

In It Together: Improving Health Literacy for Black Men Who Have Sex with Men (MSM)

Disclosures

Presenter(s) has no financial interest to disclose.

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Goal of In It Together



Goal: Improve the capacity of health care organizations to deliver health literate HIV services.



Learning Objectives

At the conclusion of this activity, the participant will be able to:

- **1**. Explain what health literacy means
- 2. Recognize indications that your clients are experiencing limited health literacy
- 3. Apply health literate approaches to improve communication with clients



Two curricula



IMPROVING HEALTH LITERACY FOR ALL



In It Together

IMPROVING HEALTH LITERACY FOR BLACK MSM

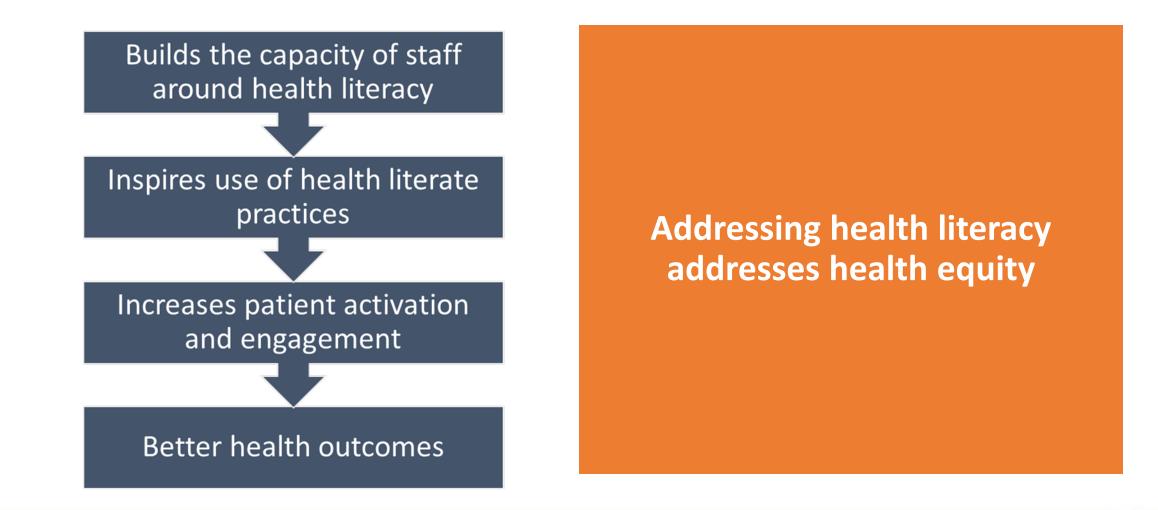


In It Together model





How In It Together benefits health care organizations





In It Together: Improving Health Literacy for Black MSM

Health Literacy Community Training

Training objectives

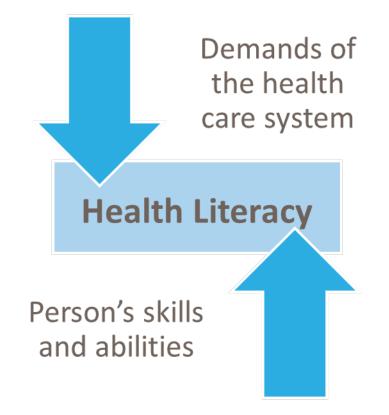
By the end of this training, you will be able to:

- Explain what health literacy means
- Recognize indications that your clients are experiencing limited health literacy
- Apply health literate approaches to improve communication with your clients
- Explain the importance of organizational health literacy for Black gay, bisexual, and same gender loving men
- Identify 3 actions you and your organization can take to promote health literacy and deliver health literate HIV services



Definition of health literacy

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.

