



Oral Health Literacy

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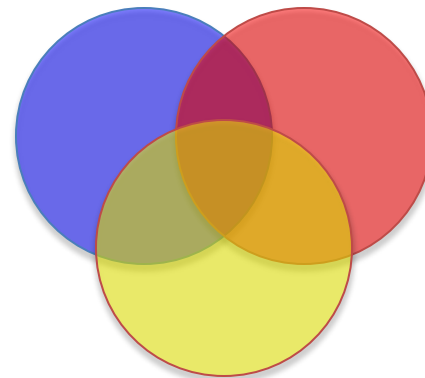
VCU School of Dentistry

Have you ever...

- Had a misunderstanding with a patient about a given procedure?
- Had a patient call your office/practice to clarify self-care instructions after a procedure?
- Had a patient whom ignored your recommendations for their treatment/oral health or that of their child's?

Optimal Oral Health is a product of:

- Appropriate self care
- Clinical care
- Community Initiatives



J Richman, Beyond Reading Recognition:
Understanding Pediatric Oral Health Literacy.
2009

Understanding Oral Health Literacy

- Is it reading comprehension?
- Is it understanding one's own dental benefits?
- Is it the ability to navigate the dental delivery system?
- Is it functioning in the oral health care environment?

Literacy

- 12-22% (around 1-3 people) lack basic reading skills
- Almost 50% (6-7 people) can only read at a basic level or below
- *National Assessment of Adult Literacy. 2006*

Health Literacy

- Literacy skills are associated with general health and intersect with other health determinants in a myriad of ways.
- According to the most recent National Assessment of Adult Literacy, almost half (43%) of US adults are unable to use accurately and consistently available print materials for everyday activities, such as those related to health and safety, finance, and civic engagement.

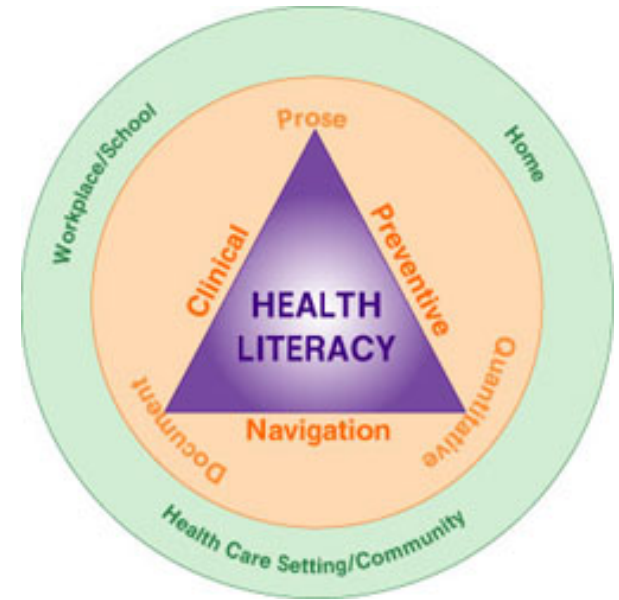
Rudd RE. Health literacy skills of U.S. adults.

