

**In It Together: Improving  
Health Literacy for Black  
Men who have Sex with Men**

**HRSA Innovative Service Models and  
Best Practices panel**  
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**MICHELLE**

Good afternoon, my name is Michelle Vatalaro and I am the Health Literacy Lead for the In It Together project at the JSI ACE TA Center. With me today is Daniel Driffin, who is our Lead Trainer and is also the Co-Chair of the Fulton County Task Force on HIV/AIDS and Co-Founder of THRIVE SS, Inc.

Today, we're going to be talking about our work on the In It Together Project, which aims to improve health outcomes for black gay, bisexual, same gender loving, and other men who have sex with men by improving health care providers' capacity to provide health literate services to their clients.

## Overview

1. The case for health literacy in HIV care
2. In It Together for Black MSM
  1. Training of Trainers
  2. The Community Training
3. Building the network of health literacy trainers
4. We're All In It Together



### **MICHELLE**

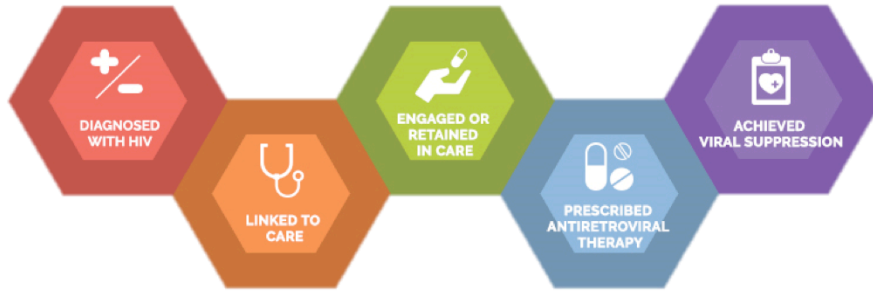
Let's just do a quick overview of what we are going to talk about today.

First, we're going to talk a bit about why it is important for HIV care providers to be concerned about health literacy.

Then, we'll talk about the In It Together model, and how we have worked to build a network of health literacy trainers across the country that provide the Health Literacy Community Training to health professionals in their communities.

We'll end by talking a bit about our future plans for the In It Together program.

## Health literacy and HIV



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**DANIEL**

[Daniel to talk through experience of health literacy at moment of diagnosis]

**Health literacy**


The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

Demands of the health care system

Health Literacy

Person's skills and abilities

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 **In It Together**  
IMPROVING HEALTH LITERACY FOR BLACK MSM

## MICHELLE

Health literacy is defined as the degree to which people have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

This definition recognizes that health literacy is a key factor in health care quality, safety, and equity.

A person's health literacy is the result of both a person's skills and abilities and the demands placed on the patient by the health care system. The weights of each side of this change all the time, which is why we say that health literacy is dynamic. It can change moment to moment as the patient's health status changes, or as we ask them to engage with the health care in different ways.

Daniel just gave us a great glimpse into how a person's health literacy can change moment to moment. Unfortunately, the moments where we really need to be at our sharpest - for example, that moment of diagnosis where you're getting tons of new, important information at the same time – can often be the moment where we are least able to take in and process health information. A person's physical and emotional state can affect what a person hears, how he interprets it, and how he acts on it.

It's easy to think about health literacy as a set of skills that an individual person needs

## The need

Limited health literacy can affect clients' ability to:

- Understand and apply health care information
- Interact with the health care system
- Get or stay in care
- Take medication correctly
- Complete forms
- Determine which legal documents apply to a specific health care situation



### DANIEL

Limited health literacy can have a substantial impact on a person's ability to successfully engage with the health care system or achieve their health goals, and can have a real, tangible impact on people living with HIV.

A person who is experiencing limited health literacy might not be able to understand the basics of HIV. For example, they may not understand that HIV is a virus that attacks the immune system, which means that the body has a hard time fighting off diseases.

