Health Literacy: Gateway to Improving the Public’s Health

Planning Your NHEW: Tips From the Society for Public Health Education

National Health Education Week
2011
October 16-22
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Introduction

Since 1995, National Health Education Week (NHEW) has been celebrated during the third week of October. This celebration focuses national attention on a major public health issue and promotes consumers’ understanding of the role of health education in promoting the public’s health. The event is sponsored by the Society for Public Health Education (SOPHE).

National Health Education Week 2011 focuses on the theme, Health Literacy: Gateway to Improving the Public’s Health.

Each day, the week will highlight a different theme:

- **Monday**: Introduction to the National Action Plan to Improve Health Literacy
- **Tuesday**: Schools: Integrating Health Literacy into Curriculum
- **Wednesday**: Healthcare System: Practice Changes to Improve Health Literacy
- **Thursday**: Seniors: Health Literacy and Healthy Aging
- **Friday**: Public Health: A Population-Based Approach to Health Literacy

The following pages will provide tips and resources for planning and promoting your NHEW activities.
What is Health Literacy?

Health literacy is the ability to access, understand, and act on health information.

Health Literacy related tasks include:

- Understanding nutrition labels,
- Filling out health insurance forms,
- Taking medication correctly,
- Communicating with health care providers, and
- Knowing when and where to seek care.

Education, language, culture, access to resources, and age are all factors that affect a person’s health literacy skills.

Why is Health Literacy Important?

**Low health literacy is common.**
Low health literacy affects more adult Americans than those with diabetes, obesity, HIV/AIDS, and breast cancer combined. A 2003 survey shows that nearly nine out of ten adults may lack the skills needed to manage their health and prevent disease.

**Low health literacy affects some groups more than others.**
People most likely to experience low health literacy are older adults, racial and ethnic minorities, those with less than a high school degree, people with low income, non native speakers of English, and people with poor health.

**Note:** While persons of color are disproportionately affected by low health literacy, most adults with low health literacy skills are white, native-born Americans.

Low health literacy can lead to poor health. People with limited health literacy skills are more likely to skip important preventive services, such as mammograms, Pap smears, and flu shots. Studies have also shown a higher rate of hospitalization and use of emergency services among patients with low literacy skills.

Adults with low health literacy are more likely to be uninsured.
What Can I Do to Improve Health Literacy

Access to health information and services is a basic human right. We are all responsible for ensuring that information about health and wellness is available and understandable to everyone.

Specifically, you can address and improve health literacy by:

1. Using plain language and clear communication strategies.
2. Helping to identify what consumers need and want to know about their health or health conditions.
3. Partnering with adult educators in your community to create health-related curricula that builds health-related skills, such as reading good and drug labels, communicating with providers, and accessing health services.
4. Increasing knowledge of health topics through community and one-on-one education.
5. Educating colleagues about health literacy and ways to address the problem.
6. Including health literacy improvement in your organization’s planning and evaluation activities.

REFERENCES

The Role of the Health Education Specialist

In efforts to address the nation’s health challenges, health education specialists plan and direct programs, design workshops and forums, work closely with community groups, and otherwise serve a broad public health agenda. They may also conduct studies of public health education needs, evaluate the materials and methods used in programs, determine program effectiveness, and strive to improve the overall health of communities.

The role of the health education specialist, then, is to take this message of improving health to the populations that they work with on a daily basis. Health educators are everywhere; they are in cities, and they are in rural areas. They are in elementary schools, and they are in retirement homes. They reach a variety of people in a variety of settings across the globe. Health educators play an integral role in developing and distributing accessible, appropriate messages regarding health literacy.

💡 As we celebrate this year’s National Health Education Week, we also promote the field of health education and honor our health education specialists. In honor of this week, be sure to recognize health education specialists, not only for their many contributions to improving the public’s health by promoting health literacy, but also for all they do every day to sustain programs and services for this population.

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What is Health Education?

Health education is a social science that draws from the biological, environmental, psychological, physical, and medical sciences. It aims to promote health and prevent disease, disability, and premature death through theory-based voluntary behavior change activities, programs, campaigns, and research. Health education is an essential public health service that requires the practice of three core functions of public health: assessment, policy development, and quality assurance. By focusing on prevention, health education reduces the financial and human costs that individuals, employers, medical facilities, insurance companies, and the nation would spend on healthcare and medical treatment.

In practice, health education adopts a broad, ecological approach in an effort to create healthy communities. Health educators work at the individual, group, institutional, community, and systemic levels to improve health knowledge, attitudes, and skills for the purpose of changing or encouraging behaviors that result in optimal health status. The field provides a scientific backdrop that has established strong theories for disease prevention and health-enhancing behaviors.
What is a Health Education Specialist?

Health education specialists work to promote healthy lifestyles and prevent and manage disease by empowering individuals to make informed decisions about their health and positively influencing the policies and conditions that affect people’s health where they live, learn, work, and play.

Where Do Health Education Specialists Work?
According to the U.S. Department of Labor’s Bureau of Health Statistics 2008 Census, there are more than 66,200 health educators (SOC Code 21-1091) working in the following settings:

- **Hospitals, Clinics and Health Plans**: To promote healthy lifestyles, help patients and families recover from illness and manage their condition, and provide training
- **Schools & Universities**: To assist students adopt healthful behaviors thereby improving academic performance.
- **Municipal/County/State Public Health Departments**: To promote and protect the health of all populations living in their geographic area and achieve public health goals.
- **Nonprofit/Voluntary Organizations**: To provide education and services related to a particular disease or priority population.
- **Business/Industry**: To improve the health of employees. Chronic diseases and unhealthy behaviors affect the ability to work and increase employers’ workers’ compensation and health care costs, work-related injuries, absenteeism, as well as decreased productivity.
- **Universities**: To provide specialized curricula for future health educators and to conduct research on effective programs, policies and interventions.

