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CANADA'S PUBLIC HEALTH LEADER  
LE LEADER CANADIEN EN SANTÉ PUBLIQUE

**PERCEPTIONS OF HEALTH LITERACY**  
**RESULTS OF A QUESTIONNAIRE FOR PRACTITIONERS,**  
**POLICY-MAKERS AND RESEARCHERS**

Canadian Public Health Association

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## INTRODUCTION

A Web-based health literacy questionnaire was developed by the Canadian Public Health Association (CPHA) in December 2006, in order to gather information about the understandings and experiences of policy-makers, service providers and other key stakeholders. The questionnaire asked respondents about their definitions of health literacy, its barriers and enablers, as well as about current initiatives and strategies for promoting health literacy. The questionnaire results were presented to CPHA's Expert Panel on Health Literacy in 2007.

The Expert Panel on Health Literacy was established by CPHA in 2006, with funding from the Health and Learning Knowledge Centre of the Canadian Council on Learning. The Panel's mandate was to research the scope and nature health literacy levels in Canada, identify barriers and promising interventions, and make recommendations for researchers, policy-makers and practitioners. The Expert Panel on Health Literacy's report, *A Vision for A Health Literate Canada*, was released in March 2008 and is available from [www.cpha.ca/en/portals/h-l.aspx](http://www.cpha.ca/en/portals/h-l.aspx).

## METHODOLOGY

A preliminary questionnaire was reviewed by the Expert Panel and other selected reviewers and revised to reflect the comments received. The final version of the questionnaire included a total of 23 questions, most of which required forced choice answers (the questionnaire is included in Appendix 1). The questionnaire was translated into French and then uploaded to a Web-based questionnaire application (SurveyMonkey).

An email invitation to complete the questionnaire was sent in English and French from CPHA to a distribution list of approximately 800 practitioners, policy-makers and researchers, as well as to a health literacy electronic mailing list, and 1,500 CPHA members. The email provided information about the Expert Panel project, the purpose of the questionnaire, a guarantee of confidentiality, and a contact for further information. The email contained a links to the English and the French questionnaires. Recipients were also asked to forward the email message to interested colleagues. The questionnaire was available on the SurveyMonkey website from December 5 to December 18, 2006.

The majority of questions required forced choice answers. The questionnaire results are presented here in table format, listing for each question the number of English responses received, the number of French responses received, and the percentage of the English, French and total responses that the number represents. In cases where the percentage does not total 100, this is due to rounding off to one decimal point. Each table also indicates the number of respondents who skipped that question (entered no response). Qualitative analyses of the English language responses to four open-ended questions are also presented in this report.

## QUESTIONNAIRE RESULTS

Of the 679 respondents, 92% replied to the English questionnaire.

<b>Respondents</b>	<b>#</b>	<b>%</b>
English	625	92
French	54	8
<b>Total</b>	<b>679</b>	<b>100</b>

### 1. Which of the following best describes you?

The majority of respondents indicated a health professional occupation, followed by administrator/manager, and academic.

<b>Occupations</b>	<b>All</b>		<b>English</b>		<b>French</b>	
	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
Health professional	179	27.1	175	28	12	22
Administrator/manager	131	19.8	124	19.8	8	15.1
Academic	68	10.3	64	10.2	7	13.2
Researcher	38	5.7	30	4.8	8	15.1
Educator	37	5.6	36	5.8	2	3.8
Community development worker	37	5.6	36	5.8	4	7.5
Adult learning practitioner	36	5.4	37	5.9	1	1.9
Volunteer	24	3.6	22	3.5	2	3.8
Policy analyst	16	2.4	15	2.4	1	1.9
Advocate	8	1.2	9	1.4	0	0
Recreation programmer	0	0	0	0	0	0
Other	85	12.8	77	12.3	8	15.1
<b>Total</b>	<b>678</b>	<b>99.5</b>	<b>625</b>	<b>100</b>	<b>53</b>	<b>99.4</b>
Skipped this question	1	-	0	-	1	-

## 2. Which best describes the organization you work or volunteer for?

The four most frequently selected categories were: government, non-governmental or charitable organization, adult learning, and medical services.

