HEALTH DIALOG
Testimony of Theresa Hay, Senior Manager, Communications
Consumer Segmentation and Engagement

2010 ERISA Advisory Council
Healthcare Literacy

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Good afternoon, Madame Chairwoman and members of the Council. My name is Theresa Hay. I am the Senior Manager, Outreach Communication at Health Dialog and my team is responsible for the development of member-facing health communications materials. I am here today to testify on behalf of my company, Health Dialog, on this issue of healthcare literacy. Health Dialog is a leading provider of analytics and healthcare decision support programs to 20 million healthcare consumers worldwide. Health Dialog's mission is to reduce unwarranted variation in healthcare as a means to improve the quality of care and uncontrolled cost trends. To accomplish this mission, Health Dialog provides health coaching along with unbiased, evidenced-based information for medical decisions, chronic condition management, and wellness support.

We welcome the opportunity to be a part of today's hearing on healthcare literacy. The enactment of health reform legislation provides us with the challenge to ensure all healthcare consumers have the information, tools, and support they need to navigate our complex healthcare system. Research shows that patients who have a basic understanding of medical information will do a better job of taking action to promote their own health and wellness, as well as manage chronic illnesses. Whether individuals have GEDs or PhDs, providing health communications that use clear, concise messaging is vital to effectively relaying health information. For health plans and employer groups, clear communications directly translate into better served members and employees and – ultimately, lower healthcare costs.

Poor quality health communications affect not only the health of individuals but also the long-term success of the healthcare organizations working to improve people's health.[1] Ninety million Americans—nearly half the adult American population—have limited health literacy skills which significantly reduces their ability to navigate the U.S healthcare system.[2] This situation creates a marked disconnect between the demands of

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[1] *AMA Foundation: Health Literacy and patient safety: Help patients understand. Barry D. Weiss, MD 2nd edition, 2007*

[2] 3 U.S. Department of Heath and Human Services, Agency for Healthcare Research and Quality. *(2008).* Only about 1 in 10 adult Americans have all the skills needed to manage their health. Retrieved November 23, 2009, from *http://www.ahrq.gov/news/nn/nn051408.htm*

today's health systems and the actual level of people's health literacy skills.[3] As a result, some speculate that poor health literacy costs the healthcare system from $106-$238 billion a year.[4]

Health literacy must be addressed one word at a time.

What you write	What they read
"Your physician has recommended that you have a colonoscopy. Colonoscopy is a test for colon cancer."	**"Your naicisyhp has dednemmocer that you have a ypocsonoloc. Ypocsonoloc is a test for noloc recnac."**

AMA Foundation: Health Literacy and patient safety: Help patients understand. Barry D. Weiss, MD 2nd edition, 2007

The Landscape

To help explain why it is so important to craft health messages that keep the audience's literacy skills in mind, it is necessary to take a look at how well Americans are able to understand health information and navigate the health system today. The definition of health literacy used by the US Department of Health and Human Services 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." A major cornerstone of health literacy is the use of clear or plain language—an evidence-based approach to clear and effective writing grounded in research on documented design, adult learning theory, health communication, and social marketing principles.[5] As stated previously, we know that nearly half of the US population has limited health literacy skills. Research shows that vulnerable populations include:[6]

- persons with low education levels
- persons 65 and older
- persons who speak English as a second language
- persons with chronic conditions
- persons with mental health issues

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[3] Rudd, R., Moeykens, B.A., & Colton, T.C.,(1999). Health and literacy: A review of medical and public health literature. Annual Review of Adult Learning and Literacy. Chapter 5, New York: Jossey-Bass, 1999.

[4] Vernon, J.A., Trujilo, A, Rosenbaum, S., & DeBuono, B. (2007). Low health literacy: Implications for national health policy. Retrieved November 22, 2009 from http://gwumc.edu/sphhs/departments/healthpolicy/dhp_publications/pub_uploads/dhpPublication_3AC9A1C2-5056-9D20-3D4BC6786DD46B1B.pdf

[5] 1 Health Literacy Institute. (2010). About health literacy and plain language. Retrieved December 29, 2009 from http://www.healthliteracyinstitute.net/abouthl.html#limelight.

