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Health Literacy and Inequities: Canadian Experience

**Irving Rootman, Executive Director, Health and Learning
Knowledge Centre, University of Victoria**

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Outline

- **Canadian Definition of Health Literacy**
- **Distribution of low health literacy**
- **Relationship to health**
- **What is being done to address the issue**
- **What needs to be done**
- **Implications for British Columbia**



Health Literacy is...

- **the ability to access, understand, evaluate and communicate information as a way to promote, maintain and improve health in a variety of settings across the life-course (Rootman and Gordon-El-Bihbety, 2008).**

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Distribution of low health literacy in Canada (Numbers)

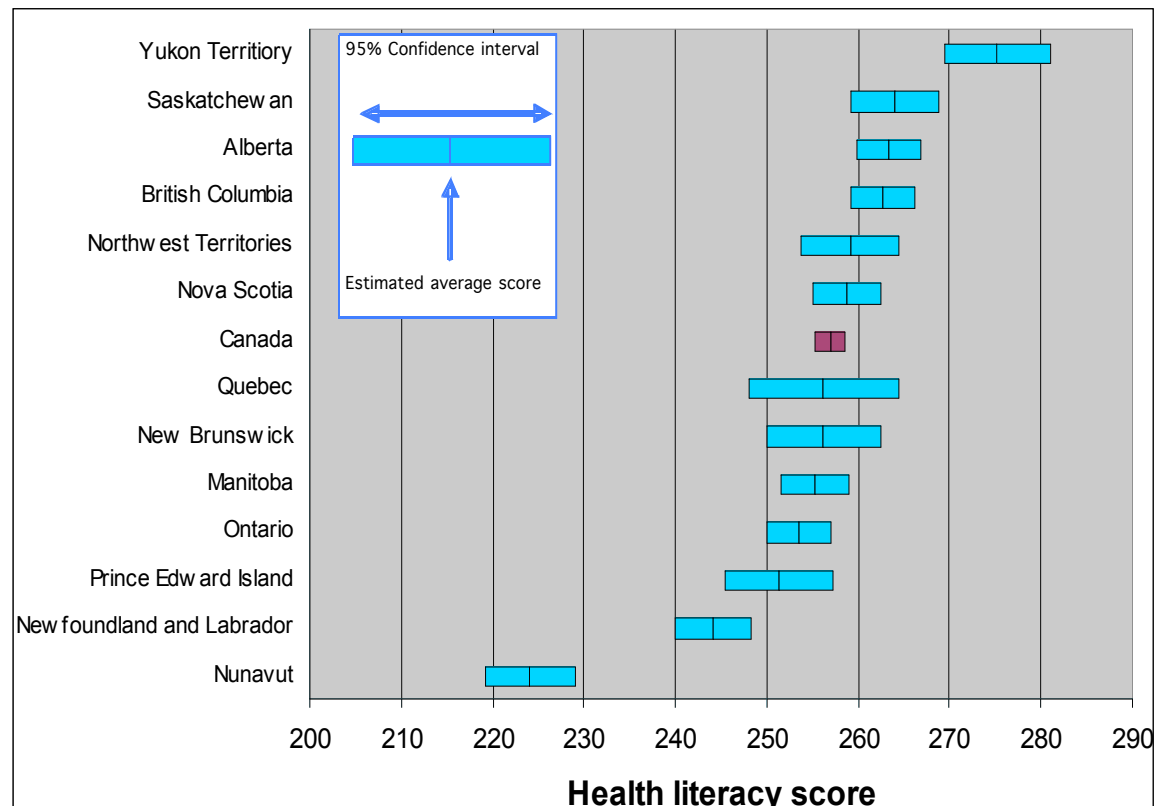
- Based on the 2003 IALSS, **11.7 million** working age residents of Canada (55%) are estimated to lack the minimum level of health literacy needed to effectively manage their health information needs (CCL, 2007a).
- When seniors are added, an estimated **14.8 million** may be without adequate health literacy skills. An estimated 88% of respondents 65+ fell below Level 3 on the Health Literacy Scale in the 2003 IALSS survey (CCL, 2007a).

Level 3 is considered the minimum level of proficiency required to meet the demands of modern day life including those posed by health information

Source: State of Learning in Canada 2007, Canadian Council on Learning, based on IALSS 2003

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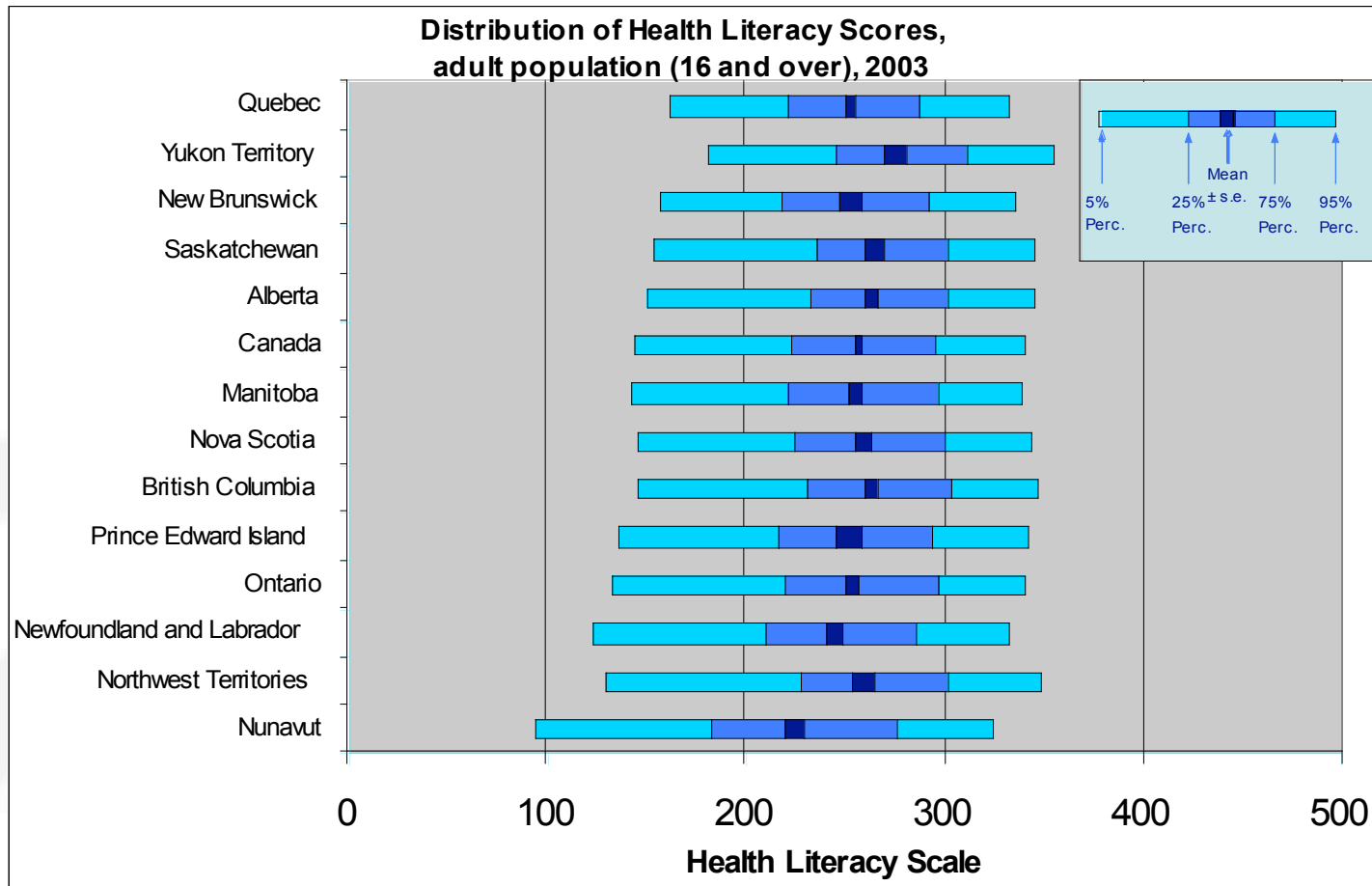
Distribution of low health literacy in adult population in Canada (by Province/Territory)