The health care system is complicated for *everyone*, and clients who have limited health literacy may have particular difficulty navigating the system. Because it's difficult to understand and navigate, clients with limited health literacy may not be able to get in care, or stay in care. They may not understand how or when to take their medications,

Limited health literacy affects people's ability to complete basic health tasks. They might not be able to understand or apply information that they get about their health care. They may struggle to get the care they need, to stay in care once engaged, or to take their medication correctly. Medications help to keep the amount of virus in the

## Who is at risk?

- Older adults
- Racial and ethnic minority populations
- People of low socioeconomic status
- Recent immigrants or other people whose first language is not English
- Medically underserved people

89 million people in the U.S. (36% of adults) have limited health literacy.

**In It Together**  
IMPROVING HEALTH LITERACY FOR BLACK MSM

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### DANIEL

Everyone experiences limited health literacy sometimes. Everyone has had an experience where they had a cold and felt foggy - it was hard to process information. It happens to *everyone*, especially when we're emotional, uncomfortable, or in pain.

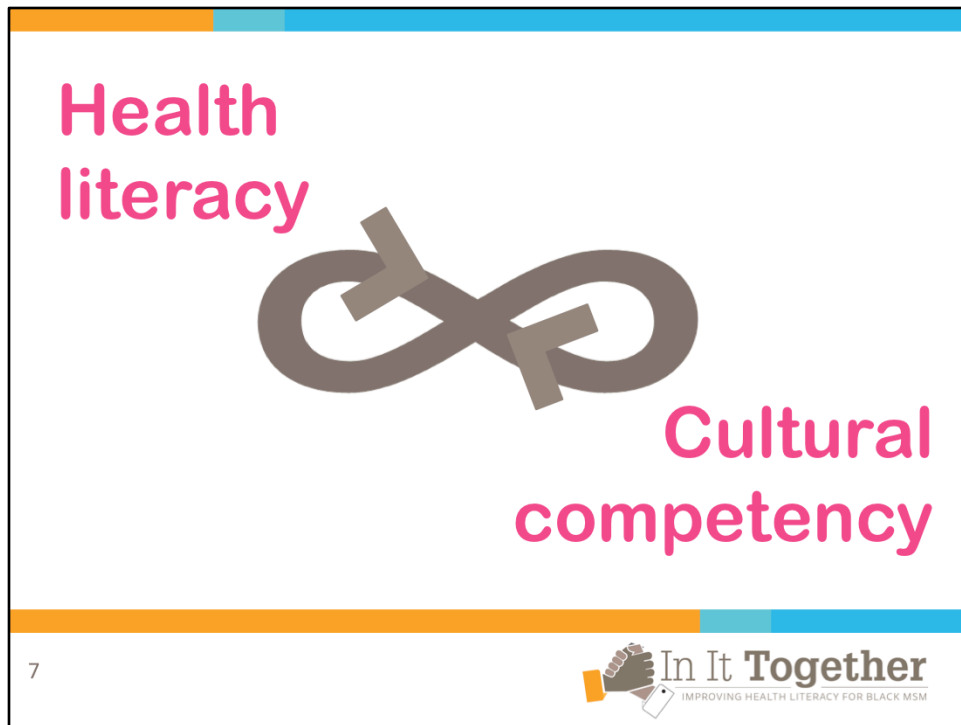
Health systems must be designed to accommodate the unpredictability of health literacy skills. This means presenting information simply and clearly. Clear communication makes it easier for *everyone* to understand the health care system and health care information. No one minds when information is easier to understand.

Up until now, I've talked about how everyone can experience limited health literacy. While its certainly true that everyone is at risk for and experiences limited health literacy sometimes, some people's *baseline* level of health literacy is limited.

In fact, 89 million people in the United States – that is, 36% of the adult population – have limited health literacy.

People at greatest risk for limited health literacy are:

- Older adults
- Racial and ethnic minority populations



## DANIEL

Health care organizations that serve people living with or at risk for HIV make a real effort to provide culturally competent care - care that addresses all of the physical, emotional, behavioral, and social health needs of clients, while being sensitive and responsive to their unique identity.

Its important to realize that addressing health literacy is an essential part of providing culturally appropriate services.

Moreover, health care organizations *cannot* provide health literate services without being sensitive and responsive to the client's unique identity.

For example – some groups use certain language to talk about their health. It may not be that the client doesn't understand the concept, but that they use different words to describe. It's the responsibility of the *provider* to make sure that the client understands; if that means using the client's words, that is OK.

