



Health Literacy and Schools

Presentation by Irving
Rootman to meeting to discuss
Health Schools Performance
Standards

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Definition of Health Literacy

- “the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand, and use information in ways which promote and maintain good health” (Kickbusch and Nutbeam, 1998)

Levels of Health Literacy

(Nutbeam, 2000)

- Basic functional
i.e. Building knowledge of ones body, nutrition, hygiene (teaching and learning)
- Communication interactive
i.e. interpersonal relationships, critical thinking and decision making skills (social environment)
- Critical literacy
i.e. skills in advocacy (social action) and personal empowerment – of benefit to the individual and the community (influenced by school culture)

Research shows there are strong links between health and educational achievement.

Health Literacy in School Setting

Health literacy - educational goal	Content	Outcome
Functional – communication of information	Basic information – nutrition, balanced diet, healthy foods	Increased knowledge of factors that enhance and inhibit health
Interactive communication – development of personal skills	Develop specific skills – food preparation, food safety, nutritional values, budgeting, planning	Improved capacity to be independent and take care of own health
Critical - empowerment	Classroom and community learning opportunities which affect inequities, ways of affecting change	Capacity to participate in school and community action to bring about health improvement for others

Reference: L. St. Leger

Our Definition of Health Literacy

- *The degree to which people are able to access, understand, appraise and communicate information to engage with the demands of different health contexts in order to promote and maintain good health across the life-course (BC Health Literacy Research Team)*

Aim of our Project

- ❑ To develop an empirically/ theoretically-driven measurement tool appropriate for assessing health literacy in secondary school students.

Objectives

- 1) develop and validate measures of health literacy for use in the school context
- 2) test the relevance and utility of these measures in diverse school districts in BC
- 3) examine differences in health literacy between genders, cultural groups, socio-economic groups, urban/rural groups and other groups within the school population in BC





Progress to date

- 1) Reviewed health literacy-related literature
- 2) Developed an operational definition, framework, standards, and domain descriptors
- 3) Gathered preliminary data from experts, teachers and students:
 - Initial focus group with experts
 - Web-based and telephone interviews with key-informants
 - Student-surveys
 - Teachers/students focus groups
- 4) Developed scenarios and web-based measurement tools
- 5) Pilot tested scenarios & tools






Definition of Health Literacy in School Context

- The degree to which students are able to access, understand, evaluate and communicate basic health information

Core Standards for Student Health Literacy

-  Students will demonstrate the ability to ***access*** information, products and services to enhance health
-  Students will ***understand*** concepts related to health promotion and prevention of disease, disability and injury to enhance health
-  Students will be able to ***evaluate*** information about health and analyse the influence of family, peers, culture, technology and other social and environmental factors on health and health behaviours
-  Students will demonstrate the ability to ***communicate*** about health issues and use interpersonal communication skills to enhance health and avoid or reduce health risks

Secondary (Behavior-related) Standards for Student Health Literacy

-  Students will demonstrate the ability to *use goal-setting skills* to enhance health
-  Students will demonstrate the ability to *practice* health-enhancing behaviors and avoid or reduce health risks
-  Students will demonstrate the ability to *use decision-making skills* to enhance health
-  Students will demonstrate the ability to *advocate* for personal, family, and community change that enhances health.
-  Students will be able to *understand and respect* different cultural, racial and religious beliefs in respect to health

Factors affecting health literacy

- Teachers, key-informants and experts suggested that health literacy skills are influenced by variables, such as age, gender, economic situation, culture, beliefs, values, attitudes, language (e.g., immigrants), peer pressure, media, accessibility of health information, and how health information is communicated (e.g., common and plain language).

