



HEALTH SYSTEMS & HEALTH LITERACY IN THE TIME OF COVID-19

SESSION 2 - EHMA COVID-19 WEBINAR SERIES

Practical information

1. All participant microphones are muted by the moderator to keep the audio clear
2. Click 'CHAT' at any point during the presentation to ask a question – they will be answered at the end of the presentations
3. Recording of all webinars will be available soon after the webinar airs at ehma.org/covid-19-webinar-series



George Valiotis
EHMA Executive
Director

Agenda:

- Health systems and health literacy in the midst of the coronavirus outbreak:
 - a. Importance of health literacy
 - b. Role of health managers and decision-makers
 - c. How can health managers facilitate developing a health literate society?
- Q&A with the audience

Overview
5 min

Presentation
by Stephan
Van den Broucke
10 min

Presentation
by Kristine
Sørensen
10 min

Q&A
10 min



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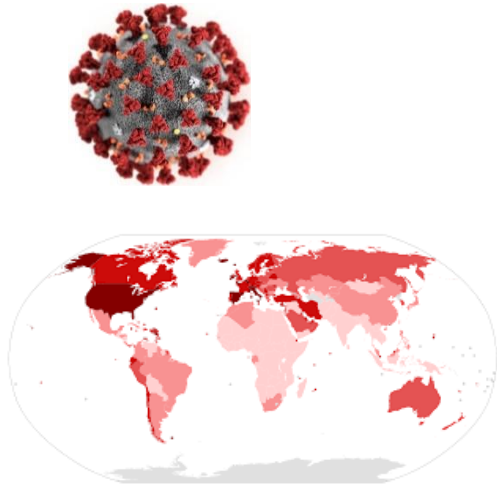
Health Systems and Health Literacy in times of COVID-19

Stephan Van den Broucke
UC Louvain

Webinar “Health Systems and Health Literacy in the time of COVID-19”

23 April 2020

European Health Management Association



COVID-19

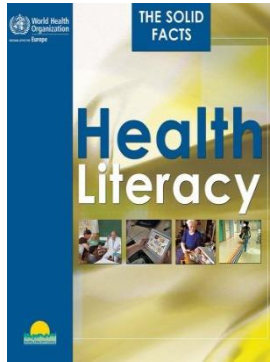
- Huge health and societal impact
 - Measures to prevent the virus from spreading and to reinforce treatment capacities of the health system are unprecedented for any health problem in modern history
 - Lockdown has disruptive societal consequences
- Importance of self-determination
 - Many protective measures involve **behaviour change** by citizens & health workers
 - Perception that the existing health system is failing to protect citizens against the spread of the virus creates a need for people to **regain control** of their health
 - to protect oneself against the disease
 - to deal with its disruptive consequences
 - Self-determination relies on **information**



Health Literacy & COVID-19

- To (re)gain control of their lives in the pandemic people must be well informed
 - know what individual preventive measures to take
 - know how to deal with the consequences
- With respect to COVID-19, there is (too) much information
 - not all information is useful
 - some information is biased or wrong
 - too much information can create confusion
- Need to make information “health literacy proof”
 - provide information in an understandable, transparent and consistent way
 - acknowledge that taking up, understanding and acceptance information is an active cognitive process
 - counter false beliefs that are reinforced by the false consensus created through information-sharing on social media by encouraging to
 - cross check the accuracy and credibility of information
 - check the source of information
 - where does it come from, who is behind the information, what is the intention, why was it shared, when was it published ...
 - verify the information by consulting a second source
 - think twice before sharing information that has not been fact-checked

Health Literacy



« A person's knowledge, motivation and competences to access, understand, appraise, and apply health information in order to make judgments and take decisions in everyday life concerning healthcare, disease prevention and health promotion to maintain or improve quality of life during the life course »

Sørensen et al., Health literacy and public health: A systematic review and integration of definitions and models. *BMC Public Health*. 2012;12:80

