Studies show that most people have trouble getting and understanding the information they need to take care of their health. 

Health literacy is the capacity to obtain, interpret and understand basic health information and services and the competence to use such information and services to enhance health.

People’s health behaviors and choices, and ultimately health and well-being are significantly shaped by the ability to obtain, process, and turn good information into action.

Health literacy reflects the dual nature of effective health communication.

Health literacy is functional. It occurs when skills and abilities to get and use information are aligned with the complexity/ clarity of demands/tasks required for health.

A health literate population is one where skills of the public are concordant with the demands of tasks required for health.

Health literacy is a central life skill that allows people to take more responsibility for their own, their families’ and their communities’ health.

**What information do I need to know to make the best decisions for my health?**

*Where can I get information I can trust?*

*Does my ill 2 year old need to see a doctor?*

*Should I get screened for breast or prostate cancer? Or diabetes? Or heart disease?*

*How do I make the best food choices for me and my family’s health?*

*Should I breast feed my baby? How long?*

*Do I need vitamin supplements? More exercise?*

*What can I do to stop smoking?*

*Is my community’s air, water and roads safe?*

*Studies show that most people have trouble getting and understanding the information they need to take care of their health.*
There is an epidemic of poor health literacy in all countries which reflects the magnitude of problems with both peoples’ literacy skills/ability and “system” tasks demands/complexity.

Skills and abilities are not well aligned with demands and complexity.

On the one hand people with weak health literacy skills have trouble accessing and understanding information. On the other hand health, education and other social systems are increasingly complex and make demands on users which are beyond their capacities.

When skills and demands are out of sync health suffers. Numerous studies in many countries show that weak health literacy is associated with:

- Poorer health choices
- Riskier behaviors
- Worse health
- Higher mortality
- More hospitalizations
- Higher health costs

Creating health literacy friendly systems that better align skills and capacities of their users with the demands and complexities of the systems that serve them is vital. Improving health equity, reducing costs, and increasing quality of health care and outcomes requires strengthened health literacy.

**Efforts to improve quality, decrease disparity, and reduce costs will not succeed without simultaneous improvements in health literacy (IOM, 2003).**
Guide Fact sheet 3
5 Actions to Improve Health Literacy

1. Recognize the problem and its significance. Include health literacy on your action agenda.

- Assess health literacy among your target populations.
- Measure the alignment of skills/abilities with task demands/complexity. Both must be measured. The goal is for both to be “health literate”.
- Identify and monitor indicators that will reflect progress toward aligning skills with demands.
- Measure skills and abilities on multiple levels. What gets measured gets done.

2. Support improvements in education and information access.

- Make health literacy skills an essential element on school agendas.
- Help children and adults opt for healthy choices in everyday life.
- Help people access and evaluate reliable sources for health information.

3. Build “health literacy friendly” systems that better align demands with skills.

- Identify the specific health demands/tasks for targeted health actions.
- Understand and simplify navigational demands.
- Sensitive and trained providers.
- Identify and communicate essential information and desired behaviors in an accessible, understandable, and culturally sensitive way.

4. Set, measure, and evaluate goals for improved alignment of skills/ability with task demands/complexity.

- Tasks- How complex are they?
- Information- Is it understandable?

5. Engage with members of your target population at all stages of planning, implementation, and evaluation. The real experts in health literacy are those with trouble understanding what they must do to take care of their health.
Guidance Fact Sheet 4

Key Stakeholders- Actions to enhance health literacy

General public

1. Strengthen literacy- engage with education system.
2. Learn about yours rights and responsibilities
3. Ask and act- Seek out information from health providers, systems and other reliable sources. Where access denied advocate for change.
4. Support others- join forces with patient associations, community groups seeking enhanced alignment between skills and demands.

Policy Makers

1. Recognize the epidemic of low health literacy and that improvements in health equity, affordability, and quality require health literacy.
2. Put health literacy “on the agenda”. Develop policies that support health literacy
3. Fund needed research

Health Professional and Advocates

1. Approach health literacy with “Universal precaution”. Weak health literacy is common and often undisclosed.
3. Enhance your communications skills. Provide information in accessible, understandable and culturally sensitive ways.
4. Advocate for system changes where needed. Use your professional associations and cultural authority to catalyse policy and structural changes needed to strengthen people’s skills and system’s friendliness.

Researchers

1. Develop and test assessment tools which can measure skills and abilities and demands and complexities.
2. Develop causality models that can explain the relationships between skills and demands at different life stages and in different settings
3. Evaluate interventions
4. Develop a health literacy index.

Educators

1. Use all formal and informal health literacy training opportunities
2. Use new approaches and technologies
3. Address health literacy across the lifespan.

Comments on Fact Sheets? Send to franklin@whcaonline.org