Organization Types	All		English		French	
	#	%	#	%	#	%
Government (federal, provincial, territorial, municipal)	173	25.8	169	27.3	4	7.8
Non-governmental or charitable	135	20.1	129	20.8	6	11.7
Adult learning	102	15.2	98	15.8	4	7.8
Medical services	101	15.0	99	16.0	2	3.9
Academic/research	51	7.6	43	6.9	8	15.6
Public health	31	4.6	12	1.9	19	37.2
Children's services	16	2.3	16	2.5	0	0
Business/industry	14	2.0	13	2.1	1	0.01
First Nations/Métis/Inuit services	11	1.6	11	1.7	0	0
Immigrant/refugee services	8	1.1	6	0.09	2	3.9
Professional association	6	0.08	4	0.06	2	3.9
Communications/media	2	0.02	2	0.03	0	0
Women's services	1	0.01	1	0.01	0	0
Human rights	0	0	0	0	0	0
Workplace safety	0	0	0	0	0	0
Other	18	2.6	15	2.4	3	3.9
<b>Total</b>	<b>669</b>	<b>98</b>	<b>618</b>	<b>97.6</b>	<b>51</b>	<b>95.7</b>
Skipped this question	10	-	7	-	3	-

**3. What is the primary function of the organization you work or volunteer for?**

The most frequently selected organizational function was public health, followed by adult learning, primary health care, and health education/promotion.

Organization Functions	All		English		French	
	#	%	#	%	#	%
Public health	141	21.7	122	20.3	19	37.3
Adult learning	83	12.8	76	12.7	7	13.7
Primary health care	60	9.2	54	9.0	6	11.8
Health education/promotion	52	8.0	50	8.3	2	3.9
Community support for priority groups	46	7.1	44	7.3	2	3.9
Education/training of health providers	36	5.5	34	5.7	2	3.9
Research	34	5.2	30	5.0	4	7.8
Tertiary health care	26	4.0	25	4.2	1	2.0
Public policy	21	3.2	20	3.3	1	2.0
Advocacy	18	2.8	17	2.8	1	2.0
Education/training of literacy providers	18	2.8	18	3.0	0	0
Recreation	5	0.7	5	0.8	0	0
Workplace/worker safety	1	0.1	1	0.2	0	0
Media/communications	1	0.1	0	0	1	2.0
Emergency preparedness	0	0	0	0	0	0
Marketing/retail	0	0	0	0	0	0
Other	109	16.7	104	17.3	5	9.8
<b>Total</b>	<b>651</b>	<b>99.9</b>	<b>600</b>	<b>99.9</b>	<b>51</b>	<b>100.1</b>
Skipped this question	28	-	25	-	3	-

**4. What is the scope of your organization?**

Most respondents selected local, followed by provincial/territorial.

Organization Scope	All		English		French	
	#	%	#	%	#	%
Local	290	44.7	277	46.4	13	25.5
Provincial/territorial	226	34.8	200	33.5	26	51
National	86	13.2	80	13.4	6	11.8
International	46	7.0	40	6.7	6	11.8
<b>Total</b>	<b>648</b>	<b>99.7</b>	<b>597</b>	<b>100</b>	<b>51</b>	<b>100.1</b>
Skipped this question	29	-	28	-	3	-

**5. If the scope of your organization is local, provincial or territorial, please indicate the province or territory in which you are located.**

The most frequently reported provincial or territorial locations were British Columbia, Ontario, Alberta, Newfoundland and Labrador, and Nova Scotia. The least frequently reported locations were Prince Edward Island, Nunavut, Yukon, and Northwest Territories. Of the 251 respondents who skipped this question, 132 were instructed to do so because they reported working in national or international organizations in response to question 4.