Source: Health Literacy in Canada: Initial Results, 2007b, CCL,
based on IALSS 2003

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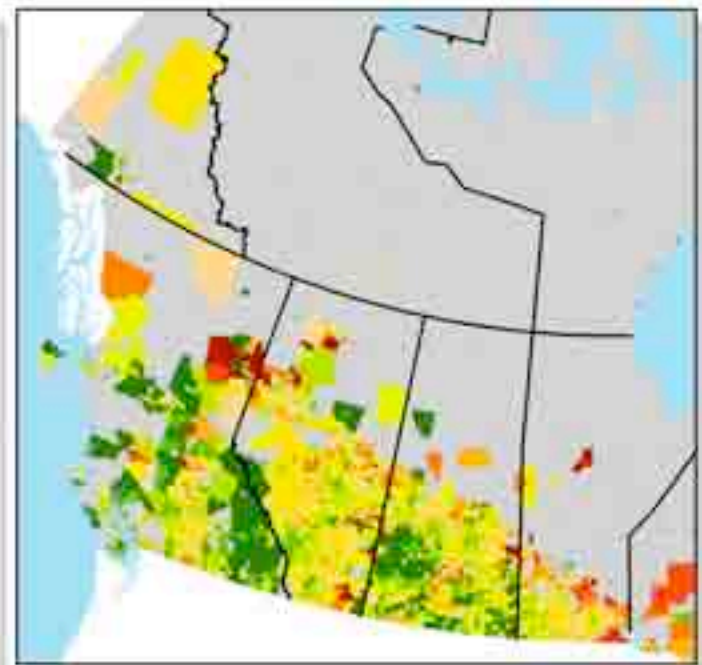
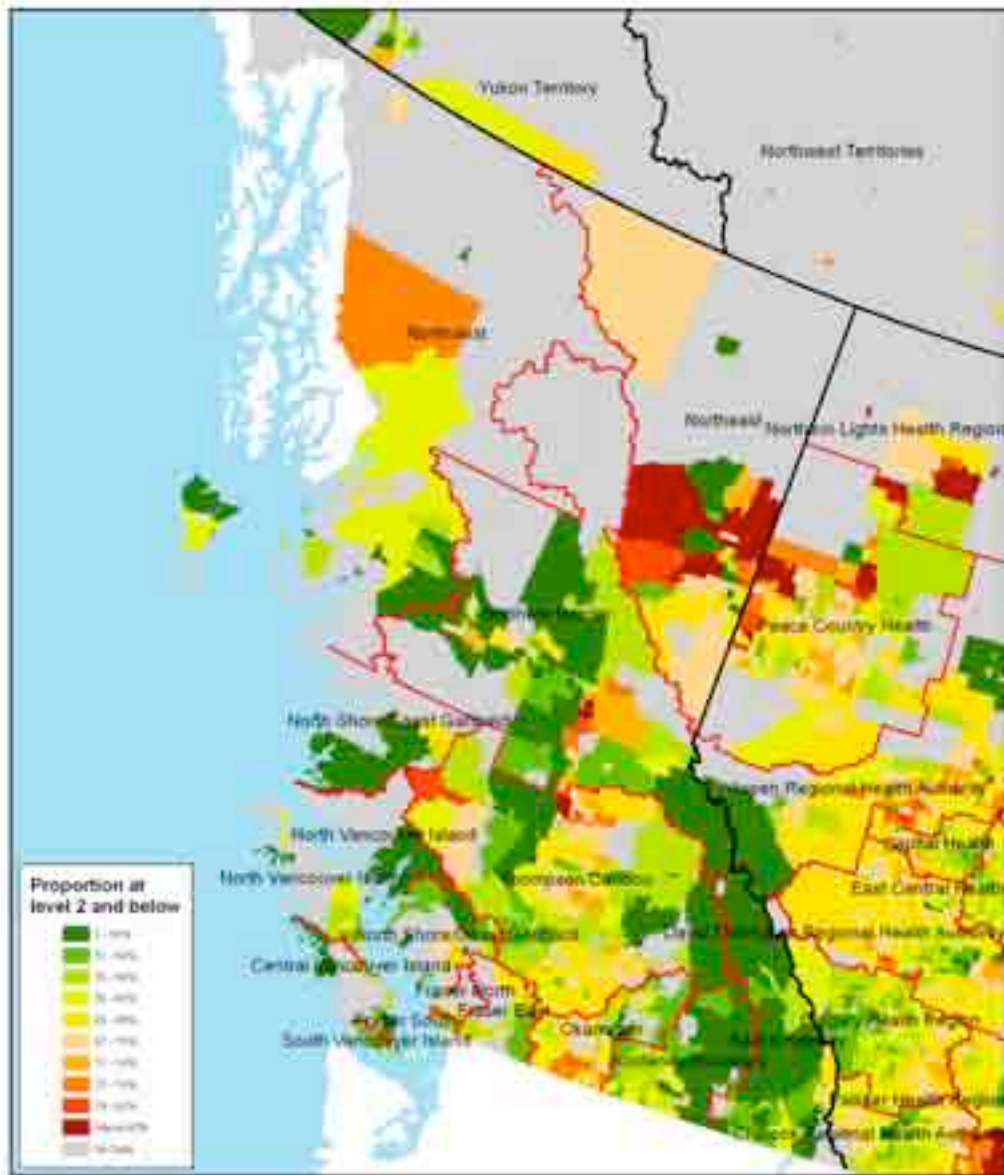
Source: Health Literacy in Canada: A Healthy Understanding, CCL, 2008, based on IALSS 2003