What Services Do Health Education Specialists Provide?

At the individual and population-based levels, health education specialists:

- Assess needs, assets and capacities for health education
- Implement health education policies, projects and programs
- Administer and manage health education
- Communicate and advocate for health and health education
- Plan evidence-based effective health education programs
- Conduct evaluation and research related to health education
- Serve as a health education resource person

Where Are Health Education Specialists Trained?

More than 250 professional preparation programs around the country provide formal degrees in school and community/public health education at the baccalaureate, masters and doctoral levels. Many health education specialists hold master’s degrees from schools and programs in public health. Curricula include a unique combination of instruction from the behavioral/social, epidemiological, environmental, and biomedical sciences, as well as health administration and public policy.

What is a Certified Health Education Specialist (CHES)?
The CHES designation signifies that an individual has met eligibility requirements for, and has successfully passed a competency-based examination demonstrating skill and knowledge of the Seven Areas of Responsibility of Health Educators, upon which the credential is based. Certification is provided by the National Commission for Health Education Credentialing.

Why Are Health Education Specialists Vital to the Nation?

- Health education improves the health status of individuals, communities, states, and the nation; enhances the quality of life for all people; and reduces costly premature deaths and disability.
- By focusing on prevention, health education reduces the costs (both financial and human) spent on medical treatment. Chronic conditions, such as diabetes, heart disease, and cancer, consume more than 75 percent of the $2.2 trillion spent on health care in the United States each year - the equivalent of about 2.5 economic “bailout” packages. Spending as little as $10 per person on proven preventive interventions could save the country over $16 billion in just five years.
- Health education specialists offer knowledge, skills and training that compliment those of health providers, policy makers, educational experts, human resource personnel and many other professionals whose work impacts human health.
- Addressing a single risk factor (e.g., smoking) influences outcomes across multiple diseases, from preterm birth to lung disease and cancer. Addressing obesity in today’s children alters the prevalence of many diseases (e.g. heart disease, cancer, diabetes, arthritis) that may be encountered decades later.


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Planning Your NHEW Activity

Remember that programs, activities, and collaborations can extend beyond NHEW. Collaborate with local, state, and national partners to build sustainable programs.

Forming a Planning Committee
Setting aside sufficient planning time for your campaign will help you produce a successful and meaningful outcome. One way to structure this process is to form a planning committee.

When recruiting a planning committee, consider a diversity of strengths and talents that individuals might bring to the group. These include leadership skills, technical skills, promotional skills, subject area expertise, or access to particular communities or organizations. You should also include members of your target population in your efforts. That way you can better understand their specific interests, needs, and wants.

Besides in-person meetings and conference calls, use creative ways to meet with the planning committee to keep them engaged. Use web cams, set up an online discussion forum (i.e. Google Groups), and/or create a blog to keep members up-to-date with events.

Establishing Goals and Objectives
The overall goal of National Health Education Week 2011 is to promote a health literate society through education. However, the specific objectives for your campaign can be determined locally, based on the interests and needs of community members.

Examples of objectives for National Health Education Week 2011 might include:

By the end of the year 2011, at least “X percent” of health educators in Community X will receive information about the importance of improving health literacy.

By the end of NHEW 2011, at least “X percent” of Community X will have participated in at least one educational session regarding health literacy.

By the end of the NHEW 2011 Community Center X’s Health Literacy Workshop, at least “X percent” of participating health professionals will evaluate health education materials for low-literate adults.
Get Your Message Heard: Inform the Public

A crucial step to engaging your target audience for National Health Education Week is getting the message out there. Spreading the word can be done in many ways—by visiting the target population, by word of mouth, or through written correspondence. You can do this through traditional media (newspapers, radio, television), or propagate your message through social media (Twitter, Facebook, Flickr). Depending on your target audience, you might write a feature article about your event for the local paper or use Facebook to create an invitation.

Media Outlets

Newspapers
Newspapers remain popular venues through which individuals can share facts, resources, and opinions (although there is currently a trend toward strictly online status, which reduces the diversity of readers to those with internet access). When advocating for a particular health issue, consider the following: feature articles, op-eds, letters to the editor, “Dear Abby,” advertisements, and adding your event to a community calendar.

Newsletters
Newsletters provide a smaller forum through which readers can learn about specific issues, events, or services being offered. If you know of associations or organizations that may have members who are interested in health literacy promotion, submit a blurb about your National Health Education Week event or activity. They are more likely to include your write-up in a newsletter if it is well-written and ready for publication!

Television
Based on figures from the US Census Bureau, Americans spend over 4 hours watching television per day, which makes it an excellent marketing tool. If your organization has enough money to fund a television campaign or a public service announcement (PSA), this media option can be quite fruitful. If not, there are several ways that you can engage your local television stations. Many television stations include a segment during the morning or evening news that focuses on a health issue. Research who covers these segments and inform that individual of your National Health Education Week event or activity. Keep in mind that you must make your case as to why the public will be interested in health literacy—present facts.

