

CEC LESSON This lesson is designed specifically for Client Experience Contributors (CECs).

SUPPORTING HEALTH LITERACY AMONG BLACK MSM



What Is Health Literacy?

Health Literacy Defined

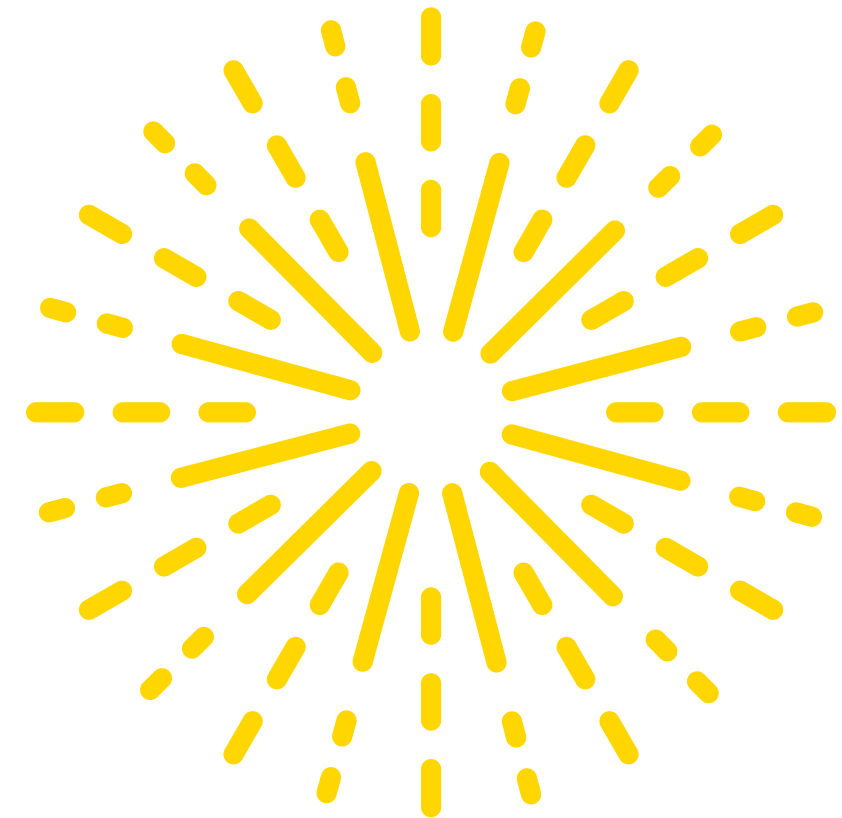
The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

US Department of Health and Human Services, 2000.

Health Literacy Impact

Individuals most likely to experience and be impacted by low levels of health literacy include:

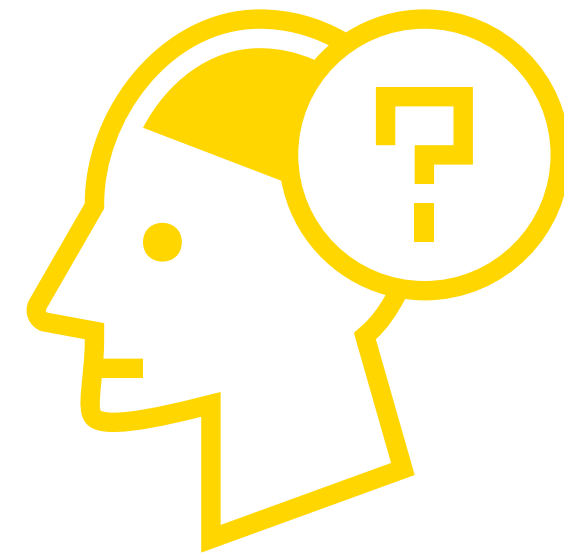
- Historically underrepresented and marginalized populations
- Individuals of low socioeconomic status
- Immigrant and undocumented populations
- Medically underserved people
- Older (55+) adults



Limited Health Literacy

Limited health literacy affects people via an incomplete knowledge of:

- The body
- Nature and cause of a disease
- How to prevent illness and stay healthy
- Understanding medical information
- Understanding how to take medication
- Identifying risks and side effects printed on drug labels



How Can You Assess Limited Health Literacy?