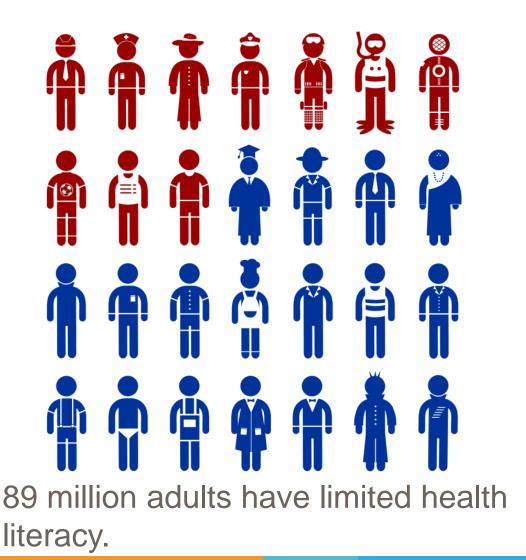


10 Andrulis and Brach, 2007; Sudore et al., 2009; ODPHP, 2008



Who is at risk?

- Everyone can be affected by limited health literacy
- People most affected by limited health literacy include:
 - 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



Kutner, M., Greenburg, E., Jin, Y., & Paulsen, C. (2006). The Health Literacy of
America's Adults: Results from the 2003 National Assessment of Adult Literacy.
NCES 2006-483. National Center for Education Statistics.



How does limited health literacy affect people?

- Limited knowledge of the body
- Limited knowledge of the nature and cause of a disease
- Less awareness of how to prevent illness and stay healthy
- Less knowledge of their own medical conditions and self-care instructions
- Difficulty understanding numeric medical information
- Difficulty understanding when or how to take medication
- Difficulty identifying risks and side effects printed on drug labels

Kutner, M., Greenburg, E., Jin, Y., & Paulsen, C. (2006). The Health Literacy of
America's Adults: Results from the 2003 National Assessment of Adult Literacy.
NCES 2006-483. National Center for Education Statistics.



How does limited health literacy affect health outcomes?

People with limited health literacy are:

- More likely to describe their health as "poor"
- Less likely to use preventive services
- Less knowledgeable about medical conditions and treatment
- More likely to use emergency services
- Often ashamed about their health literacy skill level



Indications that a client may have limited health literacy



Does not take medications correctly



- Does not take medications correctly
- Frequently misses appointments
- Fails to follow through on tests or referrals



- Does not take medications correctly
- Frequently misses appointments
- Fails to follow through on tests or referrals
- Does not complete intake forms
- Cannot provide a detailed history of their illness or treatments



- Does not take medications correctly
- Frequently misses appointments
- Fails to follow through on tests or referrals
- Does not complete intake forms

- Cannot provide a detailed history of their illness or treatments
- Asks few questions
- Avoids reading tasks using commonly accepted reasons
- Does not remember information read earlier



Indications among people living with HIV/AIDS

- May not be able to articulate the basics of HIV
- Has a consistently high or unchanged viral load
- Does not take antiretroviral therapies correctly
- Has frequent hospitalizations
- Falls out of care
- May not engage in preventive care
- Has poor health outcomes





Universal precautions approach



Premise of the universal precautions approach to health literacy

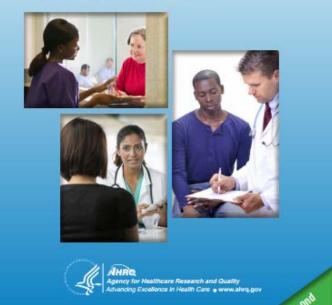
- Many people struggle with understanding medications, self-care, instructions, and follow-up plans
- Ensure systems are in place to promote better understanding for all clients, not just those you think need extra assistance
- Everyone benefits from simple language



Universal precautions takes an organizational commitment

Universal precautions need to be implemented by all staff

AHRQ Health Literacy Universal Precautions Toolkit





Socio-cultural factors



Social determinants of health

Health Equity: the absence of disparities or avoidable differences among socioeconomic and demographic groups or geographical areas in health status and health outcomes **Social Determinants of Health**: the conditions in the environment in which people are born, live, learn, work, play, worship, and age that affect a wide range of health outcomes, quality-of-life outcomes and vulnerabilities

- Housing instability
- Poverty
- Educational level
- Incarceration/justice involvement



Intersectionality and the Black MSM experience

Intersectionality: The idea that an individual may have multiple identities that intersect to create a whole that is different from the component identities

- A person's intersectional identity makes them unique
- Negative effects can be compounded when a person experiences multiple forms of discrimination at the same time.
- People may respond to instances of marginalization with one identity at the expense of another
- Black MSM may feel marginalized by the black community and by the LGBTQ community



Diversity

- Different cultural groups may share characteristics:
 - Race
 - Ethnicity
 - Sexual orientation
 - Sexual behavior
 - Country of origin
 - Geographic region
- Every person is different and has a different lived experience.