## Responsibility of health professionals in health literacy

- Health literacy is an issue of health equity
- Health care organizations have a responsibility to address and build clients' health literacy
- Health professionals must provide information in a way clients understand

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### DANIEL

As we just discussed, addressing a client's health literacy is an integral part of providing culturally competent care. Health care providers have a *responsibility* to ensure that all of their clients get the information that they need to get and stay healthy because at its most basic, health literacy is an issue of health equity. If there is a group of people who is not getting the information that they need – for whatever reason – in this case, their health literacy, then we have a *duty* to address that in the way that we provide care.

Certainly, individual health care providers play an important role in ensuring that their clients have the information they need to get and stay healthy. But to really address health literacy for our clients, its important that *organizations* make a commitment to address health literacy. Organizations have a responsibility to provide information to clients in a way that the clients can understand it and use it.

Organizations that serve people living with HIV should take steps to meet clients where they are. By doing so, clients can start to understand the basics of their care and grow their health literacy over time.



# The In It Together project



## **MICHELLE**

So now that we understand the need to address health literacy in organizations that serve people living with HIV, let's talk about how the In It Together project helps to build organizations' health literacy so that they can better meet their clients' needs.

## Overview of In It Together

**Goal:** Improve the capacity of health care organizations to deliver health literate HIV services to black gay, bisexual, same-gender-loving, and other men who have sex with men

**Purpose:** Build health literacy knowledge of Health Literacy Trainers in communities across the U.S., including capacity to deliver local community training to health care provider organizations



### **MICHELLE**

In It Together started in 2014 as a project funded by the Health Resources and Services Administration. It's now in its second iteration.

The In It Together project endeavors to improve the capacity of health care organizations – like health departments and community-based organizations - to deliver health literate HIV services to black gay, bisexual, same-gender-loving, and other men who have sex with men.

To accomplish this, JSI developed a 'training of trainers', to develop a network of health literacy trainers in communities across the U.S.



## MICHELLE

In It Together is currently available in 34 priority communities across the United States. These communities were selected based on HIV prevalence and epidemiological data.

In order to ensure that the In It Together training is responsive to the needs of each individual community, In It Together trainers are recruited from and conduct training in their own community. This is intentional so that the trainers are able to infuse their presentations with that “local flair” or community consciousness that you really only have when you live there. It really helps to get at the *culture* of that community to help meet the needs of the clients in that community.

OPTIONAL: Our training evaluations show that this is one of the most valuable aspects of the training. The communities appreciate that the trainers are available to serve as health literacy resources in their community. Community training attendees really appreciate the opportunity to learn from people who understand the culture of the community.



## MICHELLE

In It Together functions on a train-the-trainer model. Potential trainers are recruited from the 34 priority communities. People who are interested in becoming health literacy trainers fill out a short application. Applications are scored, and a group of trainers are selected from the applicant pool.

The selected applicants then participate in a multi-session, virtual Training of Trainer program. These Training of Trainer sessions are intended to give the trainers a deep knowledge of strategies to improve health literacy for the black MSM community. We want to ensure that the trainers are able to do more than just deliver a one-hour training; we are preparing them to be *health literacy resources* in their community.

