HEALTH LITERACY: GATEWAY TO IMPROVING THE PUBLIC'S HEALTH

Adopted by SOPHE Board of Trustees October 13, 2010

WHEREAS, Health information is presented in a way that most Americans cannot understand; and

WHEREAS, Nearly 9 out of 10 adults have difficulty using the everyday health information that is routinely available in health care facilities, media, and communities ^{1,2,3}; and

WHEREAS, Health literacy has been defined as the ability to "obtain, process, and understand basic health information and services needed to make appropriate health decisions" ⁴; and

WHEREAS, The impact of limited health literacy, defined as scoring below the Proficient level on the health literacy portion of the 2003 National Assessment of Adult Literacy (NAAL), disproportionately affects lower socioeconomic and minority groups ^{1,5}; 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 ²; and

WHEREAS, As many as half of US adults have limited literacy skills ¹, yet most health information is written at a high school, college, or graduate school reading level ⁶; and

WHEREAS, The link between limited health literacy, measured by the Rapid Estimate of Adult Literacy (REALM) or the Test of Functional Health Literacy in Adults (TOFHLA), and poor health has been well documented by many studies, including by the Institute of Medicine (which issued a report indicating that health literacy is critical to improving the health of individuals and the nation ²) and the Agency for Healthcare Research and Quality (which published a scientific review of literature on the effect of low literacy on a wide variety of health outcomes ⁵), concluding that limited health literacy is negatively associated with the use of preventive services like mammograms or flu shots; management of chronic conditions such as diabetes, high blood pressure, asthma, and HIV/AIDS; and self reported health; and

WHEREAS, Additional studies have linked limited health literacy to misunderstanding of prescription medication instructions, medication errors, poor comprehension of nutrition labels, and mortality ^{7,8,9}; and

WHEREAS, Research indicates that people with limited health literacy skills have higher medical costs and use an inefficient mix of health services ¹⁰, placing a financial impact on the healthcare and public health systems; and

WHEREAS, Attempts to improve the quality of care and reduce health disparities will inevitably fail if Americans cannot understand important health information or access recommended services; and

WHEREAS, Health educators 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;

WHEREAS, Using plain language and following the principles of clear health communication when creating health information can improve access to and aid understanding of important public health messages; and

WHEREAS, For the purposes of this resolution, plain language is defined as language:

- Using easy to follow layouts with plenty of white space
- Breaking up dense chunks of text with bulleted lists
- Defining medical or technical terms the first time they are used
- Focusing the message on desired behavior rather than on medical fact
- Making information culturally sensitive and personally relevant
- Whenever possible, testing the information and/or message with the intended audience ¹²;

THEREFORE, be it

RESOLVED, That SOPHE will adopt organizational policies and procedures to insure its own communications and messages to the public, SOPHE members, chapters, partner organizations and other parties reflect the principles and practice of clear health communication; specifically, SOPHE will make an effort to ensure the following communications adhere to standards of plain language and clear communication:

- SOPHE website
- Reports and guides for members
- Newsletters
- Announcements and e-mail updates
- Conference registration materials; and be it further

RESOLVED, That SOPHE will include a statement of commitment to health literacy improvement and the use of clear communication when asked to comment on national public health policy or other publications; and be it further

RESOLVED, That SOPHE will advocate for local and regional SOPHE chapters to adopt their own resolutions addressing health literacy and to provide continuing education and learning opportunities for members at the chapter level; and be it further

RESOLVED, That SOPHE explore the possibility of devoting a future issue of its journal(s), *Health Education & Behavior* and/or *Health Promotion Practice*, to the theme of health literacy; and be it further

RESOLVED, That SOPHE will consider health literacy as the theme of a future Annual or Mid-year Scientific Meeting; and be it further

RESOLVED, That SOPHE will plan, provide, and support accessible and affordable continuing education opportunities to improve knowledge and application of health literacy principles and practice among health educators and all other attendees at its Annual and Midyear Scientific meetings; and be it further

RESOLVED, That SOPHE will use its membership network, advocacy activities, professional development opportunities at Annual and Mid-Year Scientific Conferences, partnerships with health organizations, and overall influence in the health education field to support the development of health policy, health programs, and healthcare financing that help to improve:

- Communication skills of health professionals
- Clarity and familiarity of health information
- Cultural and linguistic tailoring of health information and services
- Public health infrastructure that facilitates and supports healthy behaviors
- Community and educational infrastructure that facilitates and supports access to health information and services; and be it further

RESOLVED, That SOPHE will advocate for training all health care professionals, particularly health educators, in the principles of clear communication; and be it further

RESOLVED, That SOPHE will strongly support and advocate for the inclusion of health literacy principles and practices in school health education curricula aimed at K-12 students; and be it further

RESOLVED, That SOPHE will partner with college and university health education professional preparatory programs to identify and enhance undergraduate and graduate curricula and competencies related to health literacy; and be it further

RESOLVED, That SOPHE will encourage partner organizations to address health literacy issues at conferences and other continuing education opportunities that it sponsors; and be it further

RESOLVED, That SOPHE will work with the American Public Health Association (APHA), the National Association of County and City Health Officials (NACCHO) and other groups to jointly develop policy statements and to advocate for policies, practices, and funding to ensure that important public health and safety information is communicated in plain language by health professionals to consumers at the local, state, and national levels.

References

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