Am J Health Behav. 2007;31(suppl 1): S8 –S18

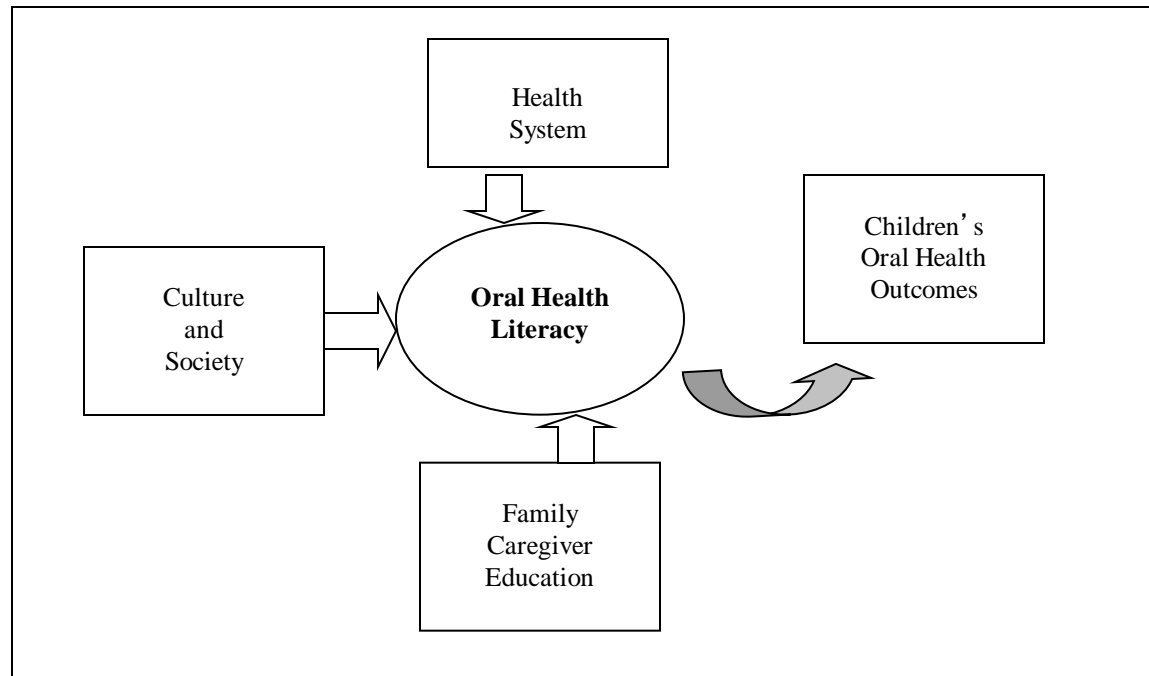


Health Literacy

- 28% of parents had below basic/basic health literacy and more than two-thirds were unable to enter demographic information correctly on health insurance forms.
- This disturbing trend in poor literacy is not improving.



Oral Health Literacy



NIDCR Workgroup report on literacy, 2005

Who are these people?



Our patients, clients, and parents!

Health Literacy Implications

- Low health literacy in adults associated with:
 - Lack of knowledge about healthy behaviors
 - Low use of preventive services
 - Increased hospitalization
 - Unhealthy behaviors
 - Poorer health



- *DeWalt, DA et al. Literacy and Health Outcomes. A Systematic Review of the Literature. J Gen Intern Med 2004;19(12):1228-1239.*

Oral Health Literacy

- “The degree to which individuals have the capacity to obtain, process and understand basic health information needed to make appropriate oral health decisions”

American Dental Association 2006



Oral Health Literacy

- Collection of skills to function in the health care system
 - Dental delivery system
 - Dental benefits
 - Dental Home
- Act upon education provided by that system, family, culture, or community
- Poorer oral health literacy is associated with:
 - Lower perceptions of health
 - Less utilization
 - Poorer understanding of verbal and written instructions for self-care

Jackson, Ped Dent, 2006

Lee, JPHD, 2007

To Benefit from Prevention and Navigate the Dental Delivery System:

Individuals must:



- Understand that preventive measures exist
- How to access them
- Use them appropriately
- Persistence

Dependent upon Individual and Systemic Factors:

- Communication skills of consumer and providers
- Knowledge of consumers and providers of oral health topics
- Culture and societal influence
- Demands of dental care system
- Context?
 - Prone position with a mouth full of materials
 - Preventive versus Surgical procedure



Who is at risk?



- Children and older adults
- Low socioeconomic populations
- Minority populations
- Persons with English as a second language.

Oral Health Literacy Literature

- Few published studies exist
 - Instrument development
 - Reading level of brochures
 - Calls for research
- No large scale studies
- No pediatric-specific studies
- Significant gaps in scientific knowledge



Oral Health Literacy Instruments

- A three part oral health literacy inventory
 - Reading recognition (Process)
 - Vocabulary knowledge (Understand)
 - Comprehension (Obtain or Act Upon)

Oral Health Literacy

- Screening tools to identify families with low dental health literacy
 - Rapid Estimate of Adult Literacy in Dentistry (REALD)
 - Test of Functional Health Literacy in Dentistry (TOFHiD)
- Screening tools found to be valid constructs with reliable measures
 - Correlated with perceived oral health quality of life
 - Correlated with child's oral health outcomes

REALD-30

- Oral health literacy was measured by means of a validated word recognition test.
- Rapid Estimate of Adult Literacy in Dentistry (REALD-30), an instrument with good convergent validity and internal consistency: Cronbach's $\alpha = 0.87$.
- Scores range between 0 (lowest literacy) and 30 (highest literacy).

Lee, JPHD, 2007

Literacy Hypotheses

- We hypothesize that individual/caregiver literacy may have an important impact on oral health behavior and the development of dental caries among children.
- Individual/Caregiver literacy is related to other health outcomes (diabetes, asthma) and may represent a mutable factor for overcoming dental health disparities.

What can you do?