No group is homogeneous



Attitudes, stigma, and their impact on health-seeking behavior



Stigma

Stigma: the prejudice, avoidance, rejection and discrimination directed at people believed to have an illness, disorder, or other trait perceived to be undesirable

 Stigmatizing social environments negatively affect health-related outcomes

- Health care facilities
- Work environments
- Business establishments
- Family gatherings
- Friend groups and social settings
- Institutions of faith
- Institutions of learning
- ...and many other places



Responses to stigma

- Denial
- Shame
- Isolation
- Deceit
- Defensiveness
- Depression

- Guilt
- Withdrawal
- Fear
- Self-harm
- Loss of self-worth



Attitudes, stigma, and their impact on healthseeking behavior

- Health care providers should indicate their comfort and willingness to discuss sex and sexuality with clients
- Few Black gay and bisexual men report talking about HIV in any of their social circles
- In a recent study, 61% of Black MSM reported rarely discussing HIV with their physicians



Altarum Institute. (2016). Sexual health and your patients: A provider's guide. Hamel, L., Hoff, T., Kates, J., Levine, S., & Dawson, L. (2014). HIV/AIDS In The Lives Of Gay And Bisexual Men In The United State. Retrieved from http://kff.org/hivaids/report/hivaids-in-the-lives-of-gay-and-bisexualmen-in-the-united-states/.

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Medical mistrust

- Lived personal experiences, or knowledge of historic community mistreatment can prevent individuals from seeking assistance
- This can create barriers to open communication with health care providers
- Take the time to answer questions, and use clear language when talking with clients









Cultural humility & cultural competency

Cultural Humility

Willingness to increase selfawareness of biases and perceptions and engage in a life-long selfreflection process about how to put these aside and learn from clients (Tervalon, Garcia, 1998)

Cultural Competency

The ability to understand, appreciate, and interact with persons from cultures and/or belief systems other than one's own

Tangney J.P. "Humility: Theoretical perspectives, empirical findings and directions for future research," Journal of Social and Clinical Psychology. Vol 19, pp.70-82, 2000. McGraw-Hill Concise Dictionary of Modern Medicine. © 2002 Tervalon, Garcia, 1998

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Provider bias



- Bias: A preference for one thing, person, or group over another
 - Conscious (Explicit)
 - Unconscious (Implicit)
- Bias can become a prejudice against certain people or groups in ways that are unfair and lead to discrimination



Current evidence on how to reduce implicit provider bias

Some research suggests that implicit bias can be diminished by:

- Increased exposure to counter-stereotypes
- Increased internal motivation
- Increased cognitive empathy
- Increased emotional regulation
- Increased partnership building skills



Face to face communication



General strategies to improve spoken communication

- Use plain, non-medical language
- Limit content to 2-3 main points
- Repeat key points multiple times
- Incorporate words/expressions used by client
- Be specific
- Make sure instructions are appropriate for the client's life
- Consider client's cultural context
- Encourage client to ask questions

