In order to successfully manage their own healthcare, people must have adequate health literacy (HL) or “the ability to obtain, process, communicate, and understand basic health information and services in order to make appropriate health decisions” (Brega et al., 2015). HL is a strong predictor of individual and population health: stronger than age, income, race, ethnicity, education level or employment status. Over 20 years of evidence shows that people with lower HL have poorer health outcomes, higher rates of hospitalization, higher health care costs and are less likely to access preventive health services when compared to people with adequate HL. Furthermore, studies also indicate that health information is often presented in ways that many people cannot understand or use (Berkman et al., 2011). Healthcare professionals, including nurses, tend to overestimate their patient’s level of HL (Dickens et al., 2013). Although the area of HL has grown immensely, interventions that lead to sustainable change for individuals and communities/populations have been continued as a challenge (Dawkins-Moultin et al., 2016). HL experts recommend approaching all patients as though they might be at risk of not understanding health information and to move interventions from an individual patient/interpersonal level to an organization/community/population-based/societal level that also includes global policy initiatives (Dawkins-Moultin et al., 2013; Koh et al, 2013; Poureslami et al., 2017). The societal effectiveness of health services generally depends on whether or not the people who need it most (e.g. low educational attainment, low socio-economic status, ethnic minorities) are actually able to access the assistance. This is particularly important in countries going through economic transition or in the process of establishing health care systems (Batterham et al., 2016).

Health professionals often lack the skills to effectively communicate with patients and populations with HL challenges. In an effort to address this deficit, nurse-specific HL competencies were developed by a group of nurse HL experts in a three-round e-Delphi study (Toronto, 2016). These competencies are based on the body of HL evidence and successful interventions, interprofessional HL expert recommendations, and previously established preliminary educational competencies for health professionals (Toronto, 2016). HL experts have developed toolkits and other free materials based on the principle that all patients, regardless of HL level, benefit from clear simple language and culturally appropriate communication (Brega et al., 2015; Koh et al., 2013). Health professionals need to build a range of skills and strategies to be able to respond to patients with varying levels of health literacy (Batterham et al., 2016).

Multifaceted educational strategies can be used in nursing and interprofessional programs to help students gain skills and achieve HL competency. Examples of how to assess HL needs in practice settings/patient populations, HL professional education content, educational strategies, teaching methods, student assignments, and student outcomes will be shared in this presentation. The top HL competencies for registered nurses help prioritize the knowledge, skills, and attitudinal domains emphasized when teaching HL concepts to advanced practice and interprofessional students (Toronto, 2016). Key content includes: HL background and impact of low HL on health outcomes and costs; factors that contribute to low HL and how to recognize the problem; review of the HL evidence, tools used in studies and HL interventions and outcomes; key HL intervention principles; HL conceptual models and policy recommendations; future research and evidenced-based/best practice implementation; and how nurses are well-positioned to lead initiatives to mitigate HL challenges.

Active learning strategies are currently considered best practices for professional education. Although in some studies they were considered similar to the outcomes of traditional education methods, active learning strategies effects are generally more positive in the areas of student attitudes and retention, critical thinking, improvements in academic achievements, long term retention of information, clinical
Multiple active learning strategies and repeated opportunities to practice are key for students to achieve the knowledge, skills, and attitudes needed to communicate with and effectively address patients and populations with potential or active HL issues. For example, students may watch a short video of an array of patients demonstrating a variety of HL issues such as difficulty understanding medical terms, fear that poor reading skills may be uncovered, and difficulty following medication instructions or completing forms. They then reflect on the video, their own emotional response and identify potential areas when HL issues may occur. Role play can also be a powerful tool for students to realize that using clear, simple language without medical jargon is often more difficult than they expected. Having students “script” their patient education explanations and performing a readability assessment using an established tool on the script can help them improve their HL communication skills and develop confidence to make needed change in their practice environments. Incorporating health communication with patients in simulations and video-taped objective structured clinical exams (OSCEs) have also been effective HL learning strategies. The importance of understanding culture and health beliefs, when/how to use interpreters, identifying community resources, and how to access and use free educational tools and resources is emphasized in class and in clinical experiences. Having HL criteria in written and clinical assignments throughout the program help strengthen students’ HL knowledge and skills and often leads to the attitude that all patients are at risk for communication errors and that effective communication is needed to deliver safe, quality care.

Anyone can face “situational” HL challenges when they or their loved-ones are frightened, have a new diagnosis or complex self-care demands, or are not familiar with medical terminologies or how their bodies work (Koh et al., 2013). Everyone should be presented with health information in ways he/she can understand. System-wide strategies are needed to emphasize the power of HL for all individuals and populations (Koh et al., 2013). Research needs to continue on the best interventions and policies to address HL and evidence-based practice initiatives are essential to identify the best HL practices to achieve the highest quality and cost-effective outcomes for all. Nurses are prepared to lead HL efforts world-wide.

Title:
Innovative Educational Strategies to Achieve Health Literacy Competencies for Advanced Practice Nurses and Interprofessional Students

Keywords:
Education, Nursing, Health Education and Health Literacy

References:


Abstract Summary:
Health literacy (HL) is an important determinant of health status world-wide. In this session the author will share multiple educational strategies, teaching methods/activities, and student outcomes used to help health professionals achieve personal competency and also design programming to effectively communicate with individual patients and populations with potential HL challenges.

Content Outline:
I. Introduction – Health Literacy (HL) Concepts and Background
   A. Definition and significance of HL
   B. HL is a strong predictor of individual and population health

II. Review of the Evidence and Sharing HL Educational Strategies
   A. HL is a stronger predictor of health status than age, income, race, ethnicity, education level or employment status
   B. People with lower HL have poorer health outcomes, higher rates of hospitalization, higher health care costs and are less likely to access preventive health services when compared to people with adequate HL
   C. Health professionals often lack the skills to effectively communicate with patients and populations with HL challenges
   D. HL experts have developed toolkits and competencies for nurses and other health professionals based on the principle that all patients, regardless of HL level, benefit from clear simple language and culturally appropriate communication.
   E. Multifaceted active educational strategies can be used in nursing and interprofessional programs to help students gain skills and achieve HL competency.
      1. Examples of teaching strategies, student assignments and outcomes used by the author to teach HL content and develop student competency
      2. Educational resources to address HL challenges

III. Implications for Practice and Future Research/Evidence-Based Practice Considerations
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