Province/Territory	All		English		French	
	#	%	#	%	#	%
British Columbia	108	25.2	106	27.0	2	5.6
Ontario	83	19.4	82	20.9	1	2.8
Alberta	48	11.2	46	11.7	2	5.6
Newfoundland and Labrador	46	10.7	46	11.7	0	0
Nova Scotia	42	10	41	10.5	1	2.8
Quebec	25	5.8	8	2.0	17	47.2
Saskatchewan	24	5.6	23	5.9	1	2.8
New Brunswick	19	4.4	11	2.8	8	22.2
Manitoba	12	2.8	9	2.3	3	8.3
Northwest Territories	8	1.9	8	2.0	0	0
Yukon	4	1	4	1.0	0	0
Nunavut	4	0.7	4	1.0	0	0
Prince Edward Island	3	0.7	2	0.5	1	2.8
Other	2	0.5	2	0.5	0	0
<b>Total</b>	<b>428</b>	<b>99.9</b>	<b>392</b>	<b>99.8</b>	<b>36</b>	<b>100.1</b>
Skipped this question	251	-	233	-	18	-

**6. Are you familiar with the term “health literacy”?**

Almost three-quarters of respondents to the English questionnaire said they were familiar with the term “health literacy.” A much lower proportion of the French questionnaire respondents said they were familiar with the term « littératie en matière de santé ». This may be due in part to using the relatively new term « littératie » rather than « alphabétisation ». The development of the term « littératie » is described on the CPHA website at [www.cpha.ca/fr/portals/h-l.aspx](http://www.cpha.ca/fr/portals/h-l.aspx).

Familiar with “Health Literacy”	All		English		French	
	#	%	#	%	#	%
Yes	462	71.2	436	72.9	26	52
No	186	28.7	162	27.1	24	48
<b>Total</b>	<b>648</b>	<b>-</b>	<b>598</b>	<b>-</b>	<b>51</b>	<b>-</b>
Skipped this question	30	-	27	-	3	-

**7. If you are familiar with the term “health literacy,” please provide a brief explanation of what it means to you.**

Of the 424 people who responded to this question, 390 provided their understandings of health literacy. Thirty-four responses were not included in this inventory because they stated “do not know” or the responses were not applicable to the question. Six categories emerged from the responses, and the understandings that focus on health contexts were further divided into sub-categories.

<b>Understandings of Health Literacy</b>	<b>#</b>	<b>%</b>
Health contexts:		
a) Understandings that focus on the consumer side of health and health interactions	254	
b) Understandings that focus on the system/provider side of health and health interactions	32	
c) Understandings that focus on both the consumer and system/provider sides of health and health interactions	22	
<b>Total for health contexts</b>	<b>308</b>	<b>78.9</b>
Instrumental skills	34	8.7
Empowerment and agency	22	5.6
Reference determinants of health	18	4.6
Reference established definitions of health literacy	6	1.5
Miscellaneous comments	2	0.5
<b>Total</b>	<b>390</b>	<b>99.8</b>

**Health Contexts**

Several significant aspects of the overall findings about respondents’ understandings of health literacy relate to the universal focus on health contexts (almost 90%), and within this category, the predominant focus on consumer capacity to deal with health, health information and health services. It also appears that the links between health literacy and the determinants of health that emerged in the literature review and key informant interviews undertaken for the Expert Panel’s review have not yet transferred into the understandings of stakeholder groups, many of whom are service providers and policy makers.

Almost 80% of responses to question 7 describe health literacy as a set of skills and capacities that are used within a health/health care context in support of health-promoting activities, such as communications about health, navigation of health systems and information, and compliance with instructions about health. In these responses, health literacy is viewed as a necessity for people when they are dealing with their health and the health of their families.

Three sub-categories emerged from the health context understandings that are distinguished in terms of who is considered to be responsible for being “health literate.” The largest sub-category of responses discusses health literacy as an attribute of individual consumers, the second discusses it as an attribute of health systems and services, and the third discusses health literacy as an attribute of both individuals and providers of services and information.

A large majority (82%) of the responses that focus on the consumer side of health and health interactions located responsibility for health literacy within the individual —dealing with health demands, health information, and health systems and services.

Sample comments:

- The degree to which people can understand and use information regarding their health.
- The extent to which people can make sense of and apply health information to situations in their lives.
- The ability of people to understand and take part in decisions affecting their health--e.g., informed consent, reading labels or other care instructions; being able to ask and understand answers from health professionals; being able to search, find and understand info they want/need.
- It means that people are able to read, understand and use information to be able to live a healthy life. That people are informed and able to access the services they need for themselves and their families in order to be healthy.