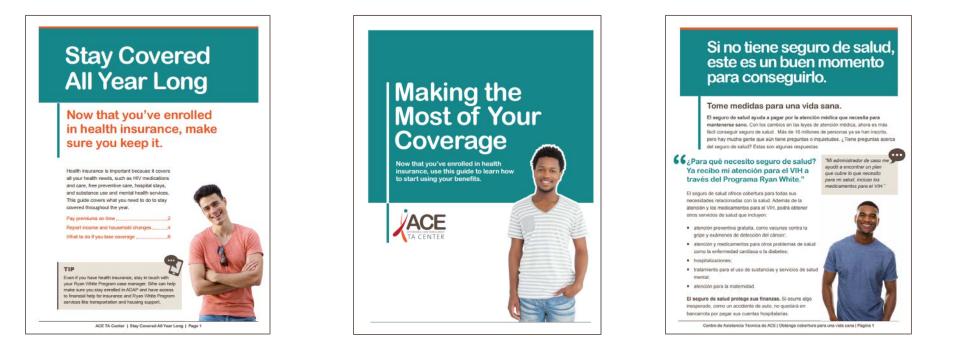


Important moments in HIV communication

- Explaining what to bring to a medical visit
- Explaining what to expect during a medical visit
- Explaining disease and symptoms
- Communicating medication instructions
- Describing medication side effects
- Explaining what health insurance is and how to use it



Health insurance literacy materials are available at the ACE TA Center <u>https://targethiv.org/ace</u>





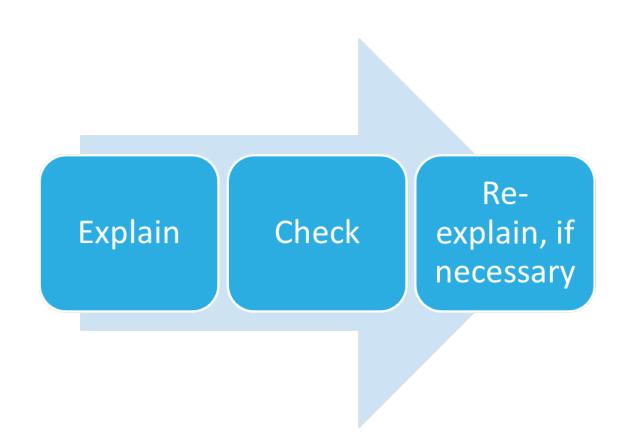
Approaches to address health literacy

- Teach-back
- Ask Me 3
- Show Me



Teach-back method

- Improve client understanding and adherence
- Decrease call-backs and cancelled appointments
- Improve health outcomes
- Improve client satisfaction





Teach-back prompts

- In your own words, tell me...
- Explain to me...
- How will you explain...
- What will you do if...
- When will you...



The Show-Me approach

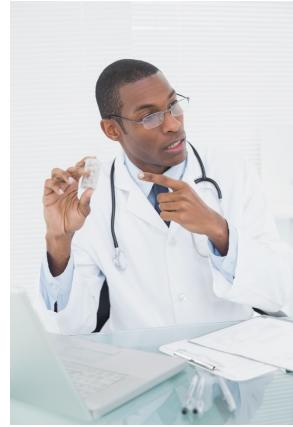
Used to confirm that a client understands a skill or how to complete a task action by 'showing' the provider.





Tips for successfully using the Teach-back or Show-Me approaches

- 1. Use open-ended questions
- 2. Self-correct if you begin to use jargon
- 3. Document use of and client's response to teach-back and show-me approaches
- 4. Include family members or caregivers





Try It: Shawn

Your client, Shawn, has been on ART for 6 months and his CD4 count is unchanged. You are going to have him try a new medication, and you want to make sure that he understands his new medication instructions, which are to take 1 pill when he wakes up and 1 pill before he goes to bed, with food.

Using the Teach-Back Method, how would you ensure that you have explained Shawn's medication instructions effectively?



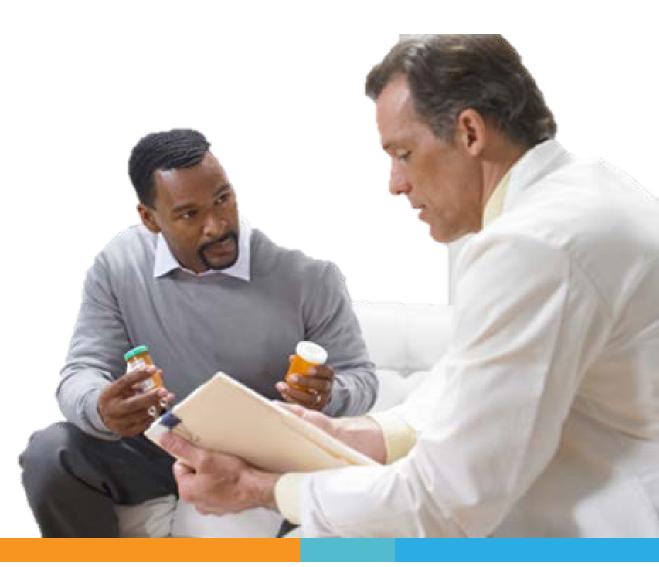


Ask Me 3[™] approach

- 1. What is my main problem?
- 2. What do I need to do?