Distribution of low health literacy in adult population in Canada (within provinces/territories)



The Distribution of Health Literacy in British Columbia

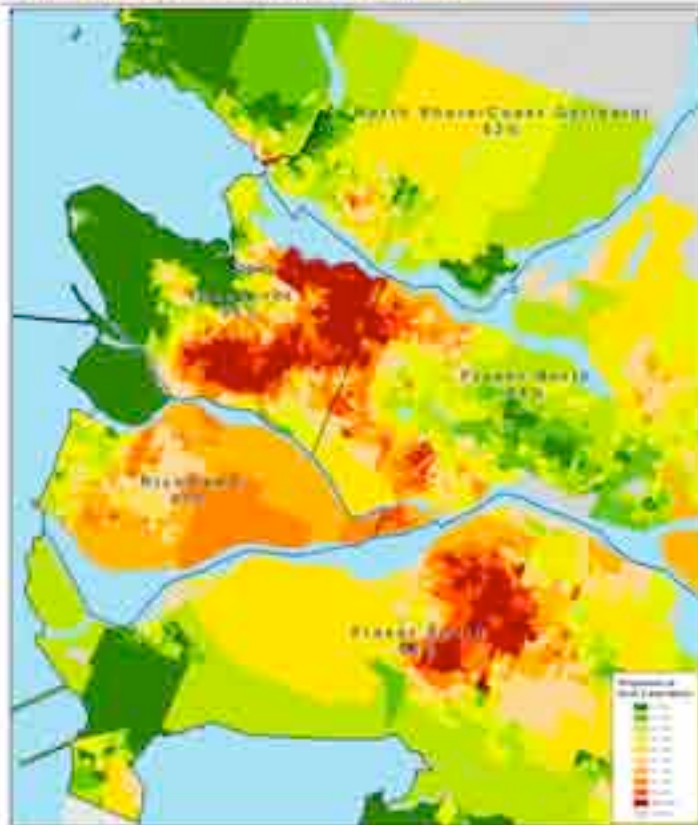
Proportion of adult health literacy at level 2 and below, ages 16 and older



Proportion of adult health literacy at level 2 and below, ages 16 and older	
British Columbia	54%
East Kootenay	43%
Kootenay/Boundary	48%
Okanagan	50%
Thompson/Cariboo	58%
Fraser East	55%
Fraser North	54%
Fraser South	56%
Richmond	61%
Vancouver	59%
North Shore/Coast Garibaldi	50%
South Vancouver Island	49%
Central Vancouver Island	50%
North Vancouver Island	53%
Northwest	61%
Northern Interior	49%