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Radio
While not as popular as television, radio can also be an effective way to market a message. Press releases can be read over the air to spread the word. Depending on your target population, try local stations, regional stations, or even National Public Radio.

Blogs
Million of Americans maintain blogs (contraction of the term “weblog”), posting over 1 million new entries every day, which are read by over 50 million Americans. With so many conversations taking place online each day, this outlet can play a critical role in conveying your message.

Things you should know about blogs:

♦ **Blogging is personal.** Bloggers have more freedom than journalist (no newspaper guidelines to stay within) and often their entries are more personal, offering viewers both opinion and perspective on controversial issues.

♦ **Real time reporting.** Unlike newspapers and other print media, blogging offers real-time reporting of news as blog entries can be posted at any time of the day or night.

♦ **Cordial and timely correspondence.** Since bloggers follow a faster pace than the print world, it is important to provide information and respond to questions quickly.

Twitter
Twitter is a social media site that has become increasingly popular as a venue for exchanging thoughts and information. In 140 characters, you have the opportunity to promote an event, share a link, or simply initiate dialogue about a certain topic. In order to be an effective “tweeter,” your Twitter account must maintain visibility. By using the “#” symbol for keywords, your tweets become part of a streaming dialogue about a specific topic, which increases the visibility of a tweet. **TIP:** Follow @SOPHEtweets to keep up-to-date with SOPHE and NHEW related news.

**Example of NHEW tweets:**

♦ This week is National Health Education Week (#nnew) - See www.sophe.org to learn more!

♦ #healthliteracy starts with health education! Go to www.sophe.org to learn more about National Health Education Week, October 16-22, 2011.

♦ “We will be at this week’s public health fair discussing #healthliteracy.”

♦ “Why do you think is important to discuss about #healthliteracy during National Health Education Week? (#nnew)?”
Facebook

With more than 250 million active users—120 million of which log in at least once every day—Facebook provides an excellent opportunity for getting your message out:

- Using the Event Invitation application, you can invite Facebook friends to an upcoming event and ask them to pass along the invitation.
- Also use the “What’s on your mind?” box at the top of your homepage to notify fellow Facebookers about upcoming National Health Education Week events. Individuals can also become creative with these “status updates” by providing a different health literacy or health education related fact each day of National Health Education Week.
- If your organization has a Facebook page, also be sure to utilize the discussion section to not only publicize events, but also to engage your “Facebook fans” in dialogue by asking questions related to health literacy and health education.

Flickr

Flickr is an online community forum for sharing photos and videos. The website is commonly used by bloggers as a source of images—meaning wider exposure to your events and activities. Choose “tags” (keywords) for your photos that will generate interest, such as “National Health Education Week,” “public health education,” and “health literacy.” By sharing photos of your National Health Education Week events and activities, you will generate interest in the work that you do and gain a wider audience for your organization.

Youtube

From beaming babies to singing seniors, Youtube features videos of individuals from various populations worldwide. By taking short video segments during your event, you can generate interest even once it is over. If you are not holding an event, you can also create video clips of health literacy tips to coincide with NHEW. This may include featuring tutorials on how to navigate authoritative health information websites. If it is possible, arrange for these segments to be provided in both English and a second language (i.e. Spanish) for a broader appeal.

Try one or a variety of the above options. The key is magnitude. The more people you reach, the more successful your event and/or intervention will be.
Steps toward a Successful Marketing Campaign

Whichever media outlet you choose, there are similar steps to successfully market your message.

**Step 1: Identify your key audiences.**
You may have different key messages for specific communities as well as a general set of messages for the general population.

**Step 2: Decide upon key message(s)**
Possible key messages:
- Even though most adults read at an eighth-grade level, and 20 percent of the population reads at or below a fifth-grade level, most health care materials are written at a 10th-grade level.\(^1\)
- Low health literacy can affect people’s ability to locate health care providers and services; complete health forms and paperwork; share personal health information with providers; and manage chronic diseases and engage in self-care.\(^2\)
- Improving health literacy skills require a comprehensive set of strategies, including the use of plain language techniques, culturally and linguistically appropriate communication, participatory design, field-tested materials, policy change, and advocacy.

**Step 3: Get the facts**
Research the facts that support your key message(s). Many health literacy facts can be found throughout this toolkit. Additional places to find such information are listed in the Resources section.

**Step 4: Decide which media outlets you want to utilize**
Refer to list of media outlets (page 9).

**Step 5: Develop a current media contact list**
Include local and regional radio, television, print outlets and key health journalists. Also identify relevant blogs and make contact with the blogger (to start your search, check out http://blogsearch.google.com). Join Twitter and follow groups with related messages to network and increase visibility.

**Step 6: Develop a press release** (Refer to the sample press release on page 14)
- Include a background page about National Health Education Week and health literacy. The background page can include key facts, statistics, and information resources.
- Identify a member of your organization as a local spokesperson to answer journalist questions.
- Identify examples of effective health literacy programs in your community to pitch to journalists and bloggers for coverage.

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Step 7: Develop a strategy for utilizing media outlets
- See your information through the eyes of a journalist or blogger. Fashion your story to fit their needs and interests.
- Leverage local or regional media interest to promote NHEW by stressing the value of preventative health efforts as a major way to lower health care costs for your community, organization, employers, and the nation.
- Create media interest through the use of specific stories about individuals helped, health programming undertaken, and policy stands that speak to health literacy education and promotion.
- Identify local experts who can talk to the media about the need to improve health literacy in communities and at schools, and the role of health educators in improving low health literacy in the local community.