[6] U.S. Department of Heath and Human Services, Agency for Healthcare Research and Quality. *(2008).* Only about 1 in 10 adult Americans have all the skills needed to manage their health. Retrieved November 23, 2009, from *http://www.ahrq.gov/news/nn/nn051408.htm*

It is important to note that whether or not an individual falls into one of these categories, they are susceptible to bouts of low health literacy. Anyone who has received life-changing medical news –for example a cancer or diabetes diagnosis—can find themselves cognitively impaired and unable to process essential health information. Because of this, achieving clear communications is not a nice to have but a need to have in today's healthcare marketplace.

It is our belief that health information is not broadly made available in a way that allows consumers with limited health literacy skills to make informed decisions regarding the care options that are best for them and their families. Many of the materials used today by consumers to make healthcare decisions present information in a way that requires a basic understanding of a healthcare topic – one that unfortunately research shows many people do not have. In order to provide the consumer with adequate tools to make informed decisions it is crucial to view the information from the vantage point of the consumer. The best way to do this is to ask consumers how they want health information communicated to them through audience testing.

Audience testing –an integral part of health literacy

Health Dialog takes a number of steps to ensure our program materials are meeting the health literacy needs of our audiences – one of the most important steps is sharing drafts of our materials with audience members to test whether our messages are easily understood and can be acted upon. One recent example of this is our effort to address the issue of health literacy within ethnically diverse populations. To do this Health Dialog conducted primary and secondary research on innovative ways to engage Hispanic or African American audiences. Preliminary research showed that Hispanic and African American consumers want to be approached in a culturally appropriate way; in a way that builds a deep and lasting connection. Based on this finding, a series of culturally-relevant mail inserts were developed that addressed the importance of lifestyle changes in managing chronic illness and the importance of establishing a relationship with a primary care physician. These inserts employ clear language and design elements and were tested with the target populations during a series of focus groups. The focus group participants were asked questions about what they believed the key messages of the pieces were, what the call to action was, and most importantly what we could do to make the pieces more relevant to their health needs. Once Health Dialog gathered this information, we used the focus group feedback to revise our communication materials. Some of the prevailing themes that came out of these focus groups were the following:

Participants of the Hispanic focus groups prefer:

- materials have a focus on the family
- materials in Spanish
- materials that include patient testimonials

Participants in the African American focus groups prefer:

- materials with images of families
- materials with images of African Americans in both the patient and caregiver roles
- materials with health statistics

Health Dialog's approach

Health Dialog works with individuals to make important decisions about their healthcare. To address the communication needs of individuals regardless of their health literacy level, Health Dialog employs clear language principles when developing communication materials. These principles ensure materials provide actionable steps, eliminate confusion, and save the reader time and effort while helping them understand what they need to do to take care of their health.

This commitment to clear language messaging has led us to create the Clear Language Certification Process. This process was designed by Health Dialog to ensure that we follow health literacy best-practices in the way that we write and design our health educational materials. The Certification process consists of following a set of criteria that will ensure that our health messages are understood and can be acted upon by the targeted audience. The certification process evaluates materials based on reading level, writing style, vocabulary and content clarity. The process is administered by Health Dialog staff members who have received training in creating clear language materials. As part of the process, writers and designers follow a clear language development guide and check-list and use special health literacy software that evaluates the content using various scales and assigns a reading level based on the material's word choice, sentence length, and other syntax criteria. Health Dialog aims to have all internally developed outreach communications score at the 6th grade reading level or lower. Materials are then tested through focus groups to ensure key messages and the health actions required are easily understood by the target audience.

In closing, I would like to thank the council for including Health Dialog in this discussion on an issue that affects so many healthcare consumers. With health reform now enacted, 32 million new people, many with low health literacy, will enter the healthcare system. Creating clear, concise messaging for healthcare consumers is essential to ensuring consumers and their families will get the care they need. Addressing health literacy through plain or clear language messaging should not be mistaken for "dumbing down", but as a way to provide essential information in a straightforward way that makes navigating our complex healthcare system less daunting for consumers.