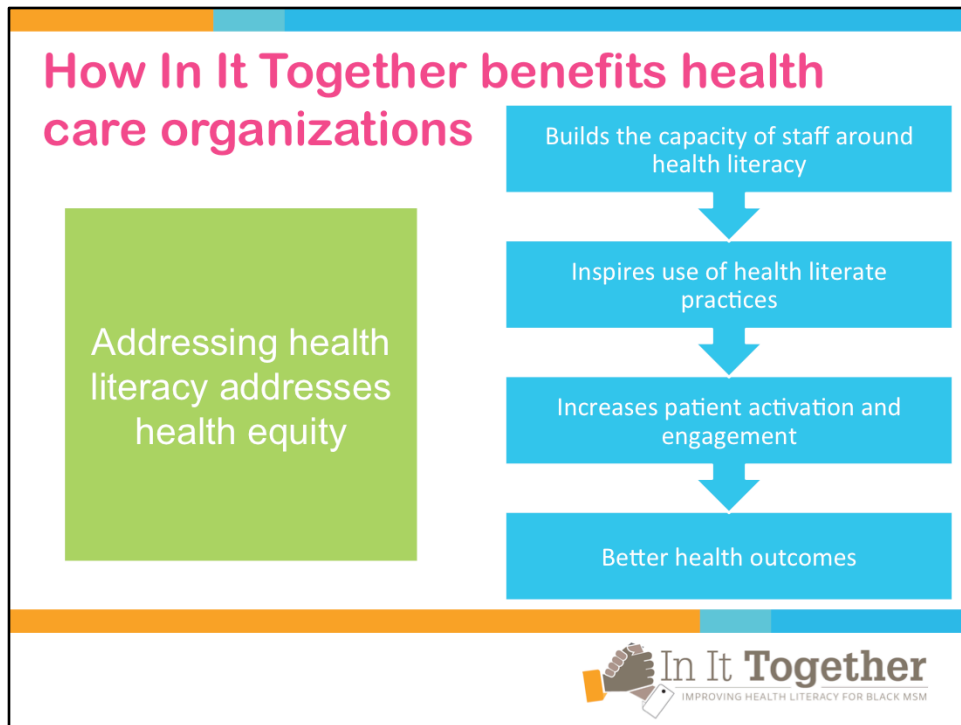
Following the Training of Trainers, graduated trainers go out into their community and provide the Health Literacy Community Training to health professionals in their community.

We define “health professional” really broadly, and the In It Together trainers are encouraged to provide the training to any professional who provides services to people living with or at risk for HIV. This would include doctors, dentists, nurses, and intake staff, but it would also include case managers, housing service providers, and other providers of supportive services.

# The Community Training



Let's talk about the In It Together Health Literacy Community Training.



**MICHELLE**

The Health Literacy Community Training is a great starting point for health care organizations to begin incorporate health literacy tools and techniques into their conversations and services.

The Community Training is about more than raising awareness about the issue of health literacy. Attendees leave the community training inspired, with real, tangible strategies that they can implement right away to improve their communication with their clients.

Because the information is now easier to understand, apply, and use, clients can be more active, engaged participants in their care.

This leads to better health outcomes for all clients, particularly those with limited health literacy.

By addressing the health literacy needs of clients, organizations are really taking steps towards addressing health equity for clients with limited health literacy.

## Elements of the Community Training

- Introduction to health literacy
- How health literacy affects health outcomes
- Social and contextual factors
- Strategies to improve written communication
- Strategies to improve face-to-face communication



### **MICHELLE**

The training starts by providing an introduction to health literacy.

We define what health literacy is, the populations most affected by health literacy, and the effect that limited health literacy has on health outcomes and health care costs. Particular focus is placed on the effect that limited health literacy can have on people living with HIV.

We then go into detail on some specific strategies that providers can use to improve their written and face to face communications with clients.

## Approaches for health literate communication

### Strategies for written communication

- Large, easy-to-read font
- Simple words
- Short sentences
- Familiar words and phrases
- Active voice

### Strategies for face-to-face communication

1. Universal precautions approach
2. Ask Me 3™
3. Teach-back



## MICHELLE

### Written Communication

When we talk about improving the clarity of written materials we mean materials such as: pamphlets, health education materials, prescription instructions, etc. We encourage the providers to create or select written materials that use:

- Large, easy-to-read font
- Simple words
- Short sentences
- Familiar words and phrases
- Active voice

We want to avoid:

- Using ALL CAPS, *Italics* or underlining
- Acronyms and contractions
- Technical words/jargon, when possible

### Face to Face Communication

We also present three strategies to improve a health care organization's health literacy.