Step 8: Disseminate your information to media outlets & priority media targets
- Include a brief cover letter with your press release.
- Mail, fax, email and telephone calls are all mechanism to get your message to media outlets. Check to see how your local journalists prefer to be contacted. They are often busy professionals who appreciate clarity and brevity.
- Don’t wait for them to contact you—follow-up with a call, fax, or email.
- Follow through on media requests. Be timely in responding to media requests for more information and connecting them to experts on the topic.

Step 9: Begin to establish a relationship with the media
- Send thank you notes to those media that covered your story.
- Add contacts to distribution lists for newsletters and other publications.
- Send additional news of interest to those media contacts.
- After the story, invite the media to cover your organization, program, and/or worksite for events.
- Follow the interests of specific journalists and send them relevant stories.
- Help establish your organization as a credible source for information on health issues.
EDUCATION KEY TO IMPROVING PUBLIC’S ABILITY TO MAKE HEALTH DECISIONS
National Health Education Week 2011 Sets Focus on Improving Health Literacy

[CITY, state] – Nearly 9 out of 10 adults have problems finding and using health information. Helping them understand how to interpret that information and make decisions is the focus of National Health Education Week 2011.

Occurring October 16-22, this year’s theme is Health Literacy: Gateway to Improving the Public’s Health. Because low health literacy is a public health problem, [name of program/organization] [describe the activity/event/promotion being conducted].

Quote from [credible organization/program individual]

The cost to our nation of poor health literacy is estimated to be between $100 and $200 billion U.S. dollars (USD) annually.¹

Most adults lack the skills needed to manage their health and prevent disease. The complexity of today’s health system and the overwhelming amount of health information available make it increasingly difficult for consumers to understand written health materials and access health services.

Quote from [health education expert]

Health literacy rates are low because a gap exists between the high-reading levels of most health materials and the limited literacy skills of many adults. Only 12% of consumers have proficient health literacy skills.²

National Health Education Week (NHEW) is celebrated annually during the third week of October to raise awareness and encourage public education on a major public health issue. NHEW improves consumer understanding of health education’s role in promoting the public’s health. Since 1995, the Society for Public Health Education (SOPHE) has provided support to schools, communities, and health education professionals throughout the nation to plan and conduct activities around the designated annual theme.

About SOPHE
The Society for Public Health Education (SOPHE) is a non-profit professional organization founded in 1950 to provide global leadership to the profession of health education and health promotion and to promote the health of society. For more information, go to www.sophe.org.

About [Organization name]


Sample Proclamation

WHEREAS, the State of [name of state, city] has a vital interest in a health literate nation; and

WHEREAS, health literacy has been defined as the ability to “obtain, process and understanding basic health information and services needed to make appropriate health decisions”\(^1\); and

WHEREAS, nearly 9 out of 10 adults have problems finding and using health information\(^2\) and the cost to our nation of poor health literacy is estimated to be between $100 and $200 billion U.S. dollars (USD) annually\(^3\); and

WHEREAS, health literacy affects all people’s ability to search for and use health information, adopt healthy behaviors, and act on important public health alerts; and

WHEREAS, improving health literacy skills require a comprehensive set of strategies, including the use of plain language techniques, culturally and linguistically appropriate communication, participatory design, field-tested materials, policy change, and advocacy; and

WHEREAS, community and school health education specialists are uniquely positioned to bridge the gap between the information disseminated by the healthcare and public health systems and the knowledge and skills of consumers who use them; and

WHEREAS, the [name of chapter or organization] is committed to addressing low health literacy as a public health problem and reducing the incidence of limited health literacy among Americans by bringing health education ideas and principles into the legislative and public arenas; and

WHEREAS, in celebration of National Health Education Week, government, schools, healthcare providers, libraries, organizations and communities are essential to support the 2011 National Health Education Week focus on advancing health literacy through the theme, “Health Literacy: Gateway to Improving the Public’s Health”;

NOW, THEREFORE, I [name of governor, mayor, elected official, or health commissioner] of the [name of state, city] do hereby proclaim

The Third Week of October, October 16-22, 2011
As
National Health Education Week

And urge all individuals, organizations, and communities to implement at least one strategy designed to raise awareness of health literacy and promote organizational and institutional changes to improve health literacy during National Health Education Week.


Resources

This section lists many resources related to health literacy education. Included are Web sites and links to PDFs that will help you to plan and execute a National Health Education Event following the theme *Health Literacy: Gateway to Improve the Public’s Health*.

Inclusion in the resources section should not be construed as an endorsement by Society for Public Health Education. This list is intended to be a sampling of known materials and organizations pertinent to health literacy that can be used to educate yourself and your community. Since the organizations listed may discontinue or revise materials from time to time, all of the items listed may not be readily available.

All deletions or corrections should be brought to the attention of:

Attn: NHEW 2011
Society for Public Health Education
10 G Street, NE, Suite 605
Washington, DC 20002
info@sophe.org
Health Literacy Tools

A Guide for Older People: Talking with Your Doctor
Guidelines to help older adults communicate easily and effectively with their physicians about their health.

ACPF Healthy Literacy Video
http://acpfoundation.org/hl/hlvideo.htm
Watch and share a 6 ½ minute video by the American College of Physicians Foundation (ACPF) that gives a powerful illustration of the problem of low health literacy, combining interviews with actual patients, commentary from practicing physicians, and health communication statistics:

Adolescent Literacy Toolkit
The Adolescent Literacy Toolkit was developed by the Council of Chief State School Officers and multiple partners in response to a state-identified need to develop the skills, knowledge, and resources of content-area high school teachers to implement adolescent literacy best practices and strategies in their classrooms.