Expanding scope and meaning of health literacy

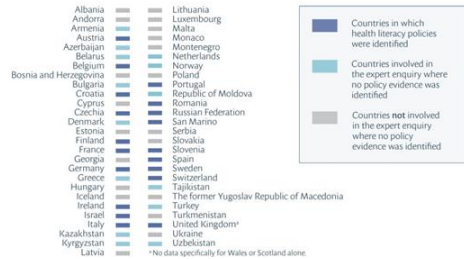
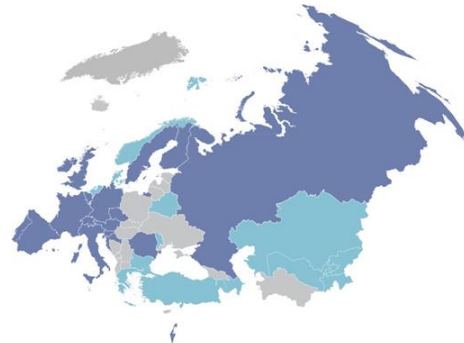


- From medical to public health literacy
 - Initial emphasis on individual competencies in the context of health care (« **medical health literacy** »)
 - Enlarged to a broad set of competences that are also relevant for disease prevention and health promotion (« **public health literacy** »)
- From purely functional to interactive and critical health literacy



- **Functional HL**: the ability to handle words and numbers in a medical context
- **Interactive HL**: communicative, social, and personal skills that are necessary to function in the health system
- **Critical HL**: cognitive skills of information seeking, decision making, problem solving, critical thinking

Growing political recognition of Health Literacy



• Internationally

- HL in Sustainable Development Goals and on the agenda of UNESCO
- HL was one of the three priorities of the 9th GCHP (Shanghai, 2016)
- WHO Euro Resolution and Draft WHO Euro Roadmap for implementation of HL initiatives (2019)

• Nationally

- 19 out of 53 Member States (36%) in the WHO Euro Region have or are developing health literacy policies at national and regional levels
- HL policies focus on different sectors and levels of society that are interdependent and include a wide range of activities
- Facilitators of successful implementation (e.g., cross-sectoral work, political leadership and strategies to overcome cultural barriers) are not integrated into HL
- The economic effects of policies are not documented.

Rowlands et al. (2018) What is the evidence on existing policies and linked activities and their effectiveness for improving health literacy at national, regional and organizational levels in the WHO European Region? Copenhagen: WHO Europe

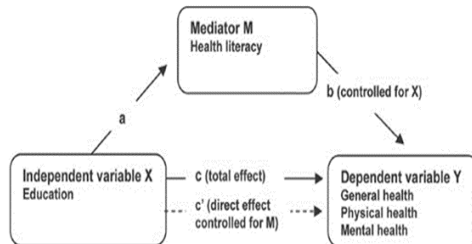
Increasing societal interest in Health Literacy



