

PHC 6412: Health Promotion in Diverse Communities

Session 14: Cross-Cultural Communication & Health Literacy

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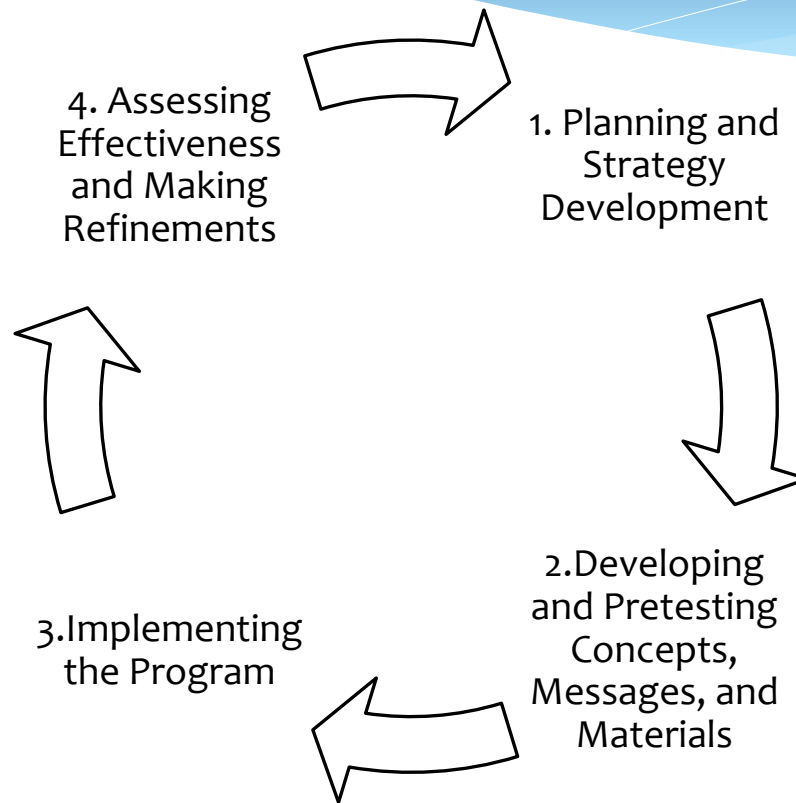
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Objectives

- * Describe factors that influence communication across and within cultural groups.
- * Define and discuss health literacy.
- * Explain the impact of health literacy in the health status of individuals.
- * Discuss the importance of health literacy to health educators.
- * Discuss the relationship between health literacy and cultural competence.

Stages of the Health Communication Process



Modified from National Cancer Institute (2008)

Verbal and Nonverbal Communication

- * Paralanguage

- It includes loudness, body language, looks, inflections, the use of the active or passive voice, the frequency of the use of “I”, pauses, and silences.

- * Proxemics

- Perception and use of personal and interpersonal space, which is determined by cultural backgrounds.

- * Silence

- Can communicate anger, frustration, apathy, amazement, agreement and disagreement, embarrassment, regret, and kindness.

- * Nonverbal behavior

- The power of nonverbal communication is that it tends to operate at an unconscious level of awareness but may be more trusted than words.
- The ways in which people communicate—the proximity, tone of voice, and directness—is related to a specific cultural and situational context.

Understand the Use of Narrative in Health Promotion

- * Two films, *The Tamale Lesson* and *It's Time*, convey the same number and type of factual information regarding cervical cancer detection and the use of the HPV vaccine as a prevention strategy.
- * *The Tamale Lesson* uses storytelling.



<https://www.youtube.com/watch?v=Lyhv9KmLroc>



https://www.youtube.com/watch?v=ubegh2Evt_4

Narrative in Health Promotion

- * Storytelling plays an important role in conveying health messages.
- * Researchers found that the narrative film (Tamale Lesson) more effectively moved women from behavioral intention to actual changes in behavior (making appointments for cervical cancer screening, going in for screening, and being more likely to vaccinate sons and daughters against HPV) 6 months after watching the film.

Literacy

- * The ability to comprehend written and oral messages and to apply received information to mundane activities such as reading maps, understanding warranty information, and balancing a checkbook.
- * Represents a fundamental skill necessary to fully enjoy life and function in today's information society.

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.



Health Literacy Impact

- * National Assessment of Adult Literacy (2003)
 - * Found that 90% of Americans lack the health literacy levels necessary to understand primary prevention strategies and to follow medical directives.
 - * By groups:
 - * Men have lower health literacy than women
 - * Non-White population have lower health literacy
 - * Hispanics have the lowest health literacy of all ethnic groups
 - * Adults living below the poverty level and those over the age of 65 have lower health literacy levels

Health Literacy and HP 2020

BOX 9.2 HEALTHY PEOPLE 2020 HEALTH LITERACY GOALS

HC/HIT-1 (Developmental) Improve the health literacy of the population

HC/HIT-1.1 Increase the proportion of persons who report their health care provider always gave them easy-to-understand instructions about what to do to take care of their illness or health condition

HC/HIT-1.2 Increase the proportion of persons who report their health care provider always asked them to describe how they will follow the instructions

HC/HIT-1.3 Increase the proportion of persons who report their health care providers' office always offered help in filling out a form

Source: National Institutes of Health (2012).