American Academy of Pediatrics Health Literacy Course
http://www.pedialink.org/cmefinder/videos/health_literacy/index.htm
Encourage local physicians to better communicate with their child patients and families by taking this health literacy course sponsored by the American Academy of Pediatrics:

Ask Me 3
http://www.npsf.org/askme3/
Offered by the National Patient Safety Foundation, Ask Me 3 is a patient education program designed to promote communication between health care providers and patients in order to improve health outcomes.

BAM! Body and Mind
http://www.bam.gov/
The BAM! Site features interactive action figures, games, and puzzles so that children learn about a variety of health subjects while also being entertained.

CDC Public Health Literacy Training
http://www.cdc.gov/HealthLiteracy/training/
This training course will challenge participants to think about the significance of health literacy in the work they do as a public health professional. The course also provides practical steps to apply the principles and strategies of health literacy in their daily activities.

CDC’s School Health Education Resources (SHER)
http://apps.nccd.cdc.gov/sher/
Provides user-friendly access to the myriad school health education offerings available from the Centers for Disease Control and Prevention (CDC).

Communicating With Your Hard-of-Hearing Patient
http://depts.washington.edu/pfes/PDFs/HardOfHearingCultureClue.pdf
The University of Washington Medical Center offers a tip sheet tips to allow a person with hearing loss to effectively use what hearing they have and use visual cues to receive as much information as possible.

Digital Media Literacy
http://www.pbs.org/teachers/digital-media-literacy/
Suggestions for teaching digital media skills to students is separated into five developmental levels: K-2,3-5, 6-8, 9-12.

Family Health and Literacy
http://www.healthliteracy.worlded.org/docs/family/index.html
This guide is designed to help integrate health and literacy education in family literacy programs.
Health Framework for California Public Schools: K-12
The frameworks support the teaching of health education and physical education in the context of a comprehensive school health system, a system designed to support and promote the health and well-being of students and staff.

Making Text Legible: Designing for People with Partial Sight
http://www.lighthouse.org/accessibility/design/accessible-print-design/making-text-legible
Lighthouse International provides guidelines for making effective legibility choices for almost anyone.

Health Literacy Universal Precautions Toolkit
http://www.ahrq.gov/qual/literacy/
The Agency for Healthcare Research and Quality commissioned the University of North Carolina at Chapel Hill to develop and test this toolkit that offers primary care practices a way to assess their services for health literacy considerations, raise awareness of the entire staff, and work on specific areas.

How to Write Easy to Read Health Materials
Because medical concepts and language are very complex, MedlinePlus offers a guideline to write easy to read health materials:

Improving Health Literacy: Tips, Tools & Resources for Health Educators
http://sophe.sophe.org/store.asp
The 20-page guide is designed specifically to aid health educators and health providers in understanding the problem of low health literacy and implementing effective strategies to address it.

KeepKidsHealth.com
http://www.keepkidshealthy.com/
A pediatrician’s guide to keeping children healthy is a resource for parents of children of all ages.

Kindergartners Learn to Read
Provides suggestions for engaging the children in discussing what is read to them:

LearntobeHealthy.org
http://www.learntobehealthy.org/
An online health education center that has been designed to help educators, teachers, parents, families and the community communicate physical and mental health science education concepts to students K-12 through health educational resources such as games, activities, and lesson plans.

Literacy Assessment Tools
http://nchealthliteracy.org/instruments.html
A list of several assessments most commonly applied by researchers and clinical personnel in gauging patient-participant health literacy levels.

Literacy Begins at Home
Provides suggestions for improving the reading skills of toddlers and preschoolers.

Make Your Websites Senior Friendly
The National Institutes of Health has developed a checklist on how to make websites easier for seniors to use.

Making Health Literacy Real: The Beginnings of My Organization’s Plan for Action
http://www.health.gov/communication/literacy/Making%20HealthLiteracyReal.pdf
This easy-to-use template from the Centers for Disease Control and Prevention (CDC) helps individuals get started in developing a plan to change organizational and professional practices to improve health literacy.
National Network of Libraries Medicine (NN/LM): Health Literacy
http://nnlm.gov/outreach/consumer/hlthlit.html
This web resource provides background information on health literacy, research findings on impact of literacy, economic impact of low health literacy, role of the consumer health librarian, and resources.

On Demand Health Literacy Program for K-12 teachers
http://ondemand.neaacademy.org/
The United Health Foundation and the National Education Association (NEA) Health Information Network have launched a new online professional-development workshop for K-12 teachers designed to enhance students’ abilities to make personally appropriate health and well-being decisions.

Pfitzer’s Prevalence Calculator
The prevalence calculator determines how many patients in your practice, based on the demographic characteristics are troubled, by low health literacy.

PlainLanguage.gov
http://www.plainlanguage.gov
Designed to improve communication from the federal government to the public, this Web site contains excellent tools and examples of plain language.

Questions Are the Answers
http://www.ahrq.gov/questionsaretheanswer/
The Agency for Healthcare Research and Quality helps prepare patients and providers for visits and offers a structure for their communication.

Quick Guide to Health Literacy
http://www.health.gov/communication/literacy/olderadults/default.htm
Consult this guide to learn more about health literacy and strategies professionals can implement to improve health communication with older adults.