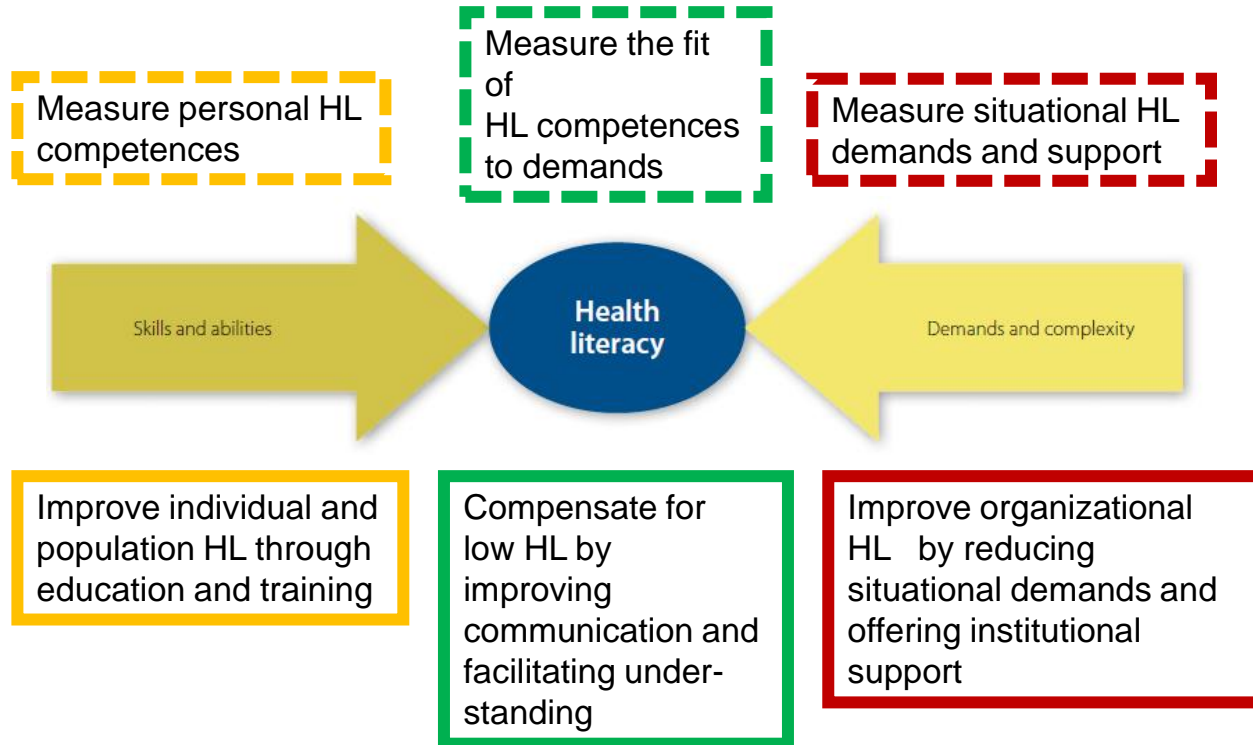
Relevance of Health Literacy



- A determinant of health care use and related costs
- A determinant of health outcomes (in health care, prevention and promotion)
- An outcome of health education (as a strategy of health promotion)
- A possible mediator of the relationship between SES/education level and health disparities



Addressing low health literacy



The role of the health sector

- Compensate for low HL by
 - screening for low health literacy
 - adapting oral and written information by
 - ensuring enough time for consultations
 - slowing down the conversation
 - using visual support of the communication
 - balancing the depth of the information provided
 - checking comprehension (« teach-back »)
- Empower patients by improving functional, interactive and critical health literacy through specific interventions
 - e.g. self-management training for chronic patients
- Reduce the demands of the health system by creating «health literate friendly» health organisations



Problems encountered by health professionals when acting on HL



- Health professionals and health students are not necessarily selected for or trained in communication skills
- Health care driven by efficiency concerns
 - encounters with patients are limited in time
 - clear communication is not incentivized
- Lack of adequate health literacy awareness, knowledge and skills among health professionals
- Curricula and continued education programs are crowded

Health Literacy training for Health Professionals in Europe



Short communication

Developing and pilot testing a comprehensive health literacy communication training for health professionals in three European countries



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ABSTRACT

Objective: Skills to address different health literacy problems are lacking among health professionals. We sought to develop and pilot test a comprehensive health literacy communication training for various health professionals in Ireland, Italy and the Netherlands.

Methods: Thirty health professionals participated in the study. A literature review focused on evidence-informed training-components. Focus group discussions (FGDs) explored perspectives from seventeen professionals on a prototype-program, and feedback from thirteen professionals following pilot-training.

Pre-post questionnaires assessed self-rated health literacy communication skills.

Results: The literature review yielded five training-components to address functional, interactive and critical health literacy: health literacy education, gathering and providing information, shared decision-making, enabling self-management, and supporting behaviour change. In FGDs, professionals endorsed the prototype-program and reported that the pilot-training increased knowledge and patient-centred communication skills in addressing health literacy, as shown by self-rated pre-post questionnaires.

Conclusion: A comprehensive training for health professionals in three European countries enhances perceived skills to address functional, interactive and critical health literacy.

Practice implications: This training has potential for wider application in education and practice in Europe.