Important Health Topics

- The top six health topic priorities identified by students, teachers and experts were:
 - 1) Sexual health (e.g., STDs, HIV, reproduction);
 - 2) Mental and emotional health (e.g., depression, anxiety, stress, drug use);
 - 3) Nutrition and diet (e.g., healthy eating);
 - 4) Alcohol abuse (e.g., drinking and driving),
 - 5) Fitness (e.g., exercise, obesity); and
 - 6) Drug abuse

Sources of Health Information for Students

- 📁 Most students used multiple sources of information.
- 📄 The major sources for students to receive health information:
 - Internet (39%), Books (28%), Doctors (27%), Magazines (22%), and Parents (18%)
- 2) People with whom students talk about health issues:
 - Friends (28%)
 - Parents (27%)
 - Doctors (15%)
 - Family members (14%)
 - 6% or less identified Siblings, Teachers, Chat rooms, and Grandparents

How students evaluate whether or not the health information they found or received was accurate

- 1) 58% said they would confirm it with another source:
 - Ask a doctor (28%)
 - Search on the Internet (19%)
 - Ask a parent (7%)
- 2) Simply trust it (20%)
- 3) Use their own judgment (9%)
- 4) Apply the information to their lives (7%)
- 5) Did not know how to check the accuracy (4%)
- 6) Did not spend time to check it (2%).

Health scenarios

- Based on the findings of the 1st stage of the study and suggestions made by the research team, we have developed and tested seven scenarios: Nutrition (i.e., Energy drinks), and Mental Health (i.e., Depression), STIs (HPV), Exercise (Active Body and Diabetes and Exercise) and Drug (Crystal Meth and Ecstasy).
- The rest of the scenarios will be developed based on the top six most important health topics for students that were identified by teachers, students and experts

Mental Health Scenario

- ❑ You are walking to school with one of your best friends who has not been acting their normal self now for the last couple of weeks. You have noticed that your friend has been staying in on weekends more than usual and has not been returning your phone calls, or any other friends' calls lately either. As soon as your friend goes home after school, they go straight to their room and lock the door.
- ❑ During your walk, you ask your friend, "Why have you been missing so many of our team practices lately?" Your friend shrugs their shoulders and does not say anything. You both continue walking to school in silence. Upon arrival at school and just before you part to attend your separate homerooms you remind your friend about the team meeting at noon in the cafeteria. You and the team are waiting for your friend in the cafeteria at lunchtime who has not shown up for the team meeting. You are becoming curious about your friend's absence and you go looking for them around the school. You find your friend sitting alone under a tree outside eating their lunch. You approach your friend and ask them, "What is wrong?" Your friend says, "I don't know. I just want to be alone. I want to go home...go to sleep...and never wake up."
- ❑ You are concerned that it is possible that your friend could be depressed and perhaps, could even hurt themselves. You wonder if this could happen to you someday and you decide to find information about feeling this way in the quest to help your friend.

Introduction to Questions Related to 'Deep Thoughts' Scenario

- Last week, you were given a scenario called “Deep Thoughts” and asked to find information to help your friend. This survey is about your experiences with finding information for that scenario. Your answers are important in helping us learn how and where teens look for information on depression, and how relevant the information is for them. Please answer the questions as well as you can. Please note that you may leave the study at any time, or choose not to answer a question, without any negative consequences.

Questions Related to Access

- 1a) During the past week, which of the following source(s) did you use to find information on depression?
- 1b) Which ONE of the above sources was the most helpful for you? In what way(s) was it helpful?
- 1c) Which of the above sources was suggested to you by someone else? Please specify who suggested it.
- 1d) How much time in TOTAL did you spend finding information on depression? Please give an estimate using minutes or hours.
- 1e) Overall, how easy was it for you to find information on depression?
- 1f) How much do you agree/disagree with the following statement? "I have found enough information on depression to be able to help my friend"

Plan

- Continue you to apply the scenarios and web-based tools in different secondary schools across the province (among ~2000 grade 10th students)
- Validate the scenarios and web-based tools for assessment of health literacy among secondary school-age students in Canadian school context

For More Information Contact

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