Steps to Developing an Organizational Plan
http://www.cdc.gov/healthliteracy/PlanAct/Steps/Introduction.html

Universal Symbols in Healthcare Workbook
This workbook is meant to serve as a resource to help health care executives, designers, and facilities managers become acquainted with universal health care symbols and how they can be integrated into improving understanding and directions.

University of Minnesota: Online Learning Modules
The modules address culturally competent health care for older adults.

Unified Health Communication (UHC): Addressing Health Literacy, Cultural Competency, and Limited English Proficiency
http://www.hrsa.gov/publichealth/healthliteracy/index.html
The Health Resources and Services Administration (HRSA) offers a free, on-line, go-at-your-own-pace training that addresses patient-provider communication, especially patients who have a low income, lack insurance; and/or whose English proficiency is low.

Usability.gov
http://www.usability.gov
Your resource for creating usable, useful, and accessible Web sites. This site contains information, guidelines, and checklists for conducting usability testing and user-centered design.
A Child Becomes a Reader Birth through Preschool: The Partnership for Reading
Summarizes skills important in becoming a reader (for newborn to age six) and then has a section of activities by ages. Includes bibliography and brief explanation of No Child Left Behind Act. Put out by The Partnership for Reading, administered by the National Institute for Literacy in cooperation with National Institute for Child Health and Human Development and U.S. Department of Education and DHHS.

Case Studies in Geriatric Health Literacy
 Raises awareness on the geriatric patient population and their risk for low health literacy and interventions that are effective in helping these patients understand how to care for themselves.

Early Childhood Education: A Call to Action from the Business Community
The nine-page report, written by The Business Roundtable and the Corporate Voices for Working Families, recognizes the importance of quality improvement efforts for early childhood programs and recognizes six principles for a successful early childhood education system.

Early Head Start Technical Assistance Papers
http://www.ehsnrc.org/Publications/ehs_ta_papers.htm
Early Head Start Technical Assistance Papers provide clarification and in-depth information on a particular topic of special interest to Early Head Start Programs.

Early Head Start Tip Sheets
http://www.ehsnrc.org/Publications/ehs_tipsheets.htm
Early Head Start Tip Sheets are not regulatory documents. Their intent is to provide a basis for dialogue, clarification, and problem solving among the Office of Head Start, Regional Offices, Technical Assistance consultants, and grantees. The tip sheets focus on the following topics: Child development and early learning; family engagement and relationships; and health, safety, and nutrition.

Factsheet: Why Invest in Early Childhood Education?
http://kansasschoolreadiness.org/early-education

Federal Support for Adolescent Literacy: A Solid Investment
Prepared by the American Alliance for Excellent Education, this Issue Brief shows there have been significant findings related to instruction in grades 4-12, the knowledge base on adolescent literacy continues to expand, and the research does indeed provide a solid foundation for effective policymaking.

Head Start and Early Head Start - Evidence Based Practice

Health Literacy for Children and Families from Diverse Backgrounds: Empowering Parents, Benefitting Children, Improving the Health Care System

Health Literacy Implications of the Affordable Care Act (ACA)
http://www.chcs.org/publications3960/publications_show.htm?doc_id=1261193
Commissioned by the Institute of Medicine, a report by the Center for Health Care Strategies that identifies provisions in the ACA that directly and/or indirectly addresses health literacy.
How Seniors Learn
http://www.mathematica-mpr.com/PDFs/howseniors.pdf
Prepared by the Center for Medicare Education, the issue brief discusses the issue of how older people learn, explores research from the field of cognitive aging. It also offers some tips for how you can adapt your educational programs and materials to build on older adults’ cognitive strengths and compensate for some of the losses that can occur with aging.

Improving Health Literacy for Older Adults: Expert Panel Report 2009
Released by the CDC, this report discusses the benefits of increased access to consumer health information, and the need to assist older adults in gaining access to and making sense of available health information.

Patients’ Literacy Skills: More Than Just Reading Ability
http://dx.doi.org/10.1080/10810730.2011.571345
The Journal of Health Communication released “Patients’ Literacy Skills: More Than Just Reading Ability”, which highlights effective communication with patients should rely on the oral exchange and written health information, and not rely on a single literacy skill.

Kansas Head Start Program (KHSA)
http://www.ksheadstart.org/node/90
KHSA was the first state Head Start association to make a nationally-recognized health literacy training program. Learn how they organized communities to promote childhood literacy.

KidsHealth.org
www.kidshealth.org
KidsHealth.org features a large variety of health articles written for kids, parents, and teenagers.

National Action Plan to Improve Health Literacy
http://www.health.gov/communication/hlactionplan/
The action plan contains 7 goals, each with specific strategies to improve health literacy. The strategies are aimed at different sectors of the health system, such as payers, the media, government agencies, educators, and health care professionals.

National Action Plan to Improve Health Literacy: Goal 3: Incorporate Accurate, Standards-Based, and Developmentally Appropriate Health and Science Information and Curricula in Child Care and Education Through the University Level
http://www.cdc.gov/healthliteracy/PlanAct/Goals/goal3.html#important
Objective number three of the National Action Plan to Improve Health Literacy recognizes classroom-based health education, as both an independent discipline and a component of coordinated school health programs, integral to the development of health literacy in today’s children, adolescents and young adults.

National Health Education Standards - 2007
The National Health Education Standards (NHES) are the framework for health instruction in schools. The NHES were designed to support schools in meeting the essential goal of enabling students to acquire the knowledge and skills needed to promote personal, family and community health.