## Who can benefit from the IIT community training

- Medical provider organizations
  - Social service provider organizations
  - Health departments
  - Organizations that support access to health care
- San Diego, CA
  - San Francisco, CA
  - Los Angeles, CA
  - Birmingham, AL
  - Little Rock, AL
  - West Memphis, AR
  - Hartford, CT
  - Miami, FL
  - Atlanta, GA
  - Chicago, IL
  - Indianapolis, IN
  - Baton Rouge, LA
  - New Orleans, LA
  - Baltimore, MD
  - Detroit, MI
  - Minneapolis, MN
  - Jackson, MS
  - North Mississippi
  - St. Louis, MO
  - Kansas City, MO
  - Newark, NJ
  - Jersey City, NJ
  - New York City, NY
  - Raleigh, NC
  - Charlotte, NC
  - Cleveland, OH
  - Philadelphia, PA
  - Columbia, SC
  - Memphis, TN
  - Houston, TX
  - Richmond, VA
  - Norfolk, VA
  - Washington, DC
  - Milwaukee, WI



### MICHELLE

The In It Together Health Literacy Community Training can help a variety of organizations that serve and support people living with or at risk for HIV. The Community Training is available to:

- Medical provider organizations
  - Social service provider organizations
  - Health departments, and
  - Organizations that support access to health care
- In the communities that you see listed here.

## Connect to training

- Trainers offer training to health care organizations, drawing upon local connections.
- Organizations can request training directly through the *In It Together* Website.

**Request a Training Form**  
National Health Literacy Project for Black MSM

**Instructions**

Please complete the form below to request a training. You will be contacted by our project staff within a few days.

**You**

First Name \*

Last Name \*

Job Title - Role \*

Email \*

Phone Number \*

**Your Organization**

Organization Name \*

Street Address \*

City \*

State \*

Zip Code \*

Has your organization received health literacy training in the past?  Yes  No  Unsure

Please select your training location \*

The In It Together program has services available in the following cities. Please select the one closest to you. If none of these locations is near your organization, please choose Other and let us know.

Submit Request

<https://hivhealthliteracy.careacttarget.org/>



### MICHELLE

If your organization is interested in receiving the In It Together Community Training, you can request a training through the In It Together website.

Our trainers also draw upon and leverage their local knowledge and relationships with service providers in their community and provide the training to those organizations.

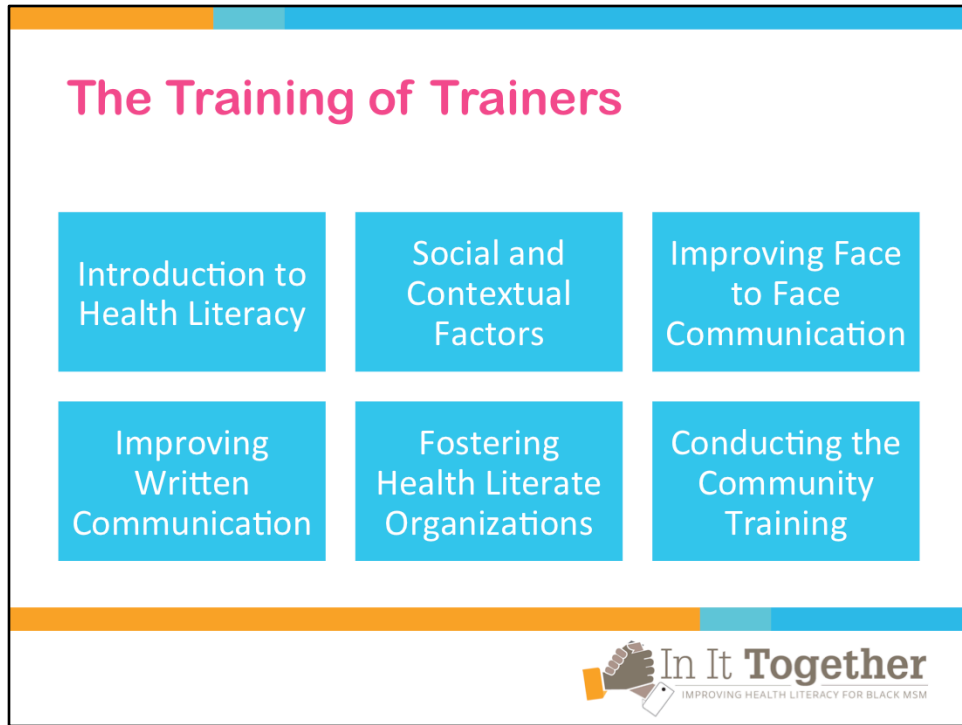
The Community Training is free of cost to the host organizations.

# In It Together Training of Trainers



**MICHELLE**

I want to take a bit of time to talk about the In It Together Training of Trainer program.