- Comprehensive health literacy communication training for various health professionals in Ireland, Italy and the Netherlands
- Addresses functional, interactive and critical health literacy through 5 training components
 - health literacy education
 - gathering and providing information, shared decision-making,
 - enabling self-management
 - supporting behaviour change
- Potential for wider application in education and practice in Europe



COVID-19: FROM VIRAL TO CONTAINMENT

A WEBINAR SERIES

Conclusions

- Making informed decisions about ways to address and prevent COVID-19 requires health literacy
- In a situation of abundant yet often contradictory or misleading information, the challenge is **not** to provide **more** information, but to help people find the way to accurate and reliable health information
- This requires taking account of the processes of health information seeking, understanding, judging and applying health information
- To address the challenge of low health literacy it is necessary to
 - increase the level of health literacy in the population
 - detect and compensate for low levels of health literacy through adapting the communication with patients
 - reduce the health systems' demands for health literacy
- Addressing the challenge of health literacy is a shared responsibility of the health sector, civil society and policy makers



“Literacy isn't just about reading, writing, and comprehension. It's about culture, professionalism, and social outlook.”

— Taylor Ellwood

Health systems and COVID-19

Advancing the health literacy response

Kristine Sørensen



HEALTH LITERACY EUROPE
A NETWORK FOR ADVANCING EUROPEAN HEALTH LITERACY



HEALTH LITERACY



To be a health literate society, we need a health literate public, health literate health professionals and health literate politicians and policy-makers

- Ilona Kickbusch, Suzanne Wait, and Daniela Maag,
Navigating Health 2005

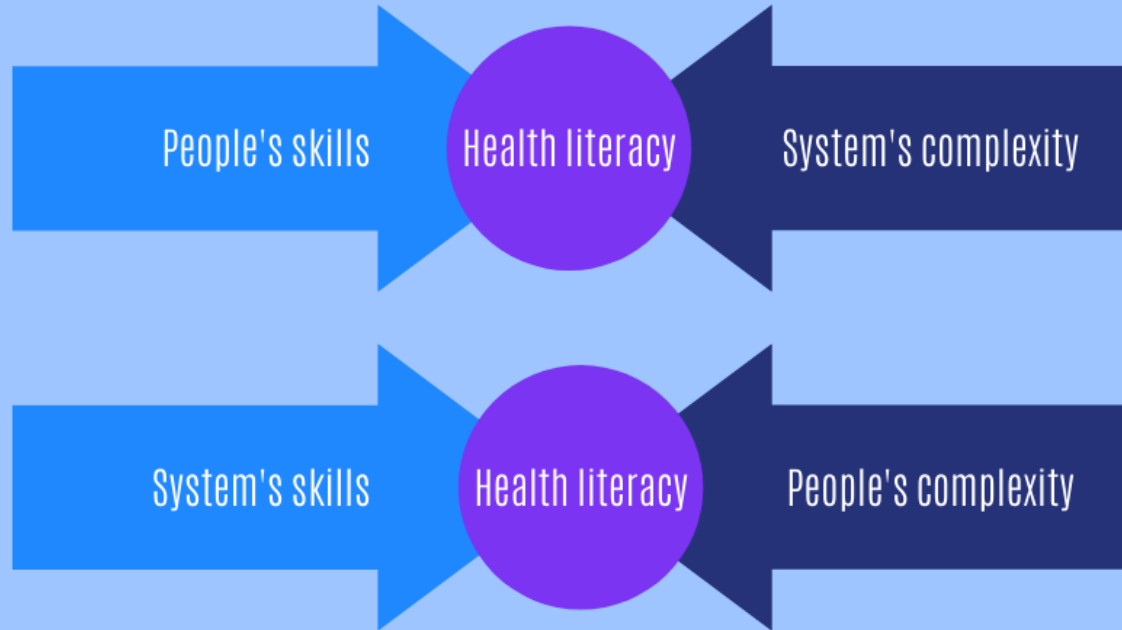
HEALTH LITERACY



the knowledge, motivation and competencies
to access, understand, appraise and apply information
to form judgement and make decisions in everyday life
regarding healthcare, disease prevention and health promotion
to maintain and promote quality of life
during the life course
with the support of services and systems

**- the ability of people, organizations, communities and
societies to manage and deal with health**

Improving health literacy means making the match!