Strengthening Head Start: What the Evidence Shows
http://aspe.hhs.gov/hsp/strengthenheadstart03/report.htm
Developed by DHHS, this paper describes the limited educational progress of children in Head Start and the problems resulting from a fragmented approach to early childhood programs and services.

“What Did the Doctor Say?”: Improving Health Literacy to Protect Patient Safety
http://www.jointcommission.org/assets/1/18/improving_health_literacy.pdf
The Joint Commission report was developed by an expert panel and contains specific recommendations for improving provider-patient communication in order to reduce the burden of low health literacy, and emphasizes the need for organizations to establish communication as a patient safety priority and calls for financial support for patient-centered initiatives.
Health Literacy Listservs

LINCS Health Literacy Discussion List
http://lincs.ed.gov/mailman/listinfo/Healthliteracy
This list operates in partnership with the LINCS Basic Skills Resource Collection, Ohio Literacy Resource Center, Kent State University. The purpose of this list is to provide an on-going professional development forum where literacy practitioners, healthcare providers, health educators, researchers, policymakers, and others can discuss health literacy needs, goals and strategies.

Health Literacy Consulting
www.healthliteracy.com/newsletter.asp
Health Literacy Consulting offers a free monthly "What's New" e-Newsletter. This is a brief message about Helen Osborne's latest articles, how-to tips, podcasts and other health literacy news.

SurroundHealth
http://surroundhealth.net/
SurroundHealth is the place to connect with other health-related professionals and share knowledge that can help make a difference to the communities and individuals we serve every day. Check out the page devoted to health literacy. Membership is free!
Glossary

**Access to care** Facilitating access is concerned with helping people to command appropriate health care resources in order to preserve or improve their health. Access is a complex concept and at least four aspects require evaluation. If services are available and there is an adequate supply of services, then the opportunity to obtain health care exists, and a population may 'have access' to services. The extent to which a population 'gains access' also depends on financial, organizational and social or cultural barriers that limit the utilization of services. Thus access measured in terms of utilization is dependent on the affordability, physical accessibility and acceptability of services and not merely adequacy of supply. Services available must be relevant and effective if the population is to 'gain access to satisfactory health outcomes'.

**Adolescents and young adults** Individuals between the ages of 15 and 24 years.

**Actionable** Easy to act on. Actionable information tells people what to do and how to do it. Content that is actionable focuses on behavior.

**Content development** Writing and preparing content for a publication, typically a Web site. Web content can include text, graphics, audio/video and links.

**Content management** The systematic process for storing, indexing, updating, and deploying content on a Web site. Content management involves storing information and resources in a content repository and managing how that information gets catalogued and updated.

**Continued school health program** An organized set of policies, procedures, and activities designed to protect and promote the health and well-being of students and staff which has traditionally included health services, healthful school environment, and health education.

**Culturally and linguistically appropriate services (CLAS)** Services offered by health care organizations and their staff to understand and respond with sensitivity to the needs and preferences of culturally and linguistically diverse patients/consumers.

**Cultural competency** An attempt to optimize the likelihood that individuals from all cultures, ethnicities, and races will receive appropriate and sensitive health care.

**Curriculum** Written plan for instruction.

**Demographics** Information such as ages, ethnicity, gender, and other characteristics that describe a population and may impact objectives and method selection.

**Elderly (or elder)** Individuals over 65 years of age.

**Evidence-based practice** Ways of delivering services to people using scientific evidence that shows that the services actually work.

**Geriatrics** The branch of medicine that deals with the structural changes, physiology, disease, and other medical aspects of old age.

**Health education** Health education is a social science that draws from the biological, environmental, psychological, physical, and medical sciences. It aims to promote health and prevent disease, disability, and premature death through theory-based voluntary behavior change activities, programs, campaigns, and research.

**Health information** The content of communications based on data derived from systematic and scientific methods as they relate to the health issues, policies, programs, services, and other aspects of individual and public health, which can be used for information various populations and for planning health education activities.
**Health promotion** The aggregate of all purposeful activities designed to improve personal and public health through a combination of strategies, including the competent implementation of behavioral change strategies, health education, health protection measures, risk factor detection, health enhancement, and health maintenance.²

**National Health Education Standards (NHES)** Written expectations for what students should know and be able to do by grades 2, 5, 8, and 12 to promote personal, family, and community health. The standards provide a framework for curriculum development and selection, instruction, and student assessment in health education.⁶

**Language arts** Encompasses the skills, including reading, composition, speech, spelling, and composition to give students a thorough proficiency in using the language.⁷

**Hard of hearing** A hearing impairment, either permanent or fluctuating, that adversely affects an individual’s educational performance.²

**Health literacy** The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.²

**Information architecture** Information architecture is a fancy term for how information (content) is organized and labeled on a Web site. The goal is to organize information so that it’s easy to find. Good information architecture reflects the way people think; it’s intuitive.³

**Old** Those 65 years of age and older.⁵

**Patient messaging (consumer messaging)** Delivering health messages directly to members of your target audience. For example, messaging could include sending actionable alerts to patients highlighting opportunities to improve health or close gaps in preventive care. Messages can be delivered via email, text message, Explanation of Benefit (EOB) forms, or other communication channels that reach consumers directly. Ideally, consumer messages are tailored to the recipient’s age, gender, or health status; the more tailored your message is, the more effective it will be.³