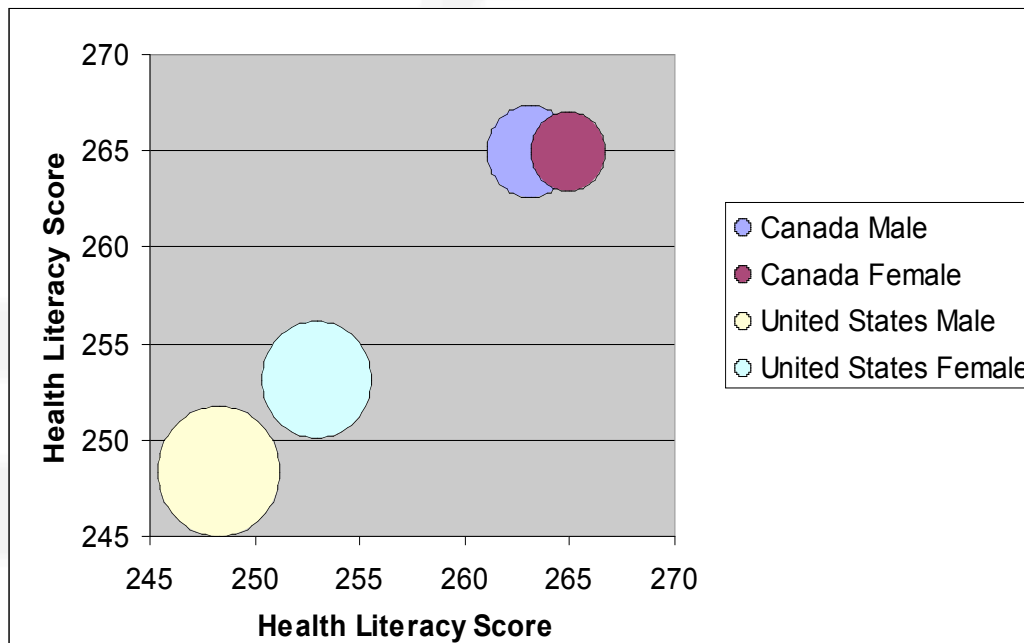
Vancouver

Health Library: Prevalence of Level 2 and below



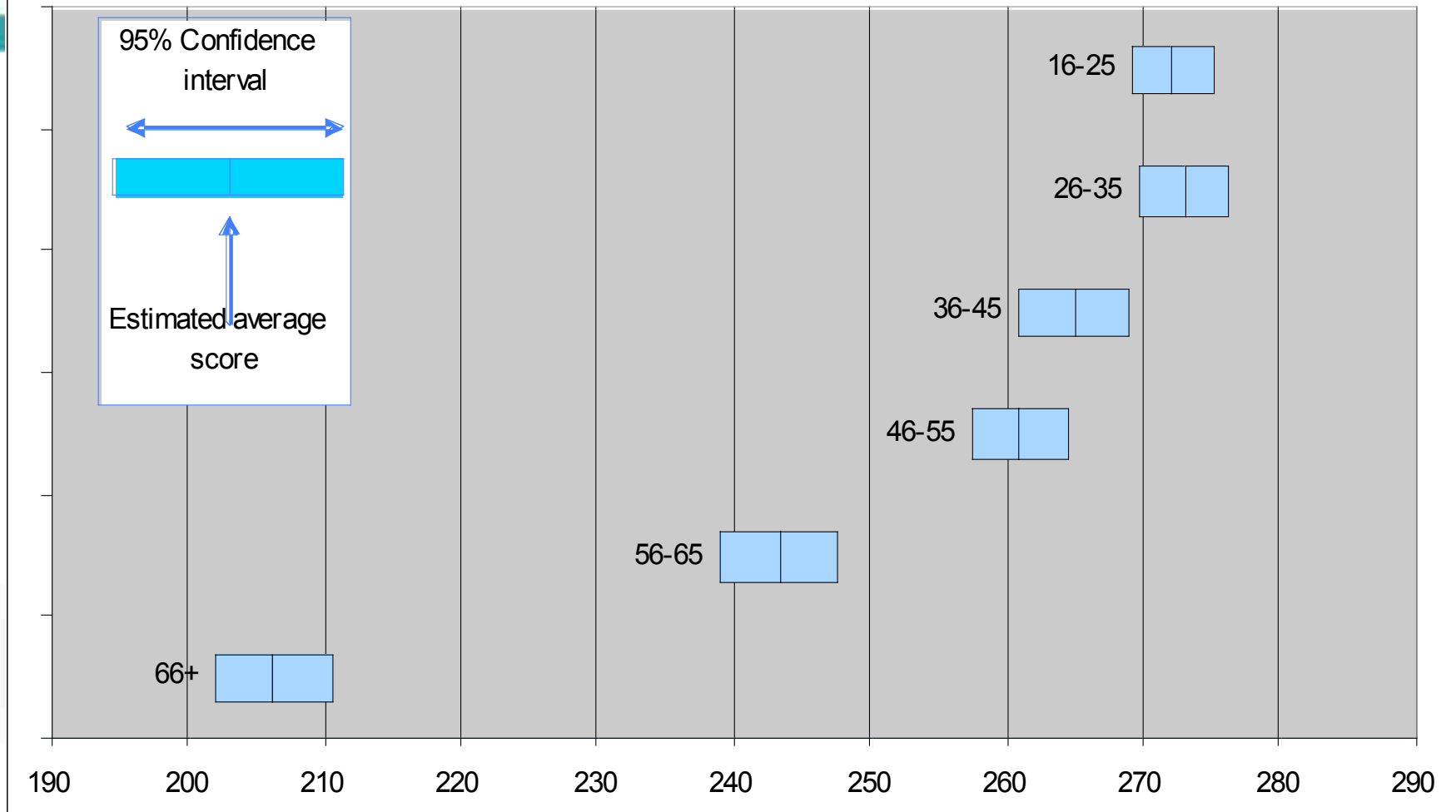
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Source: Health Literacy in Canada: Initial Results, 2007, CCL, based on IALSS 2003