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3. Why is it important for me to do this?



Miller, M. J., Abrams, M. A., Barbara, M., Cantrell, M. A., Dossett, C. D., McCleeary, E. M., ... & Sager, E. R. (2008). Promoting health communication between the community-dwelling wellelderly and pharmacists: The Ask Me 3 program. *Journal of the American Pharmacists Association, 48*(6), 784-792.



Vignette: Curtis

Curtis was diagnosed with HIV 2 years ago. With the help of his HIV meds, he's now undetectable. Curtis smiles and says, "That means I'm cured!"

What would you tell Curtis about viral suppression? How would you find out if he understands?



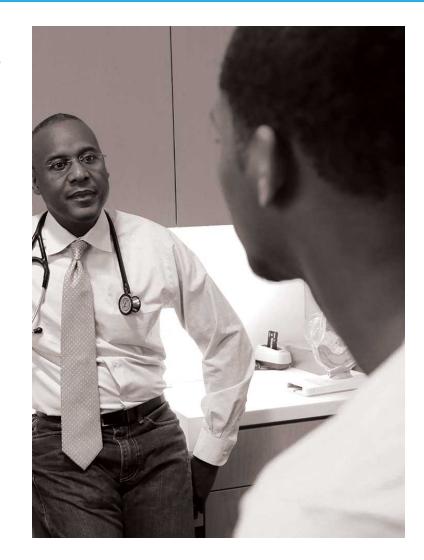
Tips for providers

- Focus on client
- Pay attention to non-verbal messages
- Listen to seek an overall understanding
- Be empathetic
- Ask questions
- Talk less, listen more



Other tips to communicate clearly

- Be self-aware
- Acknowledge personal limitations
- Sit down with client
- Slow down your speech
- Portray approachable body language
- Make client feel valued
- Ask what they can do to help the client





How health professionals can foster a care partnership

- Respect client's privacy and the privacy of their medical information
- Communicate openly about benefits and risks associated with treatment
- Provide client with information to make informed decisions about their care





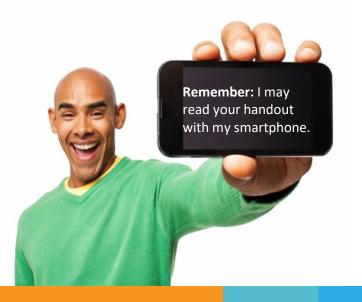
Written communication



Formatting

- Immediately appealing
- Has a clear and obvious path for the eye to follow
 - Uses headings and subheadings (chunk)
 - Maintains consistent style and structure
- Uses **bolding** to emphasize important points

- Uses easy-to-read font in 12 point or larger
 - Times New Roman
 - Arial
 - Calibri
- Left-justify text





Avoid

- ALL CAPITAL LETTERS
- Italicized text
- <u>Underlined</u> text
- Acronyms and contractions
- Technical words or jargon
- Passive voice
 - Passive voice: The results of your lab work will be sent to you
 - Active voice: We will send you your lab results



Word choice

- Simple words with 1 or 2 syllables
- Short sentences with 10 to 15 words
- Strong, vivid words, including verbs
- Words or phrases familiar to the audience
- At a 6th grade reading level
- Use culturally appropriate words



Content

- Focus on the patient's experience of the condition
- Clearly state:

Safeer & Keenan, 2005

- What the client needs to do
- Why the client needs to do it
- When the client can expect results
- What warning signs the client needs to watch for
- What to do if a problem occurs
- Who to contact with questions

55 Patient Educ Couns. 1998 Oct;35(2):83-8. "Using pictographs to enhance recall of spoken medical instructions." Houts PS1, Bachrach R, Witmer JT, Tringali CA, Bucher JA, Localio RA.