## **MICHELLE**

The Training of Trainers is an interactive, distance-based training program.

It's made up of 6 one-hour training modules and provides detailed information about:

- Introduction to Health Literacy
- Social and Contextual Factors that affect health literacy
- Improving Face to Face Communication
- Improving Written Communication
- Fostering Health Literate Organizations
- Conducting the Community Training

Even though they take place online, all of the sessions are really interactive and participatory. We use a lot of chat messaging to keep the participants engaged. We encourage them to draw on their own personal and professional experiences to engage with the material. We also include activities, such as case studies and polling to keep the energy and engagement with the material high.

## We want *you* to be an In It Together trainer because you:

- ✓ Are an experienced training facilitator
- ✓ Are comfortable talking about Black MSM issues and sexuality
- ✓ Have great relationships with health care organizations

### Interested?

### Want to Learn More?

- Meet up with us throughout USCA!
- Email us at [hivhealthliteracy@jsi.com](mailto:hivhealthliteracy@jsi.com)



### DANIEL

If any of this sounds interesting or exciting, I want to encourage you to apply to be an In It Together trainer. We're recruiting *right now* for a new cohort of In It Together trainers.

We are looking for people who ideally are experienced training facilitators, are comfortable talking about Black MSM, the social determinants of health, sexuality, and other topics like that. We would like our trainers to have great relationships with HIV service provider organizations in their communities.

If you're interested in learning more about becoming a health literacy trainer, Daniel and I will stick around after this session to talk more about it. Daniel will also be hosting short meet-ups at the JSI booth throughout the conference to give more specific information.

You can also always email us at [hivhealthliteracy@jsi.com](mailto:hivhealthliteracy@jsi.com) for more information or for the training application link.

The application is a short online form. We'll go through and review the submitted applications and make our selections. The selected trainers will then attend the ToT sessions, which will take place in mid-November.

## Why become an In It Together trainer

- Become a health literacy resource in your community
- Build the capacity of health care organizations in your community to meet the health literacy needs of their clients



### DANIEL

Why would you want to become an In It Together trainer?

First, you'll get to build your own capacity and skills around health literacy. We really want our trainers to be seen as health literacy *resources* in the community. In this role as a trainer, you'll really be able to be an advocate for your community – helping organizations to better serve black gay, bisexual, and same gender loving men.



**MICHELLE**

So one more time, here is what will happen.

You'll apply to be an In It Together trainer.

After you're selected, you will attend six one-hour interactive training webinars, during which time you'll learn everything you need to know to conduct the Community Training.

After the ToT ends, you'll connect with health care organizations in your community to schedule their one-hour Community Training session.

Then, you will conduct the health literacy training!

# We're All In It Together



## **MICHELLE**

We will also be adapting the In It Together Curriculum and we're calling it adaptation We're All In It Together.

This is going to be a separate program that will operate in addition to the In It Together program focusing on Black MSM.



## Spring 2018: We're All In It Together!

- An *In It Together* curriculum adapted to help HIV providers meet the diverse needs of key populations
- Focus on populations facing disparities (e.g., Black and Latino MSM, youth, Black women, transgender women). Adapted resources will include:
  - Training of Trainers
  - Community training
  - Supporting materials
- Trainer recruitment will take place in early 2018



### MICHELLE

We're All In It Together is going to be an adaptation of the IIT curriculum designed to meet the needs of people living with HIV who receive RWHAP services – moving beyond Black MSM.

We're going to be focusing on populations that face health disparities, such as:

- Black and Latino MSM
- Youth
- Black women
- and transgender women

We're All In It together will include a new Training of Trainers program, a new community training, and new supporting materials.

If you're interested in We're All In It Together – be on the lookout in 2018. We'll be putting out a call for training applications at that time, with training to occur in the Spring.

## Thank you!

**Michelle Vatalaro**

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**In It Together**

<https://hivhealthliteracy.careacttarget.org/>  
hivhealthliteracy@jsi.com



### **MICHELLE**

Thank you very much for listening today. We appreciate your interest and all that you do.

If you have any questions for us, as I said, Daniel and I will stick around for a few minutes. You can also contact us via email – our information in on the screen.

Thank you again.