Health Literacy Scores and Confidence Intervals by Age Group, Canada, 2003

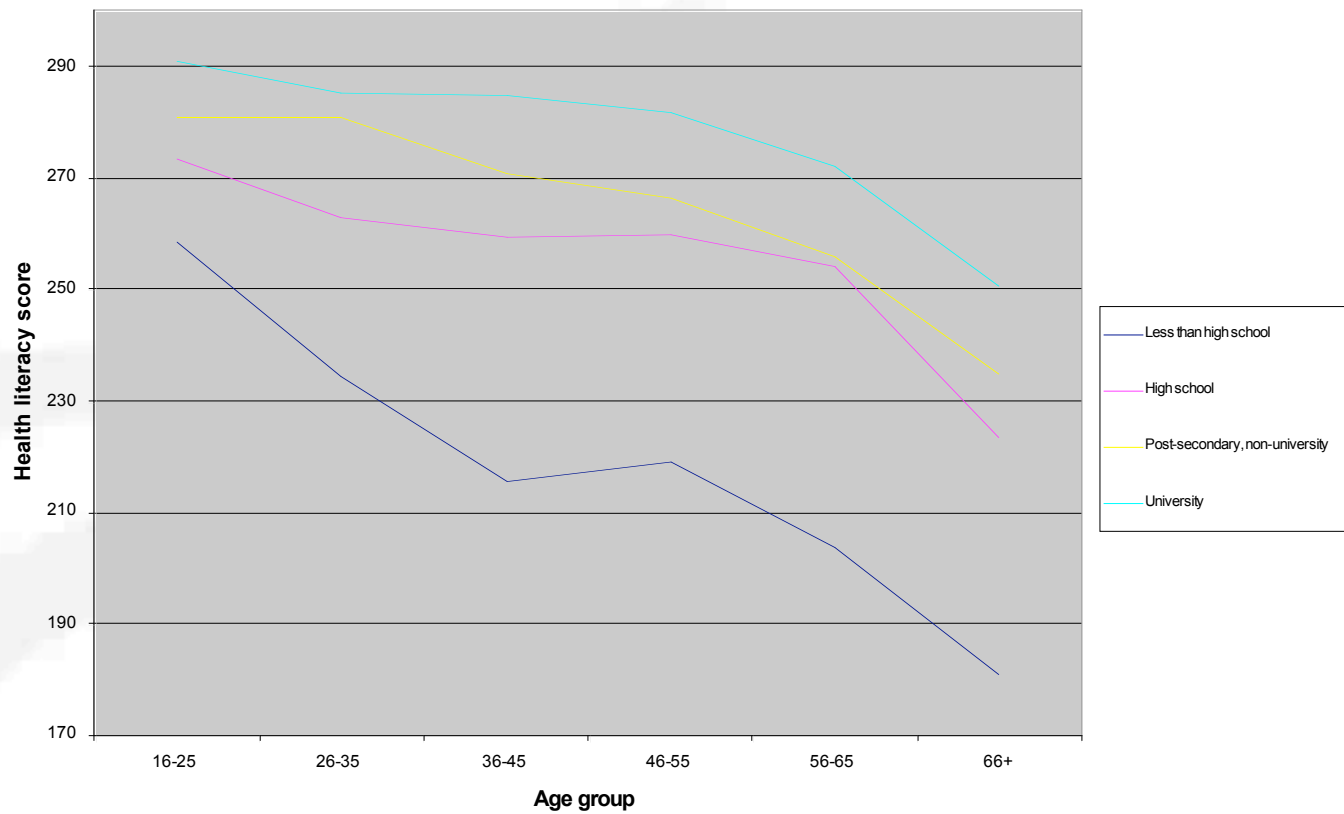


Source: Health Literacy in Canada: A Healthy Understanding, CCL, 2008, based on IALSS 2003

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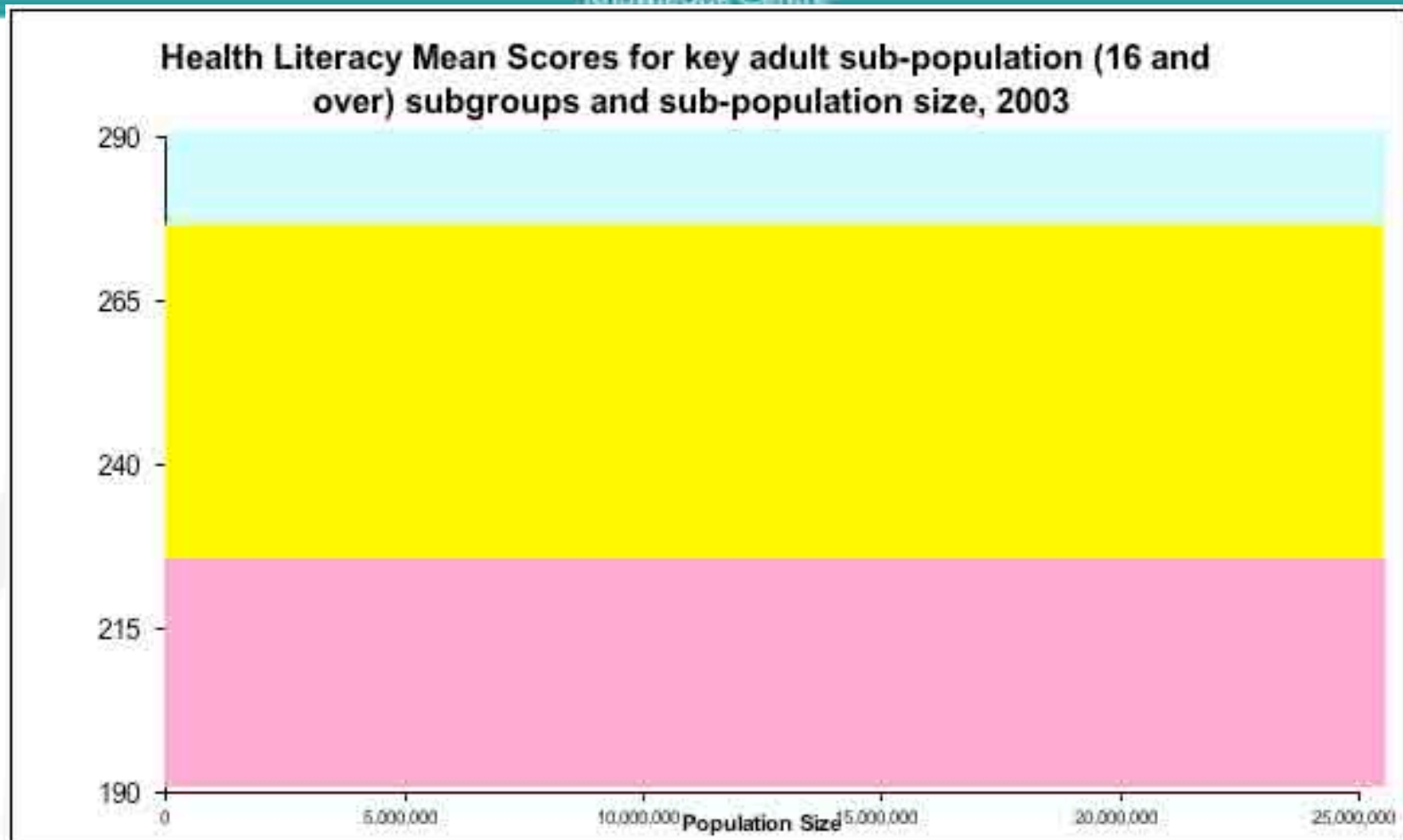
Average health literacy score, by age group and education level, Canada, 2003



Source: Health Literacy in Canada: Initial Results, 2007b, CCL, based on IALSS 2003

