



COURAGE TO CARE



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HEALTH LITERACY *Addressing Communication Barriers to Foster Patient Self-Care and Family Care*

A recent study published in *Annals of Emergency Medicine* (Engel et al., 2008) followed emergency room patients after discharge, and found that 78% did not understand: 1) their diagnosis; 2) their emergency room treatment; 3) instructions for their at-home care, or; 4) warning signs of when they should return to the hospital. Nearly 50% did not understand two or more of these areas and the greatest confusion involved home care, i.e. medication instruction, wound care, rest and when to schedule a follow up visit.

Traditionally these behaviors have been explained under concepts such as non-compliance, but there is increasing recognition that a patient’s lack of

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preparedness for self-care is most often due to lack of knowledge and understanding of the health care system — that is lack of health literacy. This can be attributed in part to the anxiety and fear that many patients experience in healthcare settings that interferes with the processing of information.

Other factors that contribute to the lack of health literacy are not due to the patient. Health literacy depends also on effective communication skills on the part of a physician or health professional, and importantly, an established relationship between patient and doctor, often difficult to accomplish in the short exchanges of present medical care.

Military Unique Challenges for Health Literacy

A number of these factors can be particularly problematic in military life and culture.

- Frequent family moves present a challenge for patients and doctors to establish relationships over time.
- The military has many young parents who are under great stress.
- There are many single, first time parents who may live apart from extended family support.
- Parents who may not understand health instructions compromise their ability to care for their family.
- Not understanding instructions for the care of a sick child can compromise that child’s health and result in additional clinic or emergency room visits.
- Health literacy is also important for the family of the combat injured; they play an essential role in the recovery of the injured soldier.

Strengthening health communication skills to enhance patient understanding for improved self and family care

involves some specific steps. Below are some practical suggestions and a tool — a communication technique referred to as “teach back.”

Action Steps

- Have paper, pencils or pens available for patients to write down important information at the time of their visit.
- If you are a provider who addresses health issues such as diabetes, gastrointestinal issues, mental health problems, have health literature on these subjects in accessible places in your office for patient education and hand it personally to your patient who you think it will help.
- If your office or clinic has a website that provides patient care information, ensure that your patient knows how to access this. Give them a “business card” or other written paper with the address on it — write a note on it from you about when they should access it so it is felt as a personal invitation for them to use it and “talk” to you.

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- If your clinic or practice utilizes nurse practitioners or case managers, make sure your patients know who they are and how they can contact these individuals with questions about their self-care.

Teach Back: A Communication Plan

- Employ the “teach back” approach to patient communication: After you have communicated the diagnosis, treatment plan, etc, ask the patient to “repeat back” the instructions to you. This provides an opportunity *to hear what the patient has heard* and to clarify any discrepancies in how they understood the care plans.
- Ask the patient if there is anything in the self-care plan that would make it difficult or impossible for them to follow, and then address those issues in a practical and helpful manner. If need be, refer them to the care manager to specifically address these barriers to their health care plan.
- Relate the diagnoses and follow-up plans in terms that the patient and family members can understand. If agreeable to the patient, invite in any other family member that has come with them so that two people rather than one, hears the plan and action steps.

- If a language barrier is anticipated in the visit, either you or your office staff should ask the patient to feel free to bring a family member or friend who can communicate with the doctor and with the patient. If a patient is older and has hearing or vision problems, suggest that they bring a family member or friend who can assist in the healthcare conversation.
- Employ the “dual discharge” approach: the physician talks to the patient about the results, treatment plan and follow up care; a nurse follows up with computerized discharge instructions and goes over the same material again.

Good communication fosters good patient self-care. One of the most obvious but subtle contributors to impaired health literacy is that patients are often *not aware of what they do not understand*. Using the “teach back” approach can help physicians and health care providers recognize what the patient has not understood, and clarify information and care instructions before the patient leaves the clinic, emergency room or office. Helping patients process important information can optimize health care delivery and better ensure patient health.

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COURAGE TO CARE is a health promotion campaign of Uniformed Services University. Its purpose is two-fold: to provide quality health information reflecting our University's excellence in military medicine and to present it in a friendly, appealing format for immediate distribution for the health promotion needs in your community.