Download posters and brochures https://hivhealthliteracy.targethiv.org





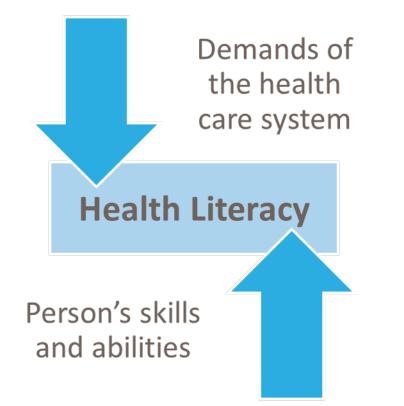
Health literate organizations



Definition of a health literate organization

Organizations that:

- Reduce demands placed on the client by the health care system
- Help people find, process, understand, and use health information and services
- Recognize that health literacy, language, and culture are interrelated

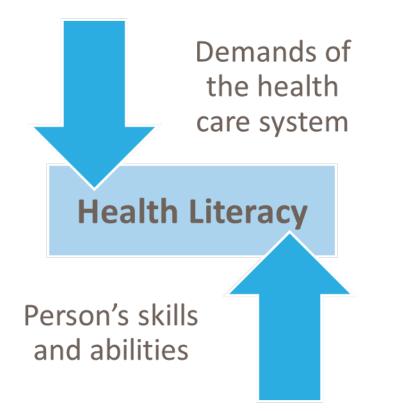




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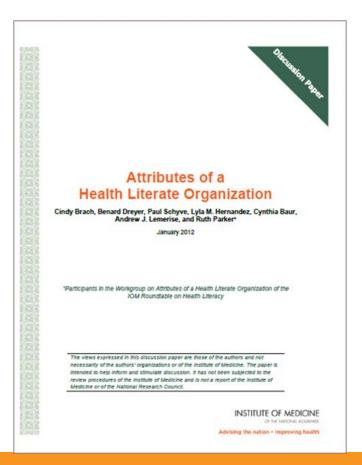
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10 attributes of health literate organizations





Become a more health literate organization

- Start a discussion of health literacy in the workplace
- Form a health literacy team
- Set health literacy goals
- Create a health literacy improvement plan





The Health Literacy Resource Guide

Health Literacy Resource Guide

In It Together: National Health Literacy Project for Black MSM

Overview

This guide provides a curated overview of health literacy resources, organizational assessments, client assessments, and toolkits that your HIV program can use to begin or enhance efforts to provide services that meet the needs of clients with limited health literacy. The resources in this guide can be adapted to a variety of health care settings.

Expand

Section 1: Relationship Between Health Literacy and Culture

Resources in this section focus on the relationship between cultural competency and health literacy and provide information that health care organizations can use to improve their cultural competence.

Expand

Section 2: Organizational Frameworks for Providing Health Literate Services

This section describes overarching care models that health care organizations can use to incorporate health literate practices into all aspects of planning and operations.

🖶 Expand

Section 3: Organizational Assessments and Toolkits

This section contains comprehensive toolkits and assessments designed to look at health care organizations' current communication environments, suggest improvements to organizational practices, and plan for implementation of those improvements.

🗄 Expand

Section 4: Materials Improvement Tools

This section contains tools to help organizations create written materials for print and online media that meet the communication needs of clients of all health literacy levels. These tools focus on how to involve consumers when developing and testing materials, which is an integral step in creating materials for clients.

🖶 Expand

Section 5: Strategies to Improve Communication

This section contains evidence-based verbal communication strategies that health care providers can use in their interactions with clients to ensure that clients are able to obtain, process, and understand the basic health information they need to make appropriate health decisions.

🖶 Expand

Section 6: Further Reading and Training

This section contains health literacy data and findings that can help health care organizations justify investments in health literacy. This section also contains information about local health literacy initiatives.



Start today!

Promote the use of health literate practices

- Universal precautions approach
- Clear communications
- Cultural competence



Request a training

https://hivhealthliteracy.targethiv.org/





Thank you!

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