Signs of Limited Health Literacy

- Constantly missing appointments
- Failure to complete tests or access referrals
- Medication isn't being taken as required
- Not able to provide treatment or illness history
- Can't complete forms or intake documents
- Doesn't ask many questions
- Avoids reading
- Doesn't retain information



Signs of Limited Health Literacy Among People Living With HIV/AIDS

- Not familiar with HIV knowledge/terminology
- Does not take antiretroviral therapies properly
- Frequently hospitalized
- Infrequency with staying connected to care
- Less likely to engage in preventive care services
- Poor health outcomes



There is No “I” in Teamwork

- Increasing health literacy as a team for a client is most helpful.
- Clients may disclose some things to one CEC that they don't share with another.
- Teams can coordinate to provide multiple windows of opportunity to supportively educate clients and increase their health literacy.



Contributing Factors to Limited Health Literacy Among Black MSM

HOMONEGATIVITY

STIGMA & SEXUAL STIGMA

CULTURE

SOCIOECONOMIC STATUS

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Responses to Homonegativity include:

- Anxiety
- Stress
- Shame due to HIV status
- Internalized conflict
- Self-deprecation
- Neglecting one's health
- Negative feelings about own sexuality

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Responses to Stigma and Sexual Stigma include:

- Self-harm
- Fear
- Depression
- Loss of self-worth
- Denial
- Shame
- Guilt
- Defensiveness
- Deceit
- Withdrawal
- Isolation

Contributing Factors to Limited Health Literacy Among Black MSM

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Cultural factors that influence the health literacy of Black MSM include:

- Medical mistrust
- Region
- Country of origin

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SOCIOECONOMIC STATUS

Socioeconomic factors that influence the health literacy of Black MSM include:

- Incarceration
- Housing status
- Education level
- Poverty
- Emotional well-being

Communication: Improving Health Literacy with Black MSM Clients



Credit Madeline Gray / for WUNC

Communication Methods that Support Health Literacy

ASK ME 3 METHOD

SHOW ME METHOD

TEACH BACK METHOD

Communication Methods that Support Health Literacy

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- What is the primary concern?
- What do I need to do?
- Why is it important for me to do this?

SHOW ME METHOD

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- Demonstrate the action or skill by showing the skill or action to your client.
- Then ask your client to demonstrate the skill or action to you.

TEACH BACK METHOD

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TEACH BACK METHOD

- Explain
- Check
- Re-explain (if needed)

Health Literacy in Written Materials



Assess Current Written Materials

- Before you create any new materials, assess your current materials to determine what is effective and non-effective.
- Assess if they are complete, accurate, and up to date.
- Assess the use of technical jargon.
- Assess images and illustrations for reflection of target population and void of stereotype or stigma reinforcement.



Create New Written Materials

- Think through how the materials will be used.
- Keep your target population at the forefront of your mind and all cultural needs (i.e. language, font size).
- Use a design that is visually appealing and easy to follow (intuitive and user friendly for online materials).
- Keep a certain structure and style that will be associated with your organization's larger brand.
- Use font size 12 point or larger.
- Use fonts that are easy to read such as Times New Roman, Arial, or Calibri.
- Use short sentences and words familiar to the target audience and minimize technical jargon.
- Refrain from using all capital letters, acronyms, contractions, underlines or italicized text.

Department of Health and Human Services, Indian Health Service (n.d.). Checklist for creating patient education materials. Accessed at <https://www.ihs.gov/healthcommunications>

Social Media Content

- Let your target audience determine the best way to reach them.
- Do not be driven by trending social media platforms.
- Make sure you adopt a user-centered design.
- Be aware of concerns about privacy on public accounts.
- Outreach staff should have access to social media via mobile devices.



Final Recommendations

- Ask and encourage questions.
- Reiterate key points made by clients as well give key points you want them to remember.
- Give appropriate instructions verbally and in writing.
- Procedures that healthcare facilities take when they assume that all clients may have difficulty understanding health information and accessing services.
- Medical care is complex and many struggle with comprehending self-care, instructions, follow-up plans, and medications.
- Schedule automated reminders for clients via email and phone calls that serve not only as appointment reminders but also share useful information or resources to assist with their health literacy.
- Utilize social media to also provide information or videos that increase health literacy.