

Educational support materials for ABIM's *Care for the Underserved* Module

Module #9

Health Literacy is “the degree to which individuals have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions.” (1) Half of all adults in the US lack the health literacy skills to required to navigate our health care environment. In 2004, the Institute of Medicine published a report concluding that adults with limited health literacy: have less knowledge of disease self-management and health promoting behaviors; report poorer health status; are less likely to use preventive services; are more likely to be hospitalized; and are more likely to suffer poorer health outcomes for some chronic conditions. (2)

Patient participation in the medical encounter improves adherence and many health outcomes. Patients' literacy level affects their level of participation. Low literacy patients are more likely to ask physicians to repeat information and are less likely to seek new information. (3) They also are less likely to use medical terminology, refer to medications by name, and request additional services. (3) Physicians who care for patients with limited literacy should be aware that such patients may need extra encouragement to engage in discussions about their care.

Techniques to improve communication with patients with limited health literacy include simplifying clinical messages and ensuring patient understanding. (4) Translating medical data into information that will be meaningful to patients, including providing explicit interpretation of medical information can aid in understanding and adherence. In addition, avoiding medical jargon and including step-by-step instructions needed to complete critical tasks, using pictures and writing down simple instructions or key concepts may enhance communication. Encouraging questions and collaboration and confirming patient comprehension also increases effective communication. Clinicians can ask patients to repeat back what they have understood, promoting patient dialogue, and allowing for further clarification and tailoring of clinical messages. (4-7) Teaching patients to be active participants in the clinical encounter is also being promoted by the National Patient Safety Foundation through their “Ask Me 3,” patient education program which encourages patients to understand the answers to three questions: 1. What is my main problem? 2. What do I need to do? 3. Why is it important for me to do this? (8)

This educational support material was created by the Society of General Internal Medicine's Disparities Task Force. For more information, visit www.sgim.org/qo/disparities

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For further information, see the following:

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8. National Patient Safety Foundation Ask Me 3 Program : <http://www.npsf.org/askme3/>