### **System/Provider Side of Health and Health Interactions**

Ten percent of the responses in the health context category discussed health literacy as an attribute of those who provide health information or services, or an attribute of communications materials.

Sample comments:

- Making complex health information whether it be discharge planning, health promotion sessions, instructions for examinations etc., easy to understand as well as being culturally competent.
- Messages (health information in all forms) are prepared and delivered in a manner which is understandable, manageable and meaningful - this includes being culturally appropriate. It refers to all types of information - visual (written, graphic), auditory, etc.

### **Consumer and System/Provider Sides of Health and Health Interactions**

Seven percent of the responses in the health context category discussed health literacy as an attribute of consumers and systems/services.

Sample comments:

- Health Literacy represents the interaction between demands, assumptions, and expectations of those in the health sector and the skills, assumptions, and expectations of those adults participating in health related activities.
- At an individual level, [health literacy is] the degree to which a person can access, read, understand and use basic health information and services needed to make appropriate health care decisions. Promoting health literacy is a shared responsibility – health service providers can help promote population health literacy by incorporating client focused strategies into their practice.

### **Instrumental Skills**

This category of responses focused on peoples' individual ability to read and understand health information and communications, as well as fluency in English or French, and do not include reference to the provider side of health interactions and promotion.

Sample comments:

- The ability to read and understand information on health issues.
- Health literacy brings the focus on Canada's adult literacy problem where adults with limited literacy, in English as well as in people's first language, experience print and text barriers to health information and services.
- Adequate reading and math ability to participate in and understand interactions with the health system related to your own health.

### **Empowerment and Agency**

A small number of understandings expressed a focus on individual and community empowerment and capacity to take control of health. These comments attributed agency to individuals and communities, and expressed a broader understanding of what is involved in being healthy than was found in the majority of responses to this question. Although the number of responses in this category is low, they are important in terms of their scope of understanding of health literacy.

Sample comments:

- The capacity of an individual to manage his/her health and access to and support from the health care system both for her/himself and his/her family.
- Understanding about how life style choices affect level of health and well being. Sense of power and control over own health. Ability to understand conversations with family doctor; health warnings on medications; nutritional information on food labels etc.
- Comprehension of health system and how to access the system for you/your family/partner etc. Being able to read information, understand medicine labels and dosage etc. Able to self-advocate.
- When an individual and community, organization, government, country is aware of healthy lifestyles and applies policies and programs to support health promotion

### **Determinants of Health**

A very small number of responses directly or indirectly referenced the determinants of health or the social determinants of health, and were included here. The fact that less than 5% of responses made reference to the determinants of health may indicate that there is a need to educate providers and policy makers on the links between health literacy and the factors that influence health status.

### **Established Definitions of Health Literacy**

A few respondents directly quoted or referenced established definitions of health literacy, including the one provided in the introduction to the questionnaire:

*Health literacy is the degree to which people are able to access, understand, appraise and communicate information to engage with the demands of different health contexts in order to promote and maintain good health across the life-course.*

**8. Is the term “health literacy” used in your organization?**

The largest group of respondents said that the term “health literacy” is not used in their organizations, but almost as many said that it is used. Many respondents were not sure.

Term “Health Literacy” is Used Within the Organization	All		English		French	
	#	%	#	%	#	%
No	266	42.9	236	41.4	30	60
Yes	211	34.0	201	35.3	10	20
Not sure	143	23.0	133	23.3	10	20
<b>Total</b>	<b>620</b>	<b>99.9</b>	<b>570</b>	<b>100</b>	<b>50</b>	<b>100</b>
Skipped this question	59	-	55	-	4	-

**9. Does your organization provide direct services to clients?**

Almost twice as many respondents answered that their organizations do provide direct services to clients as those who answered no.

Organization Provides Direct Services	All		English		French	
	#	%	#	%	#	%
Yes	424	68.6	398	70.1	26	52%
No	194	31.3	170	29.9	24	48%
<b>Total</b>	<b>618</b>	<b>99.9</b>	<b>568</b>	<b>100</b>	<b>50</b>	<b>100</b>
Skipped this question	61	-	57	-	4	-

**10. What percentage of your organization’s clients face low literacy as a challenge to understanding health related information?**

The largest group of respondents indicated that they were unsure of the literacy levels of their clients, with the next largest group indicating that 50% of their clients experience low levels of literacy.