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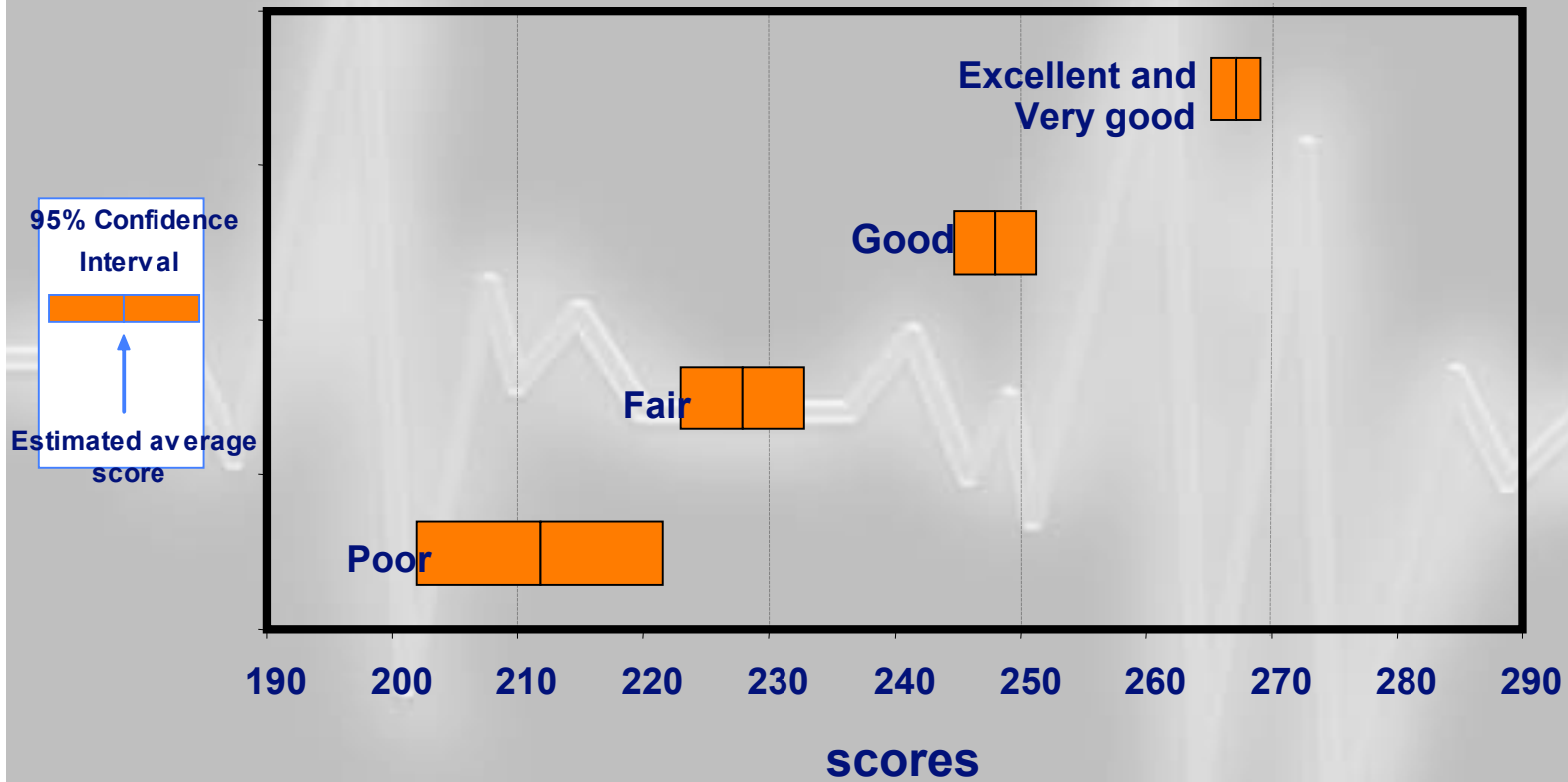


Source: Health Literacy in Canada: A Healthy Understanding, CCL, 2008, Based on IALSS, 2003

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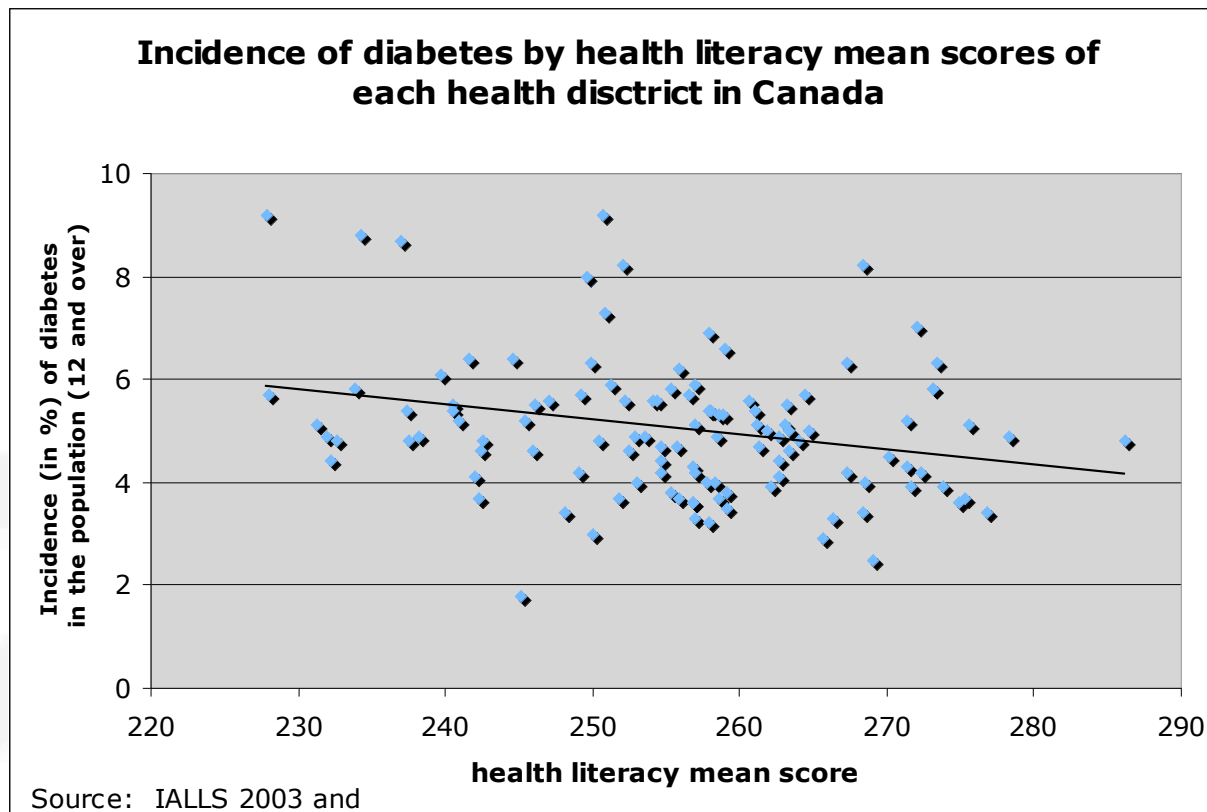
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Health Literacy Scores by Self-perceived General Health Status, Canada, 2003