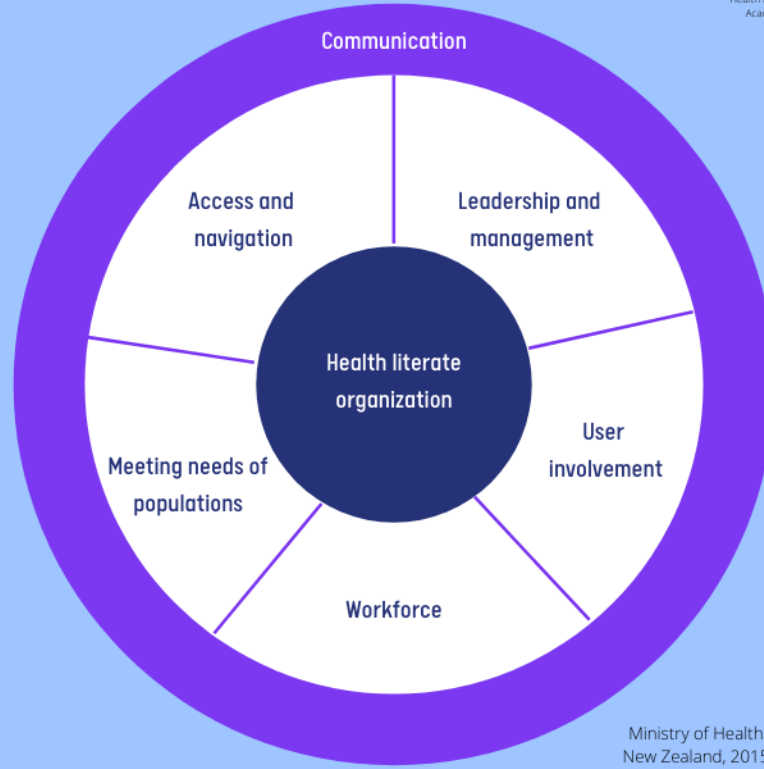
HEALTH LITERACY RESPONSIVENESS

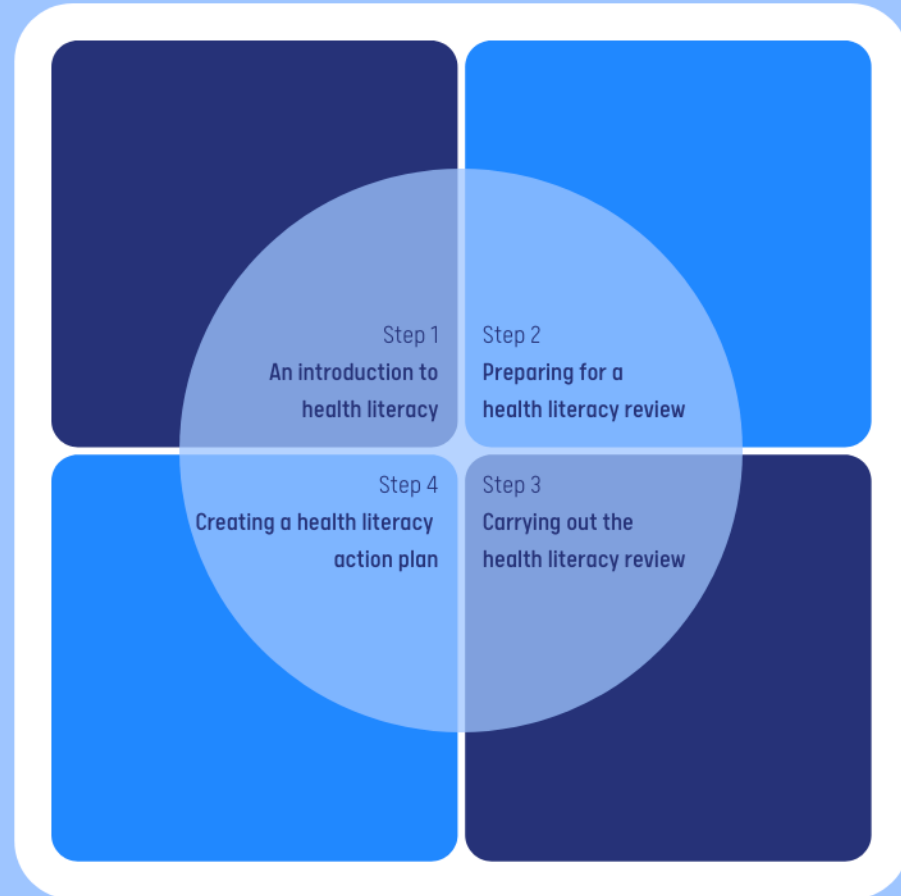
The provision of services, programs and information
in ways that