- * HC/HIT-1.3 calls for increasing social marketing in health promotion and disease prevention programs.
- * The ease of diffusion of social messages underscores the need for the development of clear, up-to-date, and easily understood messages that provide accurate information and do not perpetuate misunderstanding that can be easily distributed to mass audiences.

Health Literacy and Health Status

- * National Prevention Strategy (2011) emphasizes that preventive messages should provide people with accurate information that is culturally and linguistically appropriate and matches their health literacy skills.

BOX 9.3 SELECTED HEALTH ISSUES THAT INDIVIDUALS WITH LOW LITERACY LEVELS ENCOUNTER

- Difficulty taking medications appropriately and interpreting labels and health messages
- Higher rates of hospitalization, emergency care visits, and lower rates of flu immunizations
- Less health knowledge and comprehension of health information
- More likely to report their health as poor
- For seniors, worse health status and quality of life and early mortality

Source: Berkman et al. (2004).

Health Literacy and Cultural Competence

- * Health literacy must be understood and addressed in the context of race, culture, and language.
- * Cultural background encompasses communication patterns, behavior, language preference, customs and beliefs, & self-care.
- * Cultural practices such as the use of alternative medicine and a family rather than individual orientation present challenges that many health educators are ill prepared to address.
- * It could be argued that until the health educator identifies the cultural factors that shape an individual's health status, his or her health education efforts will have limited impact.

Written Communication

- * Public Law 111–274, the Plain Writing Act of 2010, requires all levels of the federal government to develop written materials in easy-to-understand language.
- * Use plain language in health education messages (e.g., avoid technical terms, use positive words, use action verbs, consider what the reader needs to know).
- * It is critical to ascertain the readability levels for all education materials.
- * Other tips: large font, clear headings, simple words, white space with pictures, bright contrasting colors, short sentences, and inclusion of how to section.

Needs Assessment to Address Health Literacy

- * Most health-related materials exceed the average reading ability of US adults.
- * Involve cultural experts who represent the audience.
- * Factors to assess include health risks, knowledge and beliefs, what clients want to learn, clients' desired outcomes, literacy level, and perceived benefits and barriers to change.
- * Information tailored to the specific needs of the population will help ensure that people are not overburdened with unnecessary information.

Planning to Address Health Literacy

- * Focus groups and interviews will help health educators explore the feelings, experiences, and associations regarding the target health behavior of the priority population.
- * Formative research will help tailor messages and materials to the needs and level of existing knowledge of the population.
- * Pretest materials with target population.
- * The images and message on the REACH 2010 billboard below were selected by the Black and Hispanic subgroups in Broward County.

The billboard features a collage of diverse people's faces on the left, a central graphic with the text "REACH 2010" and a red ribbon, and a survey-style message on the right. The survey asks if the viewer is positive or negative for HIV and lists four choices: abstain, be faithful, use a condom, and get an HIV test. It also promotes joining a coalition to help stop AIDS in Broward County, providing a toll-free number and website. Logos for the Broward County Health Department, Broward County AIDS Coalition, and Florida State University (FSU) are on the right. At the bottom, contact information for the Florida HIV/AIDS Hotline is provided in multiple languages.

REACH 2010

Are you **POSITIVE** that you're **NEGATIVE**?
WHAT ARE YOU DOING TO STOP AIDS IN BROWARD?
You have choices:

- ☐ **A**bstain.
- ☐ **B**e faithful.
- ☐ **C** use a condom.
- ☐ **D**o an **HIV** test.

You can help.
☒ **Join our coalition**
1-877-HIV-FREE
www.flu.edu/~reach/

FLORIDA HIV/AIDS Hotline Toll-Free information: English 1-800-FLA-AIDS • Español 1-800-545-SIDA • Kreyol 1-800-AIDS-101 • Hearing Impaired 1-888-503-7118

This Public Service Announcement was supported by a Cooperative Agreement from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of its authors and do not necessarily represent the official view of the CDC.

Bridging Health Literacy and Culture

- * Differentiate among culture, race, and ethnicity
- * Avoid stereotypes
- * Be cognizant of language preference
- * Understand what translation and interpretation are
- * Avoid jargons
- * Ascertain acculturation levels
- * Incorporate diversity in teaching methods
- * Use narratives

Communicate, communicate, communicate



“Basically, we’re all trying to say the same thing.”

Signs from Around the World

- * Please leave your values at the front desk. (hotel)
- * Please do not feed the animals. If you have any suitable food, give it to the guard on duty.
- * Specialist in women and other diseases. (doctor's office)
- * The manager has personally passed all the water served here. (restaurant)
- * Open seven days a week, and weekends too.

Signs from Around the World

- * Our wines leave you nothing to hope for.
- * You are invited to take advantage of the chambermaid.
- * You are welcome to visit the cemetery where famous Russian and Soviet composers, artists and writers are buried daily except Thursday.
- * Ladies, leave your clothes here and spend the afternoon having a good time. (laundromat)
- * We take your bags and send them in all directions. (airline ticket office)

Health Literacy and the Electronic Frontier

- * Must consider how well clients can use the web and social media, and whether they have access to a computer.
- * To improve health literacy through the use of technology:
 - Supplying the hardware and software is insufficient.
 - Support staff must be provided for computer maintenance & troubleshooting.