Percentage of Clients with Health Literacy Challenges						
	Total		English		French	
	#	%	#	%	#	%
All clients	33	7.7	32	8.0	1	3.7
75% of clients	51	11.9	48	12.0	3	11.1
50% of clients	100	23.4	97	24.2	3	11.1
25% of clients	72	16.8	65	16.2	7	25.9
20% or less	35	8.1	34	8.5	1	3.7
Not sure	136	31.8	124	31.0	12	44.4
<b>Total</b>	<b>427</b>	<b>99.7</b>	<b>400</b>	<b>99.9</b>	<b>27</b>	<b>99.9</b>
Skipped this question	252	-	225	-	27	-

**11. Does your organization face any of the following challenges?**

Respondents could indicate all of the challenges that applied to their situations and/or comment on additional challenges not listed in the questionnaire. A lack of print information in plain language and use of professional jargon were the most frequent responses, but a number of challenges were noted.

Organization Challenges	All		English		French	
	#	%	#	%	#	%
Lack of print information in plain language	333	58.8	308	59.3	25	53.2
Use of professional jargon	329	58.1	305	58.8	24	51.1
Lack of information in non-print formats	294	51.9	279	53.8	15	31.9
Print information that is culturally or linguistically inappropriate	287	50.7	270	52.0	17	36.2
Too much written information to share with clients	260	45.9	243	46.8	17	36.2
Inconsistent messages from different providers	257	45.4	246	47.4	11	23.4
Insufficient time to discuss advice with clients	231	40.8	223	43.0	8	17.0
How to ask clients about their health literacy concerns	230	40.6	222	42.8	8	17.0
Other	99	17.4	91	17.5	8	17.0
<b>Total</b>	<b>566</b>	<b>-</b>	<b>519</b>	<b>-</b>	<b>47</b>	<b>-</b>
Skipped this question	113	-	106	-	7	-

Within the “Other” category of challenges faced by organizations, the following categories emerged from the information provided:

Other Organizational Challenges	# of Comments
Communications barriers	18
Resource constraints	11
Working with specific populations	8
Lack of knowledge about health literacy	4
Linking policy and evidence	4
Bureaucracies	2

**12. Does your organization provide training or information to staff about any of the following?**

Respondents could indicate all that applied to their situations. The most commonly indicated forms of training/information provided to staff were on literacy levels of clients and health literacy challenges facing particular populations.

Training or Information Provided to Staff About...	All		English		French	
	#	%	#	%	#	%
Literacy levels of client populations	204	68.9	194	71.9	10	38.5
Health literacy challenges facing particular populations	138	46.6	125	46.3	13	50.0
Effective health literacy strategies for working with clients	120	40.5	108	40.0	12	46.2
How to identify people facing health literacy challenges	97	32.7	86	31.9	11	42.3
<b>Total</b>	<b>296</b>	<b>-</b>	<b>270</b>	<b>-</b>	<b>26</b>	<b>-</b>
Skipped this question	383	-	355	-	28	-

**13. Does your organization produce or provide publications that are written in clear plain language?**

The majority of respondents reported that their organizations do produce or provide plain language publications.

Organization Produces/Provides Clear Plain Language Publications	All		English		French	
	#	%	#	%	#	%
Yes	430	73.5	393	73.3	37	75.5
No	86	14.7	78	14.6	8	16.3
Not applicable	69	11.7	65	12.1	4	8.2
<b>Total</b>	<b>585</b>	<b>99.9</b>	<b>536</b>	<b>100</b>	<b>49</b>	<b>100</b>
Skipped this question	94	-	89	-	5	-

**14. Does your organization have any of the following in place?**

Respondents could indicate all that applied to their situations. The largest area reported by respondents was informal practices. Only a few reported that their organizations had policies on health literacy in place.