**Plain language** Plain language is a strategy for making information easier to find, understand, and use. Plain language techniques include using the active voice, short sentences and bulleted lists, and everyday language.³

**Public health** The science and art of protecting and improving the health of communities and globally through education, promotion of healthy lifestyles, and research for disease and injury prevention. Public health works to prevent health problems before they occur.⁵

**Public health system** The organizational mechanism of those activities undertaken within the formal structure of government and the associated efforts of private and voluntary organizations and individuals.⁵

**Readability** The ease with which a written text can be read. There are many commonly used formulas to assess readability (for example, SMOG, FRY and Flesch-Kincaid). Typical readability formulas calculate the number of syllables in a word and the number of words in a sentence. Readability tests do not measure or predict how well your intended audience understands the material.³

**School health education** One component of the comprehensive school health program, which includes the development, delivery, and evaluations of a planned instructional program and other activities for students preschool through grade 12, for parents, and for school staff. It is designed to influence positively the health knowledge, attitudes, and skills of individuals.²

**Self-efficacy** A person’s judgment or belief of her ability to succeed in accomplishing a task. Self-efficacy can be an important predictor of behavior. Breaking behaviors into smaller, more realistic steps can help increase self-efficacy.³

**Teach-back method** A way to check for understanding and, if necessary, re-teach the information, asking a question to confirm that you have explained to the patient what they need to know in a manner that the patient understands. Patients repeat in their own words what they need to know or do.⁸
**Usability** Measures the quality of a user’s experience when interacting with Web site or product. Usability is a term to describe how easy a Web site is to use. Usability is determined by 2 broad questions: how well can users accomplish their goals on your Web site, and how satisfied are they with the process? Usability is typically measured with a technique called usability testing.\(^3\)

**Universal precautions** Structuring the delivery of care in the practice as if every patient may have limited health literacy.

**Visually impaired** Individuals who have defective or impaired vision. Definitions of impairment or blindness can be either legally or educationally based.\(^2\)

**White space** The space between lines of text or paragraphs, around images, in the margins of the page, and in headers and footers. White space allows for visual separation of design and text elements on a page — and makes things easier to read. Use it liberally!\(^3\)
References


Evaluation

Please fill out the following evaluation form and mail to:

SOPHE
ATTN: NHEW 2011
10 G Street, NE, Suite 605
Washington, DC 20002

or

You may complete the evaluation online at:
http://www.surveymonkey.com/s/6888NGQ
SOPHE would like to know how you celebrated National Health Education Week 2011.

Did you celebrate National Health Education Week (NHEW) 2011?  ____Yes  ____No

Did you celebrate NHEW during the week of October 16-22, 2011?  ____Yes  ____No

Did you celebrate the theme Health Literacy?  ____Yes  ____No

Please check your target audiences  (Check all that apply.)

____Colleges/Universities  ____Schools (other):  ____Ethnic/racial groups
____Parents/Caregivers  ____SOPHE members  ____Health care settings
____Local businesses  ____Community agencies  ____Employees
____Senior Citizens  ____Employers
____Local health experts  ____Youth
____Other (please describe):

Please check your community partner(s)  (Check all that apply.)

____Schools  ____Colleges/Universities  ____Parents/Caregivers
____Community agencies  ____SOPHE Chapters  ____Health care industry
____Local businesses  ____Other (please describe):
____I did not collaborate with a community partner.

How many individuals did your program activities
... plan to reach? ___________________
... actually reach?_________________

Which activity/activities did you use to celebrate NHEW 2011?  (Check all that apply.)

____Classroom lessons (K-12)  ____Health fair
____Worked with the media  ____Display booth
____Newspaper/newsletter article  ____Community event
____Radio/Television appearance  ____Adapted an evidence-based program
____Speak /Present at an event
____Outreach to College Students
____Social media campaign/outreach
____Outreach to Parents

Note: You may complete the evaluation online at:
http://www.surveymonkey.com/s/6888NGQ
Circle the number that best represents your answer to the following questions.

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Neutral</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The goals of my NHEW celebration were met.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>I plan to celebrate NHEW next year.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>SOPHE’s Activity Guide &amp; Tool Kit was useful to my planning.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>I plan to use SOPHE materials to plan other Programs.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Health Literacy was a relevant theme for this year’s NHEW.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

What were your greatest strengths in planning and implementing your celebration?
___Strong interest from the community
___Past experience in campaign planning
___Strong interest from organization
___Theme relevant to organization’s goals
___Available resources (please describe):
___Other (please describe):

What were your greatest obstacles in planning and implementing your celebration?
___Lack of interest from the community
___Lack of experience in campaign planning
___Lack of interest from the organization
___Theme not relevant to the organization’s goals
___Lack of resources (please describe):
___Other (please describe):

In what setting(s) do you work? (Check all that apply.)
___College/University ___Health Department ___SOPHE Chapter
___Health care setting ___Community agencies ___Local business
___School ___Other (please describe):___________________________

What is your profession?_______________________________________
Please describe your community: _____Urban _____Suburban _____Rural

What was the most useful part of the NHEW 2011 Toolkit/Resource Guide? (If used.)

What was the least useful part of the NHEW 2011 Toolkit/Resource Guide? (If used.)

Please use the space below to share any additional comments or suggestions related to National Health Education Week 2011.

Please send your completed evaluation form to:

SOPHE
ATTN: NHEW 2011
10 G Street, NE, Suite 605
Washington, DC 20002