

**NATIONAL STATEMENT ON HEALTH LITERACY: TAKING ACTION TO IMPROVE SAFETY AND QUALITY**

Having consumers who are partners in the processes of health and health care is necessary for safe and high-quality care.

Health literacy plays an important role in enabling effective partnerships. In order for partnerships to work, everyone involved needs to be able to give and receive, interpret and act on information such as treatment options and plans.

When these conditions exist, there is the potential to not only improve the safety and quality of health care, but also to reduce health disparities and increase equity.

**Purpose**

The purpose of this statement is to:

* highlight the importance of health literacy in ensuring safe and high-quality care
* support the need for a coordinated and collaborative approach within the health sector and across sectors to systematically address health literacy
* describe possible actions that can be taken by organisations and individuals working in the health sector to address health literacy.

This statement can be used by organisations and individuals to drive and support their work on health literacy and to inform decision-making about what they can do to address health literacy. The statement is supported by a more detailed background paper on this topic that is available from: <http://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/health-literacy/>

**Scope**

This statement mainly relates to individuals and organisations working within the health sector, including healthcare providers, organisations that provide healthcare services at a local level, organisations that support healthcare providers and government organisations.

Because action is needed across sectors to address health literacy systematically, this statement may also be relevant for organisations and people working in the education, welfare and social services sectors.

**Definitions**

The Australian Commission on Safety and Quality in Health Care (the Commission) separates health literacy into two components: **individual health literacy** and the **health literacy environment**. The Commission defines these two health literacy components as follows:

1. **Individual health literacy** is the skills, knowledge, motivation and capacity of a person to access, understand, appraise and apply information to make effective decisions about health and health care and take appropriate action.
2. **Health literacy environment** is the infrastructure, policies, processes, materials, people and relationships that make up the health system and have an impact on the way that people access, understand, appraise and apply health-related information and services.

**Health literacy is a safety and quality issue**

The complexity of the health system is challenging for everyone who uses it and works in it, and this complexity contributes to poor quality and unsafe care.

Only about 40% of adults have the level of individual health literacy needed to meet the complex demands of everyday life.

This means, for example, that only about 40% of adults can perform tasks such as combining information in text and a graph to correctly assess the safety of a product. It means that only 40% of adults can understand and follow health messages in the way in which they are usually presented. It also means that only about 40% of adults will be able to makes good choices based on a thorough understanding of the issues they face and the choices available.

Low individual health literacy is associated with higher rates of hospitalisation and emergency care, and with higher rates of adverse outcomes generally. Low health literacy is also associated with lower uptake of preventive approaches like mammography and the influenza vaccine.

Low health literacy can significantly drain human and financial resources, and may be associated with extra costs of 3–5% to the health system.

In older people, low individual health literacy is associated with a poorer health status and with a higher risk of premature death.

These associations exist even after taking into account an individual’s age, gender, education, ethnicity and health status.

However, the likelihood of a person experiencing barriers to health literacy may be increased where disadvantage and vulnerabilities connect, for example there may be greater barriers for people with lower educational attainment, who speak a language other than English or who have a disability.

**Addressing health literacy requires a coordinated and collaborative approach**

There are many factors that contribute to individual and environmental health literacy, and therefore many different strategies and approaches that can used to bring about improvements. Strategies are needed both to build the capacity of people to understand the choices they have, make decisions about their health and health care; and to build the capacity of the health system to support, encourage and allow this to occur.

For sustainable improvement, it is important to address health literacy in a systematic way. Coordination and collaboration can lead to greater improvement, as everyone then has an opportunity to share information, collaborate and build on the progress of all.

To address health literacy in a coordinated way, action needs to be taken across three areas:

1. **Embedding health literacy into systems**

This involves developing and implementing systems and policies at an organisational and societal level that support action to address health literacy. These systems could include altering funding mechanisms to encourage awareness and action on health literacy, implementing policies that prioritise health literacy in program planning, and designing healthcare organisations in a way that makes it easier for people to find their way.

1. **Ensuring effective communication**

This involves providing print, electronic or other communication that is appropriate for the needs of consumers. It also involves supporting effective partnerships, communication and interpersonal relationships between consumers, healthcare providers, managers, administrative staff and others.

1. **Integrating health literacy into education**

This involves educating consumers and healthcare providers and could include population health programs, health promotion and education strategies, school health education, and social marketing campaigns as well as formal education and training of healthcare providers.

**Taking action to address health literacy**

Everyone can play a part in addressing health literacy. Of particular importance for people and organisations working in the health sector is the responsibility they have to ensure that the health literacy environment makes it as easy as possible for consumers, patients, families and carers to access, understand, appraise and apply information to make effective decisions about health and health care and take appropriate actions.

Some of the actions that can be taken by organisations and individuals working in the health sector are included in Table 1. More information about additional actions, including those than can be taken by consumers, consumer groups, education and training organisations and private organisations is available in the accompanying background paper.

**Table 1: Actions that can be taken in the health system to address health literacy**

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| Role | Possible actions |
| Consumers | * Discuss with healthcare providers any difficulties in understanding health information and services
* Ask family, friends or support services (such as translating services) for help with communication difficulties
* Ask for more information about any part of care that is unclear
* Be open and honest with healthcare providers about medical history and medications
* Improve knowledge and skills by participating in education
* Raise awareness among family, friends and the community about the importance of health literacy
* Become involved in the planning, design and delivery of health information and services
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| Healthcare providers | * Recognise the needs and preferences of individual patients and consumers and tailor their communication style to the person’s situation
* Assume that most people will have difficulty understanding and applying complex health information and concepts
* Use a range of interpersonal communication strategies to confirm information has been delivered and received effectively
* Encourage people to speak up if they have difficulty understanding the information provided
* Use ways of communicating risk information about treatment options to people that are known to be effective
* Participate in improvement projects aimed at reducing barriers to health literacy within the healthcare organisation’s physical environment
* Participate in health literacy education and training, if available
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| Organisations that provide healthcare services at a local level | * Develop and implement health literacy policies and processes that aim to reduce the health literacy demands of information materials, the physical environment and local care pathways
* Provide and support access to health literacy and interpersonal communication training for healthcare providers, including training methods in communicating risk
* Provide education programs for consumers aimed at developing health knowledge and skills
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| Organisations that support healthcare providers | * Lead and coordinate action on health literacy within their profession
* Develop policies and position statements on health literacy
* Encourage and support professional development opportunities and influence education programs for healthcare providers in communication, health literacy and patient-centred practice in general
* Collaborate across the healthcare sector on health literacy activity, including sharing strategies and lessons learnt across and between professions and sectors
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| Government organisations, regulators and bodies that advise on health policy | * Raise awareness about the issue of health literacy
* Embed health literacy principles into health policy development
* Support the design and delivery of policies, pathways and processes that reduce the complexity involved in navigating the health system including across sectors and settings
* Explore opportunities for including implementation of strategies to address health literacy as a core requirement of healthcare service design and delivery
* Work collaboratively across all levels of government to promote coordinated action on health literacy
* Advocate for funding and resource allocation for health literacy initiatives
* Implement, evaluate and share information about health literacy programs
* Develop partnerships to facilitate the exchange of information about health literacy research and programs between research and practice communities
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