- promote equitable access and engagement,
- meet the diverse health literacy needs and preferences of individuals, families and communities, and
- support people to participate in decisions regarding their health and social wellbeing

Trezona et al. 2017







What is health literacy?
Health literacy demands
What is a health literate organization?
The health literacy review framework
What is a health literacy review
A health literacy statement

Step 1
**An introduction to
health literacy**

Establish a review team and confirm leadership support
Identify a focus for the review
Build an understanding of health literacy amongst the review team
Work through ethics, confidentiality and conflicts of interest
Publicise the review with staff and other stakeholders
Develop a project plan and communication plan
Identify the user journey for the service being reviewed
Prepared for document collection, interviews and observations

Step 2
**Preparing for a
health literacy review**

Developing the health literacy action
plan
Launching the health literacy action plan
The critical role of leaders
Stakeholders
Change management
Tips for success
Evaluation plan

Step 4
**Creating a health literacy
action plan**

Step 3
**Carrying out the
health literacy review**

Interview leaders and service teams
Interview consumers and families
Observe clinical interactions
Collect organization and patient-facing
documents
Analyze the data collected
Prepare for a draft review report
Seek feedback from stakeholders
Finalize the review report

QUICK HEALTH LITERACY ASSESSMENT

Can your clients/patients/users

- easily access
- easily understand
- easily appraise
- easily apply

the product, the information, the service etc. that your organization provides to them?

Test with users, before it is implemented!

COVID-19: a guide to good practice on keeping people well informed

<https://theconversation.com/covid-19-a-guide-to-good-practice-on-keeping-people-well-informed-134046>

COVID-19: Health literacy is an underestimated problem

[https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(20\)30086-4/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(20)30086-4/fulltext)

Health literacy review: a guide

<https://www.health.govt.nz/publication/health-literacy-review-guide>

International Handbook of Health Literacy

Research, practice and policy across the life-span
<http://library.oapen.org/handle/20.500.12657/24879>