- Conduct a needs assessment in your practice
- Improve usability of print and illustrated materials
- User-Friendly physical environment
- Assess patient's level of oral health literacy
- Assess readiness for change in health behavior



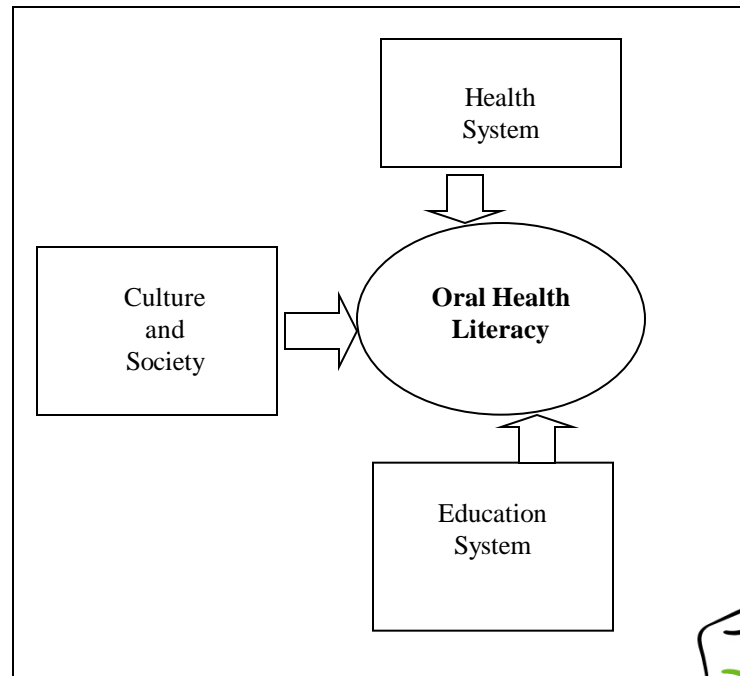
ADA Health Literacy in Dentistry

- Health literacy is a shared function of social and individual factors. Individuals' health literacy skills and capacities are mediated by their education, culture and language.
- Equally important are the communication and assessment skills of the people with whom individuals interact regarding health, as well as the ability of the media, marketplace and other agencies to provide health information in a manner appropriate for the audience.



Strategic Action Plan *2010-2015*

- This framework identifies three major areas for potential intervention to improve health literacy.
 - Culture and Society
 - Health System
 - Education System



How to Motivate Patients

- There are a number of preventive interventions
 - Traditional health education still the gold standard but has been shown to be ineffective
 - Traditional health education = “advice giving sessions by health professionals”
 - Motivational Interviewing has been shown to be effective
 - Used to treat addictive behaviors also (alcoholism, smoking)
 - Shows a lot of promise to motivate parents to prevent early childhood caries

Patient View Point

- Did not feel understood by dental staff
- Perceived criticism and judgment
- They did feel that oral health is important
- Frustration with their attempts to care for their/child's teeth:
 - Busy schedules
 - Conflicting life demands
 - Lack of cooperation from child
 - Lack of knowledge how to brush
 - Unable to figure out how to fit oral health practices into their daily routines
 - Pervasive availability of sweets/candies
 - Only way they could get children to sleep was with bottle



Suggestions for Communication with Families

- Communicate at a basic level, avoid jargon terms
- Allowing patient to explain their story without interruption
- Limit new concepts to max of 3 per visit
- Use illustration, pictures, and real devices for demonstration
- Asking how and why of patients to evaluate comprehension
- Ask parents to repeat oral health guidance provided in their own words.....



Social Marketing for Communities

- Comprehensive communication campaign
- Reach at risk populations
 - Primary target: low income families and children
- Appropriate messaging
- Increase healthy behaviors
- Reduce dental (oral) disease



Our Audience and Stakeholders

- Public - Children, Parents, Caregivers
- Dental Community - Dentists, Pediatric Dentists, Other Specialties, Dental Hygienists,
- Medical Community – PCP, Pediatricians, Family Nurse Practitioners, Physician Assistants, Nurses
- Other Non-Health Professionals – Social Workers, Case Managers/Case Workers
- Policymakers/Legislators
- Program Administrators

How Will We Reach Our Audience?

- Traditional media
- Non-traditional media
- Trusted Third Party Advocates
 - Surround families with messages
 - Break down real or perceived barriers
 - Empower communities
 - Create a sense of ownership

Opportunities

- Literacy efforts in your community
- Health Literacy efforts at your institutions and corporations
- Request communication training for you and your staff (motivational interviewing)
- Maintain up to date knowledge of preventive services
- Engagement with coalitions and community stakeholders (Va OHC)

- Thank you