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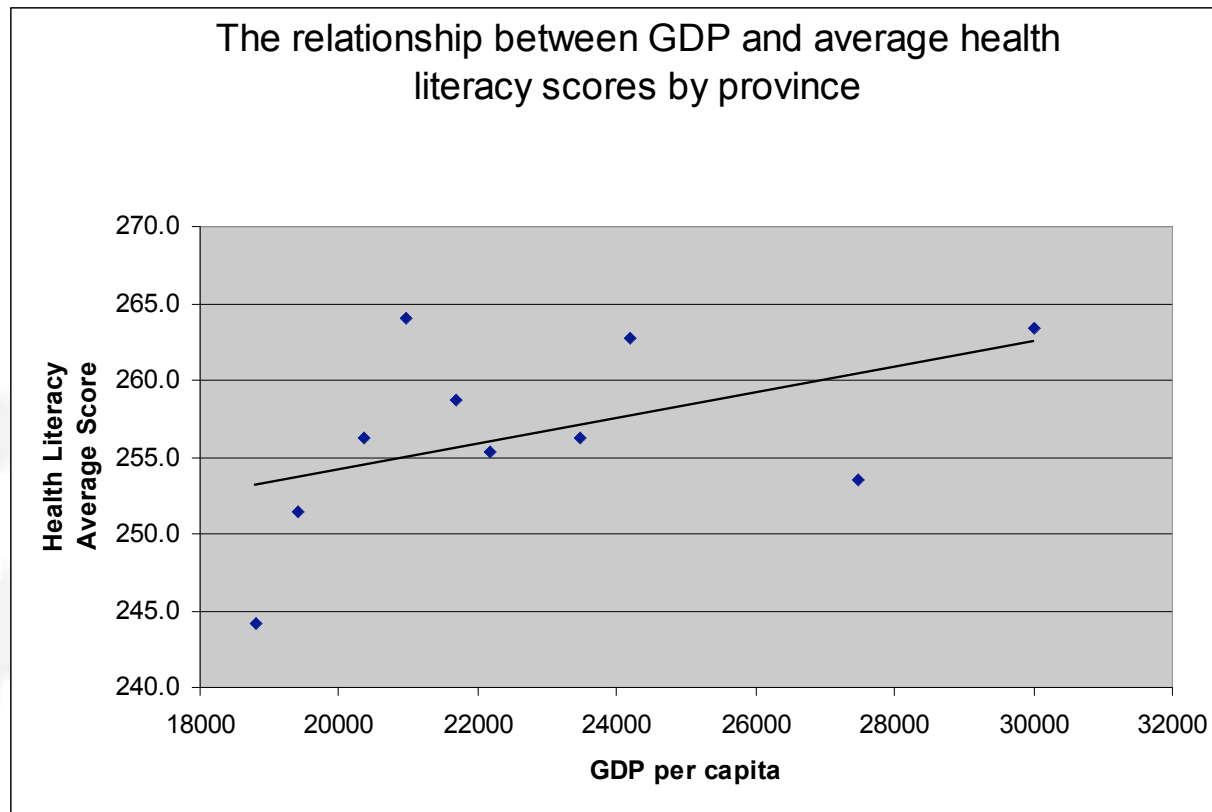
Source: Health Literacy in Canada: A Healthy Understanding, CCL, 2008, based on IALSS, 2003

Increasing chronic disease and health literacy:

- The number of people with diabetes in Canada is projected to increase from approximately 1.4 million patients in 2000 2.4 million in 2016 (Ohinmaa, et al., 2004)
- One of the ways to address chronic disease which is being increasingly used is patient self-management (McGowan, 2005)
- Low health literacy is a barrier to effective self-management. A review of randomized control trial studies found that 62% of patients with lower reading skill levels were unable or unwilling to engage in self-management (Johnston et al., 2006)
- Improving literacy and health literacy may lead to improved self-management of chronic diseases

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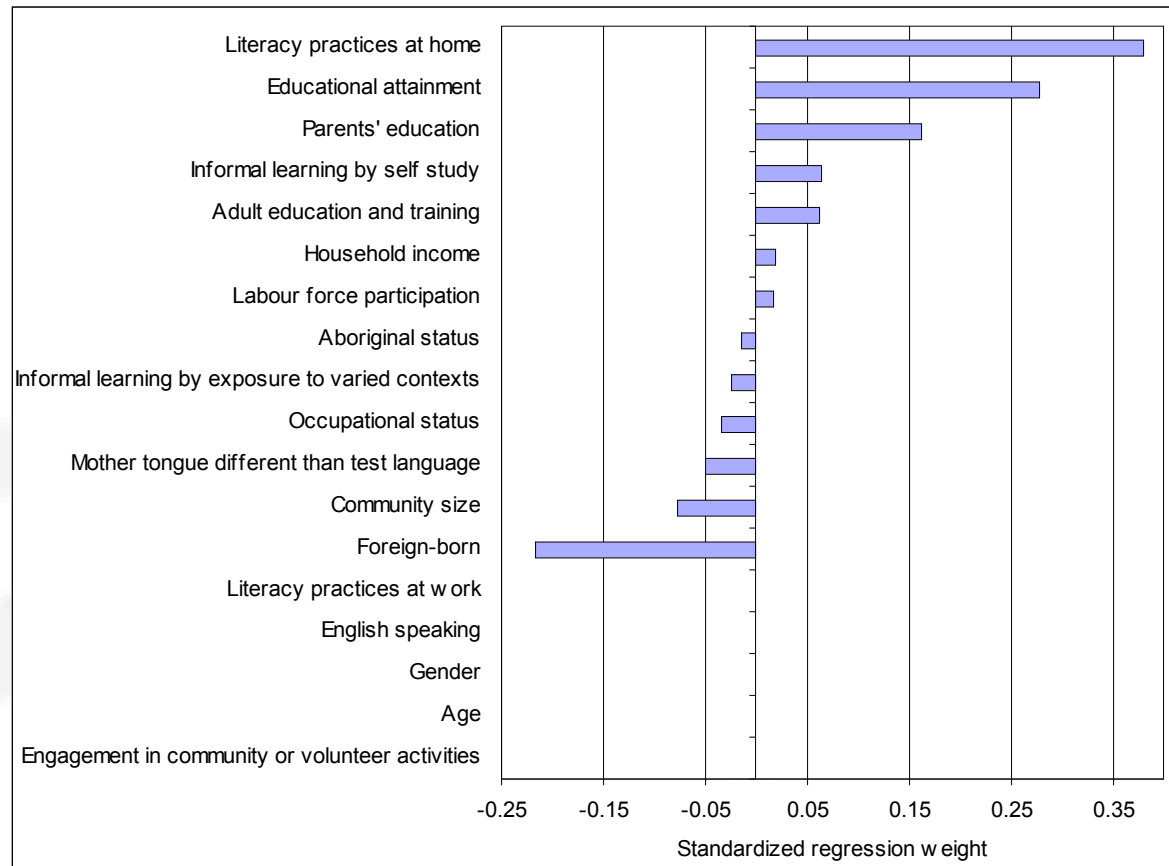
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Source: Health Literacy in Canada: A Healthy Understanding 2008, CCL, based on IALSS 2003