Organization has...	All		English		French	
	#	%	#	%	#	%
Informal practices related to health literacy	186	85.3	175	85.4	11	84.6
Practice standards that address health literacy	69	31.6	65	31.7	4	30.8
Policy on health literacy	15	6.8	14	6.8	1	7.7
Position statement on health literacy	13	5.9	10	4.9	3	23.1
<b>Total</b>	<b>218</b>	<b>-</b>	<b>205</b>	<b>-</b>	<b>13</b>	<b>-</b>
Skipped this question	130	-	89	-	41	-

**15. If you would be willing to share the information mentioned above, please provide your email address.**

Contact information was provided by 58 respondents.

**16. Does your organization have any other strategies to promote health literacy?**

Close to one quarter of respondents indicated that their organizations have other strategies to promote health literacy.

Organization has Other Strategies to Promote Health Literacy	All		English		French	
	#	%	#	%	#	%
No	409	75.6	372	75.2	37	80.4
Yes	132	24.3	123	24.8	9	19.6
<b>Total</b>	<b>541</b>	<b>99.9</b>	<b>495</b>	<b>100</b>	<b>46</b>	<b>100</b>
Skipped this question	138	-	130	-	8	-

**17. If you answered yes to question 16, please briefly describe these strategies.**

A total of 132 respondents (123 English and 7 French) provided additional information but of these, only 105 had details about their organizations' strategies to promote health literacy. The responses excluded did not provide information about strategies or did not appear to fall within the health literacy framework.

The health literacy initiatives described by respondents were sorted into categories. Ten categories emerged from analysis of the responses. These categories are presented below. In some instances, single responses described more than one initiative, in which case the response components were sorted into the appropriate categories. Overall, 113 health literacy initiatives were referenced in the 98 responses that provided the information.

The most frequently mentioned strategies fell into the areas of development and delivery of programs and materials to promote consumer health literacy, use and promotion of clear communications, and incorporation of health literacy into medical education and training. The least frequently mentioned strategies included incorporating health literacy into health professionals' practice, changing organisational culture to acknowledge/support health literacy and social marketing of health literacy.

Organizational Strategies to Promote Health Literacy	#	%
Development and delivery of programming and materials designed to promote consumer health literacy	27	22
Use and promotion of clear communications/plain language strategies to promote health literacy	16	13.
Inclusion of health literacy in health and medical education/training and in professional development of health professionals	15	12
Engagement in cross-disciplinary, cross organizational or multi-region collaborations to promote health literacy	12	10
Provision of culturally and linguistically appropriate health information and education to consumers	12	10

<b>Organizational Strategies to Promote Health Literacy (con't.)</b>		
Inclusion of health literacy issues in literacy/adult education materials, curricula and programs	12	10
Promotion of professional awareness of health literacy	8	7
Inclusion of strategies to support consumers' health literacy needs within professional practice	8	7
Changing organizational culture to address health literacy	6	5
Promotion of health literacy issues through media and social marketing	5	4
<b>Total Interventions Mentioned</b>	<b>121</b>	<b>100</b>

Development and delivery of programming and materials designed to promote consumer health literacy examples:

- Patient education
- Public health programs
- Community events
- One-on-one support of consumers (coaching, advocating)
- Distribution of information via print, web and telephone

Use and promotion of clear communications/plain language strategies to promote health literacy examples:

- Provision of health information in clear, plain language
- Use of graphics to explain information
- Training clinicians and practitioners in clear communications strategies

Inclusion of health literacy in health and medical education/training and in professional development of health professionals examples:

- Including courses on health literacy in post-secondary curricula
- Exposing medical/health students to populations with high levels of need for support in the areas of health literacy or literacy
- Focusing on health literacy in organizational staff development

Engagement in cross-disciplinary, cross organizational or multi-region collaborations to promote health literacy examples:

- Partnerships between literacy, health and education organizations at the national level
- Partnerships across sectors and within regions (e.g., provinces/territories)
- Sharing of resources and expertise across organizations

Provision of culturally and linguistically appropriate health information and education to consumers examples:

- Providing translation and interpreting services within health services
- Translation of health information into different languages
- Hiring staff from diverse backgrounds to work in health services

Inclusion of health literacy issues in literacy/adult education materials, curricula and programs examples:

- Incorporating health issues/terminology into literacy programs
- Developing a focus on health literacy in literacy curricula
- Coaching literacy students to interact with health services

Promotion of professional awareness of health literacy examples:

- Disseminating information on health literacy to health services providers
- Networking of health service providers to engage with issues of health literacy
- Research on health literacy that informs the delivery of health services

Inclusion of strategies to support consumers' health literacy needs within health professionals' practice examples:

- Taking adequate time to talk with consumers
- Using plain language and graphics to communicate
- Home visits to clients

Changing organizational culture to address health literacy examples:

- Striking organizational health literacy committees
- Developing organizational policy on health literacy
- Including a health literacy focus in organizational conferences

Promotion of health literacy issues through media and social marketing examples:

- Advocating for health literacy to policy makers and government
- Participating in Health Literacy Week

**18. Do the staff in your organization know where to find resources to support their health literacy efforts?**

More than half of the respondents indicated that staff in their organizations do not know where to find information on health literacy.

Staff Know Where to Find Health Literacy Resources	All		English		French	
	#	%	#	%	#	%
No	332	59.4	301	58.9	31	66.0
Yes	226	40.5	210	41.1	16	34.0
<b>Total</b>	<b>558</b>	<b>99.9</b>	<b>511</b>	<b>100</b>	<b>47</b>	<b>100</b>
Skipped this question	121	-	114	-	7	-

**19. Please provide sources of health literacy resources.**

One hundred and eighty-eight respondents provided information about their sources of information on health literacy. Most included more than one source of information.

**Organizations**

Canada

- Canadian Public Health Association
- Canadian Council on Learning
- National Literacy and Health Program
- National Collaborating Center for Determinants of Health  
St. Francis Xavier University
- Health Canada & Public Health Agency of Canada
- Canadian Health Network
- National Adult Literacy Database

### International

- Partnership for Clear Health Communications (Pfizer)
- National Institute for Literacy discussion list (U.S.)
- World Education
- Harvard School of Public Health
- National Institutes of Health (U.S.)
- Centers for Disease Control (U.S.)
- [www.plainenglish.co.uk](http://www.plainenglish.co.uk) (U.K.)
- National Literacy Trust
- US National Library of Medicine
- Google
- Alpha Plus Collections

### **Conferences**

- CPHA Literacy and Health conferences
- Professional conferences

### **Literacy organizations**

- Movement for Canadian Literacy
- Regional literacy organizations in Canada

### **Learning societies**

- Academic organizations

### **Universities**

- Medical schools and libraries

### **Other**

- Print publications
- Provincial ministries of health
- Regional public health units
- Medical journals
- Allied health professions
- Nurses

### **Networking with Professional Colleagues**

- Formal and informal information sharing

### **Consumer organizations**

- For seniors, persons with disabilities, etc

### **Disease-specific organizations**

- Cancer, Mental health, etc.

### **Hospitals**

- Staff development and patient education departments

- Workshops
- Community services
- ESL programs
- Aboriginal health services
- Diversity services
- Consultants

## **20. What would your organization be willing to do to promote health literacy beyond what you are currently doing?**

Three hundred and sixty-nine respondents provided responses to this question. Of these, close to half of the comments related to issues outside of the health literacy framework. It should also be noted that a large number of respondents who answered this question reported that their organizations were unable to pursue new initiatives due to resource constraints. The types of initiatives described by respondents that were pertinent to health literacy have been sorted into broad categories as follows:

<b>Organization Willing to Promote Health Literacy by...</b>	<b># of Comments</b>
Disseminating information about health literacy	33
Influencing service providers & professional practice	29
Collaborating with partners and other sectors	23
Communicating information effectively	20
Undertaking research	13
Educating	8
Implementing service provision innovations	8
Developing policy	6
* Resource constraints limit capacity to pursue new strategies	28

**Are you aware of any evaluated projects or interventions addressing health literacy in Canada?**

Information on evaluated projects was solicited in order to gain an understanding or knowledge about health literacy within Canada to support a project by the National Collaborating Centre for Determinants of Health to survey evaluated health literacy interventions. The project report is available from the Centre’s website at [www.nccdh.ca](http://www.nccdh.ca).

