Title:
Meaning of Picture-Based Health Education in Diabetes With Low Health Literacy Population

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References:
Centers for Disease Control Prevention. (2014). National diabetes statistics report: estimates of diabetes and its burden in the United States, 2014. Atlanta, ga: US Department of health and human services.

Mathers, C. D., & Loncar, D. (2006). Projections of global mortality and burden of disease from 2002 to 2030. Plos med, 3(11), e442.

Abstract Summary:
To figure out the meaning of a post-positivist theory on type 2 diabetes self-management pictures-based health education for low health literacy population using the Health Belief Model (HBM).
Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
Explain the negative impact of low literacy on health management	We will present the incidence of low literacy, outline the negative impact of low literacy on health outcomes, and describe the roll of nurses in assisting patients with low literacy
Interpret the meaning of pictures-based health education regarding self-management of diabetes by people who have low health literacy.	It will be presented by a matrix that was created including each of the concepts based on the Health Belief Model (HBM) framework.
Describe the barriers of diabetes self-management in the low health literacy population.	It will be presented by the perceived barriers against type 2 diabetes (T2DM) self-management for people with low health literacy.

Abstract Text:

Purpose: Type 2 diabetes (T2DM) ranks as the seventh-leading cause of disease-related death in the United States. Of the U.S. population, 29.1 million people, or 9.3%, have diabetes. Only 12% of people have proficient health literacy in the United States. T2DM self-management is important to prevent

complications and that self-management has a relationship with the diabetes patient's level of health literacy. To increase diabetes self-management, it is important to educate people using appropriate education tools, especially those who have a low health literacy level. The purpose of this qualitative study is to explore the meaning of pictures-based health education regarding self-management of T2DM by people who have low health literacy using a theoretical framework, the Health Belief Model (HBM).

Methods: This study used a qualitative explorative descriptive design. The researcher used a postpositivist theoretical perspective along with her modification of the HBM. For measuring health literacy status, this research used the Short Test of Functional Health Literacy in Adults (S-TOFHLA) and the researcher used the open-ended interview, filed notes, and audio recording for this study.

Results: Total participants consisted of 12 people. The mean of S-TOFHLA was 14, which indicated participants have an inadequate functional health literacy. The majority of participants have susceptibility because they stated that they have family history of T2DM. The participants had perceived severity of having T2DM; most participants worried about the T2DM complications. Participants also indicated that they have language barriers because even though they can easily understand English regularly, the medical terms are difficult to understand. They stated, however, that using pictography health education materials for T2DM who have low health literacy was easy to understand.

Conclusion: Whether they had low health literacy or not, the pictography health education materials for T2DM self-management proved useful. This framework could guide the health education of T2DM patients with low health literacy.