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Factors Predicting Health Literacy for Adults aged 16-65



Source: Health Literacy in Canada: A Healthy Understanding 2008, CCL, based on IALSS 2003

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Current Canada-wide Initiatives:

- **CPHA Literacy and Health Program and resources**
- **CAPC and CPNP**
- **Movement for Canadian Literacy (MCL)**
- **Fédération canadienne pour l'alphabétisation en français (FCAF)**
- **Canadian Alliance on Mental Illness and Mental Health**
- **Canadian Council on Learning**
- **National PHAC Collaborating Centre on Determinants of Health**
- **CPHA Panel on Health Literacy**
- **Health Literacy Maps**

Province/Territory wide initiatives:

- Health Literacy Network (B.C.)
- Healthy Aboriginal Network (B.C.)
- Health Literacy Research Team (B.C.)
- Healthy living performance standards for Schools (B.C.)
- The Literacy Audit Kit (Alberta)
- “It’s Safe to Ask” Project (Manitoba)
- Literacy and Health Project (Manitoba)
- To be Born Equal-To Grow to Health Program (Quebec)
- Literacy and Health Project (Quebec Centre for Literacy)
- Health Literacy in Rural Nova Scotia Research Project
- Promoting Literacy in Healthy Public Policy (PEI)
- Discussion paper for Inuit communities on literacy and health (Nunavut)
- Health Check (N.W.T.)

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Current Local Initiatives

- **Hispanic Health Literacy Video Project, Vancouver**
- **Farsi-speaking T.V. series on Health, Vancouver**
- **Outreach Librarian Position, Vancouver (VGH and UBC Hospital Foundation)**
- **Appointment of mental health literacy officers in hospitals (B.C.)**
- **Health and Literacy Committee, Prince Albert Saskatchewan**
- **Health benefits of literacy project, READ Saskatoon**
- **Alphabet Soup, Winnipeg**
- **Community Health Assessment, Brandon**
- **Diabetes Management project, Ottawa**
- **Literacy and Health project, North Bay**
- **Patient Education project, Hamilton**
- **Naître égaux – Grandir en santé, Quebec**
- **Montreal Hospital project**
- **“Do I Need to See the Doctor?”, Guysborough Antigonish Strait Health Authority, Nova Scotia**

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Canada's contribution to health literacy field:

- **Conceptualization: Definition; Conceptual framework**
- **Measurement: HALS; E-Health Literacy Scale; Oral Health Literacy Scale**
- **Research: Access to internet health information; NS HL Project; Analysis of distribution and determinants of HL**
- **Resources: Health Literacy Module; Literacy Audit; HL Maps; Plain Language Service; N.S. Video**
- **Models: NLHP; HL Network; Local Committees**
- **Policy: Expert Panel; PEI project**
- **Practice: HL Comic books; Spanish HL Video project; Montreal Hospital project**
- **Knowledge Exchange: National HL Conferences; Summer Schools; Institutes**

What should we do Nationally:

Develop a comprehensive, coordinated, cooperative and integrated Pan-Canadian Strategy on Health Literacy be developed, funded and implemented to improve the level of health literacy in Canada, and the extent to which people receive the support they need to cope with the health literacy demands they encounter (Rootman and Gordon-El-Bihbety, 2008).

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Goals of strategy:

- 1. To improve literacy and health literacy**
- 2. To reduce inequities in literacy and health literacy**
- 3. To enhance the capacity of individuals and the systems that serve and support them to improve their health literacy levels and to receive services that are appropriate for their current levels of health literacy**

(Rootman and Gordon-El-Bihbety, 2008)

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Promising Approaches :

- **Develop and undertake a coordinated multi-media campaign to increase awareness of the issue of health literacy in Canada among the public and specific audiences**
- **Integrate health literacy into curricula from primary and secondary education through to adult education and seek resources for doing so from governments, the private sector and foundations**
- **Set population-specific targets for health literacy, monitor and report progress**
- **(Make health literacy a mandatory component of service provider curricula, professional continuing education, and professional registration and certification**
- **Develop policies on use of plain/clear language and visual symbols in health communications, guidelines and prototypes including accreditation standards for health communications and interactions, and undertake assessments/audits of accessibility of service provision systems and institutions as well as health services accreditation.**

(Rootman and Gordon-El-Bihbety, 2008)

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Promising Approaches (Cont.):

- **Develop pertinent funding streams to address health literacy research and programming**
- **Develop mechanisms to coordinate federal, provincial and territorial and Aboriginal governments policy and program delivery to promote health literacy across the life span**
- **Develop mechanisms to evaluate health literacy interventions, allocate adequate funding, and disseminate the findings**
- **Establish a multi-stakeholder Pan-Canadian Council on Health Literacy at arms length from government to monitor and assess progress, facilitate partnerships between organizations and provide strategic direction**
- **Develop a parallel process to the one undertaken in producing this report by Aboriginal organizations and people**

(Rootman and Gordon-El-Bihbety, 2008)

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Implications for British Columbia:

- **Strengthen and build on existing initiatives in British Columbia and Canada**
- **Review and assess feasibility of promising approaches suggested by Expert Panel**
- **Consider successful approaches from other countries such as the U.K.**

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Question for today:

Which approaches or resources from the UK are relevant for British Columbia?

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To contact me:

- irootman@uvic.ca