Global Health Literacy Academy

www.globalhealthliteracyacademy.org

Health Literacy Europe

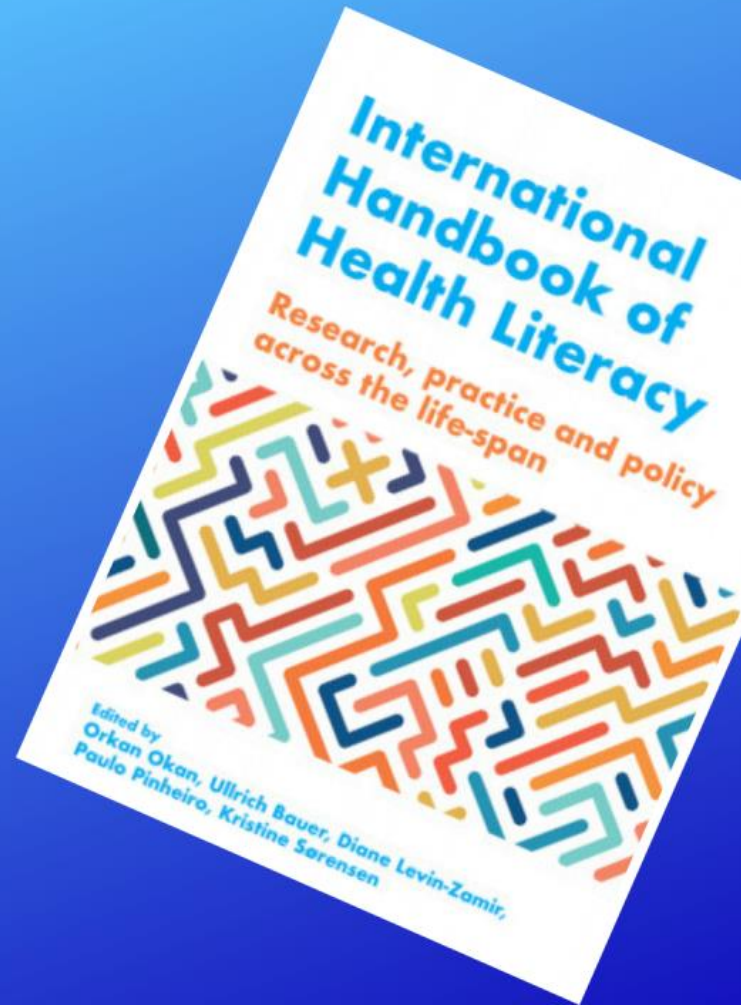
www.healthliteracyeurope.net

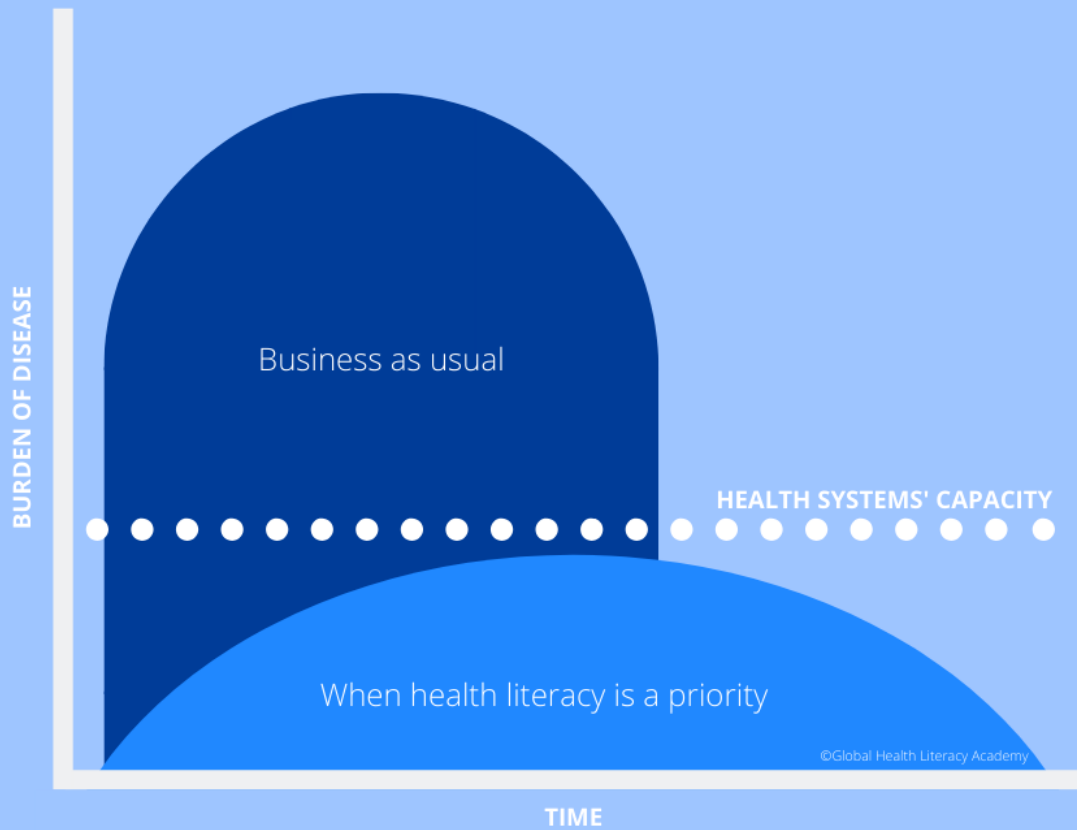
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Q & A

with Kristine Sørensen
and Stephan Van den Broucke



Survey

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