for Diabetics - HbA1C measures

Estimated Marginal Means of measure_1



Health Literacy and Capacity Building

"We Can Make A Difference" Program Modules



Health Literacy Action

Conclusions



The results reflect:

- 1. the responsibility of the health system for providing more health literacy resources and cultural appropriate services; people with low literacy use health services at all levels, significantly more than those with higher health literacy.
- 2. A variety of opportunities identified for Health Literate Organizations, based on the settings approach, to health promotion, to plan, implement and evaluate interventions for improving health literacy as measured both in Israel and Europe.

Ultimate action...

Health Literacy in All Policies



