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Key considerations for health literacy interventions

The determinants of inadequate health literacy at a community and population level are highly context specific. Careful consideration of a population’s particular health, social, and cultural needs is required during the development and implementation of any health literacy intervention.

Focus on health and wellbeing outcomes

Health literacy influences health by influencing the decisions people make about their health and health care. Health literacy contributes to health outcomes in many areas although the link is not a direct one. Given the role that personal and social factors play in determining outcomes, we cannot know precisely how any given health literacy intervention will affect health and wellbeing. When addressing any social or personal determinant of health, it is important to maintain an overall aim to improve health and wellbeing outcomes. This applies equally to efforts to optimise health literacy and the health literacy responsiveness of the health system.

Focus on increasing equity in health outcomes and access to services for people with varying health literacy needs

Differences in health literacy are seen in gender, age, ethnicity, insurance status and educational attainment. These differences are likely, in part, to explain health inequities. Actions to address health literacy issues can strengthen communities and reduce social and health inequities. But interventions, if not responsive to those experiencing the greatest barriers to access and engagement, may act to further increase inequities. It is important when addressing any social or personal determinant of health, that the broader aim of reducing health and social inequities remains in focus. This applies equally to efforts to optimise health literacy and the health literacy responsiveness of the health system.
Prioritise local wisdom, culture and systems

Health literacy is complex and multi-dimensional. Limitations and strengths of individuals and communities will vary. Effective responses are those that capitalise on strengths and address needs. To determine the most appropriate mix of strategies and the best way to implement them within a particular community (or with a particular person), one must prioritise local insights and experiences and have a sound understanding of the local culture and health system.

Respond to locally identified health literacy needs

Health literacy issues vary from community to community, and within any given community there is likely to be a range of health literacy strengths and limitations. To facilitate access and engagement, programs must be tailored to the circumstances and needs of community members. Initiatives should therefore commence with a thorough needs assessment.

Respond to the varying and changing health literacy needs of individuals and communities

Health literacy strengths and limitations can change over time. Further, health literacy is context- and content-specific, so health literacy in one setting or about one health decision may be different from others. It is therefore recommended that health literacy initiatives embed mechanisms for responding to the varying and changing health literacy need of individuals and communities. It is also important that organisations and governments continue to monitor community health literacy and adjust services, products and environments in response to observed changes.
Engage all relevant stakeholders in the co-creation and implementation of solutions

Engaging community members, academics, policy makers, providers and managers in the co-creation and implementation of health literacy solutions has the potential to:

- generate novel responses to local needs
- decrease the gap between evidence and practice
- strengthen relationships between stakeholder groups
- facilitate the reciprocal transfer of expertise across stakeholder groups
- enhance insight into community culture and context and locally relevant social determinants of health
- increase the quality, utility and feasibility of interventions developed
- increase the cultural appropriateness of interventions developed
- improve intervention fidelity during implementation
- facilitate shared ownership of interventions and outcomes.

Focus on achieving sustained improvements through changes to environments, practice, culture and policy

Sustained improvements to health and wellbeing are achieved most effectively through changes to environments, routine practice, organisational and community culture and policy. Small scale interventions, and capacity building activities can have significant impacts and are useful in demonstrating what changes can be achieved. Once success has been demonstrated, responses must be embedded and scaled up to avoid being superseded by staff turnover, and other organisational changes.

Focus on improvements at, and across, all levels of the health system

Health outcomes result from multi-directional relationships between characteristics of communities and community members, and the educational, environmental, economic and social service systems, products and infrastructures available to communities. Efforts to optimise health literacy and health literacy responsiveness as mechanisms for improving health outcomes must recognise the need to intervene at, and across, all levels of the health system.
References


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