<b>Aware of Evaluated Projects or Interventions</b>	<b>All</b>		<b>English</b>		<b>French</b>	
	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
No	465	85.7	426	85.9	39	84.8
Yes	77	14.2	70	14.1	7	15.2
<b>Total</b>	<b>542</b>	<b>99.9</b>	<b>496</b>	<b>100</b>	<b>46</b>	<b>100</b>
Skipped this question	137	-	129	-	8	-

**21. If you checked yes and would be willing to share this information, please provide your email address so that we can contact you.**

Thirty-eight respondents provided contact information, which was shared with the National Collaborating Centre for Determinants of Health.

**22. Do you have any further comments or suggestions to offer the Expert Panel on Health Literacy?**

Open-ended responses to this question were sorted into the categories listed below. The categories provide further indication of respondents’ understandings of health literacy and the challenges associated with promoting population health literacy in Canada. The top three areas of comment included health communications, diversity and equity within the health services systems, and comments on influencing professional practice so that it promotes health literacy.

<b>Do you have any further comments or suggestions to offer the Expert Panel on Health Literacy?</b>	<b># of Comments</b>
Health Communications	25
Diversity & Equity	18
Influencing Professional Practice	17
Intersectoral Collaboration	14
Education	9
Media/Culture	8
Funding	8
Determinants of Health	7
Definition of health literacy	6
Politics	6
Service Provision	5
Suggested Interventions	5
Families	3

Additional comments included feedback to the Expert Panel, comments on the Web-based questionnaire, and miscellaneous comments. Overall, the comments submitted in response to this question are so diverse that the categories developed do not do fully reflect the high level of interest and concern about health literacy.

## **SUMMARY**

The results of this Web-based questionnaire provide insights into some of the significant challenges entailed in promoting population health literacy in Canada. At the same time, the number of people who took the time to respond to the questionnaire (679) serves as an indicator that health literacy is gaining importance as an issue of interest in health care and other sectors, providing opportunities to promote health literacy interventions.

The level of awareness of health literacy among the respondents is an indicator of this growing interest, but may also reflect a likelihood that individuals already aware of the issue of health literacy were more inclined to complete the questionnaire than those who were not familiar with the issue. The understandings of health literacy provided by respondents indicate that more needs to be done to promote a balanced perspective that includes the system and provider sides of health care relationships as well as the consumer aspect. This point is supported by the fact that the majority of respondents (close to 70%) indicated that they worked in service-providing organizations.

The largest group of respondents (254) described health literacy as an attribute of health service consumers without reference to the system and provider aspects, and close to 80% of those who provided their understandings located the issue of health literacy within the health sector without reference to education, socio-economic status or other determinants of health. Clearly there is a need to broaden the perspectives of professionals working in areas in which health literacy is pertinent.

When asked whether the term “health literacy” is used in their organizations, only one third of the respondents said yes. This indicates that the term has not yet transferred into the everyday use. And, while the majority of respondents reported knowing the literacy levels of

their clients, a significant number (31%) said that they were unsure. Health literacy (including the important issue of functional literacy) requires broader exposure not only in the consumer population but among service providing organizations and policy makers.

When asked about challenges their organizations faced in terms of promoting health literacy, a large percentage of respondents reported complex and inaccessible information formats being used with clients. This fits with information supplied in response to the question on strategies organizations were already using to promote health literacy, in which use of clear communications was the second most frequent response after provision of programming and materials. It appears that service providers and policy makers understand the importance of clear communication and plain language in health contexts but continue to struggle with implementing appropriate strategies to reduce communication barriers. This may be a product of the fact that less than half of the respondents reported that staff in their organizations knew where to find information about health literacy. This indicates a need for broader and more intensive dissemination of information on the issue.

When asked what their organizations would be willing to do in terms of new initiatives to promote health literacy, respondents focussed on sharing knowledge, influencing service providers in their practice and engaging in collaborative projects. A large number of those who answered this question reported that their organizations were unable to pursue new initiatives due to lack of capacity. The small number of evaluated health literacy projects in Canada indicates that knowledge generation and dissemination are not being pursued to a level that would support the promotion of health literacy. In the absence of improvements to funding to undertake new initiatives in the health literacy area and to evaluate such initiatives and disseminate knowledge gained from them, it may be unrealistic to expect a growth in understanding of health literacy and the development of evidence based interventions.