National Health Literacy Month



September is a busy month for health awareness topics, such as National Health Literacy, National Suicide Prevention, National Self-care Awareness, and National Pain Awareness Month.

While all the health awareness subjects for this month are important, they can pose a significant challenge for individuals with poor health literacy. Poor health literacy negatively impacts a person's ability to comply with a doctor's treatment recommendations. This makes disease management more expensive for the individuals and the communities in which they live and work.

That's why, of all the subjects that we should be aware of this month, health literacy stands out as maybe the most important. Some studies indicate that 39.4 % of all health-related deaths (1 in 4) is directly tied to poor health literacy.

We need to start with the basics by reviewing the traditional and modernized definitions of education and literacy.

Defining Education and Literacy

Most people think that education and literacy are the same. Even though they complement each other, the actual concepts are different.

Education (traditional): The process of acquiring knowledge, skills, and expertise through formal or informal means, such as attending schools, colleges, or universities, etc.

Education (modernized): The process of acquiring knowledge, skills, and expertise through formal or informal means, such as attending schools, colleges, or

universities, etc., which includes not only reading and writing but also extensive study that promotes critical thinking and problem-solving skills.

Literacy (traditional): A person's ability to read and write.

Literacy (modernized): The ability to understand and use the information and tools gained through education to take appropriate actions and make correct decisions for a specific purpose.

It is possible to be educated and literate in one area but uneducated and illiterate in another area, which applies to everyone because no one knows everything.

For example, John Smith was educated and literate as a marine biologist, but he was uneducated and illiterate as a carpenter. This simply means he has not gained skills or expertise through formal or informal education as a carpenter, and he does not know how to use carpentry information and tools to build a usable cabinet, a stool, or a table, etc. However, no one would describe John Smith, the marine biologist, as uneducated or illiterate in the traditional sense.

We must destigmatize the words uneducated and illiterate. We need to begin to think of and describe education and literacy as a deficit of knowledge or expertise. Being uneducated or illiterate is not a common condition only among those of lower intellectual or socio-economic condition or status; all individuals are uneducated or illiterate in some area of their lives.

What is Health Literacy?

Health literacy means the ability to access, understand, appraise, and use health-related information and services in ways that promote and maintain good health and well-being.

Health literacy is more than visiting websites, reading pamphlets, and adopting suggested health promotion activities.

Genuine and effective health literacy is the ability to think critically about, as well as the ability to apply health information to one's own needs for wellness; this is also the definition of health autonomy.

Poor Health Literacy Is A Big Problem in the US

The Centers for Disease Control and Prevention (CDC) is adamant that the best thing people can do to increase positive health outcomes is to improve their health literacy. Unfortunately, poor health literacy is a big problem and affects almost the entirety of the US population.

The U.S. Department of Education has published the first national data on health literacy skills. Their research shows that only 12 percent of English-speaking adults in the US have proficient health literacy skills. Precisely, what does that mean or look like? See the following table:

Descriptions of Health Literacy		
Health Literacy Levels	Task Examples	Percentage
Proficient	Can use a table to calculate their share of health insurance costs for the year.	12%
Intermediate	Read instructions on a prescription label to determine what time to take a medication.	53%
Basic	Read a pamphlet and give two reasons a person with no symptoms should be tested for a disease.	21%
Below Basic	Read a set of instructions and identify what is permissible to drink before a medical test.	14%

Just reviewing the above table, the indigent, uneducated, and disadvantaged are not the only ones in the US population who have poor health literacy. The most important thing to understand about health literacy is that even people who are highly educated can have limited health literacy.

It is vitally important that we understand the role of health literacy in achieving better health outcomes.

According to the World Health Organization (WHO), in the US, poor health literacy is a stronger predictor of a person's health status than income, employment status, education level, and racial or ethnic group.

Since we now understand and know how vital health literacy is to good health, we need to explain what health literacy is and how people can achieve it.

The Cost of Poor Health Literacy in the Workplace

Poor literacy of all kinds in the US costs massive amounts of money each year:

- General Illiteracy- \$2.2 Trillion
- Health Illiteracy- \$238, of which \$4.8 billion is administrative cost.

All total poor general and health illiteracy costs more than \$2.5 trillion every year!

These amounts are significant for organizations because 54.5% of all workers receive employment-based health insurance. Poor health and poor health literacy of the employee contribute to higher costs for:

- Health Insurance
- Workers' compensation insurance

In addition, workers who have poor health and poor health literacy are more often:

- Absent
- Hospitalized
- Skip preventative health screenings, exams, and vaccines
- Have poorly controlled chronic conditions
- Have work-related accidents and injuries
- Have a lower level of work productivity

All eight (8) of the above items are a significant drain or hit to workplace morale and organization profits.

Improved Health Literacy Benefits Workers and The Workplace

For every \$1 an organization spends on health education and health literacy, it gains \$4 in increased worker productivity.

Anything that affects workers and the communities they live in affects organizations that employ those workers. That is why it is to the benefit of organizations to increase the access their workers have to health literacy information.

Poor personal health literacy is a social risk that is associated with worse health care and health outcomes. This means that, by extension, workers with poor health literacy are a greater health risk to their organizations.

When individuals have limited personal health literacy, they are at higher risk of misunderstanding information that is important to achieving and maintaining health at home and on the job.

When individuals misunderstand health information and the need to make vital decisions about their health, they also misunderstand how to protect themselves at work.

Poor health literacy makes workers less amenable to work-related rules, policies, and procedures, which keep workers safe. As a result, work-related injuries are constant and challenging to curtail or contain.

How Organizations Can Improve Workplace Health Literacy

The best thing an organization can do to improve health literacy is to acknowledge that they can do more to improve it in the workplace.

Organizations need a Health Literacy Improvement Action Plan to improve health education and literacy and strategies for achieving them.

At the very least, The Health Literacy Improvement Action Plan should include the following:

- Adopting Integrated Wellness Strategies as the foundation of its workplace wellness mission and vision.
- Expand opportunities for access to health promotion and health education programs at work, at home, online, printed, etc.
- Insist on plain language health education and health promotion materials.
- Insist that organizations that make recommendations for new health programs and services provide plain language explanations to your employees in a variety of formats (webinars, online applications, emails, flyers, pamphlets, etc.).
- Insist on health education and health promotion materials in multiple languages, especially since multi-lingual workplaces are the norm rather than the exception.
- Improve communication by frequently promoting and offering access to culturally and linguistically appropriate health information and services.
- Understand and make a long-term commitment to improving health literacy in your organization, understanding that this will be a continuous and neverending process.
- Access to health education and health literacy must be considered as a core and foundational component of all your health programs and services.

If your organization needs assistance improving employee access to health education and health literacy programs and services, please click the following link. We would love to show you how to improve the health and wellness of your workplace. #Healthy Employees=Health Profits!