“AN OVERVIEW OF MEDICAL AND PUBLIC HEALTH LITERATURE ADDRESSING LITERACY ISSUES: AN ANNOTATED BIBLIOGRAPHY”

by

Rima E. Rudd, Sc.D, and Tayla Colton
Harvard School of Public Health

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The National Center for the Study of Adult Learning and Literacy
Harvard Graduate School of Education
101 Nichols House, Appian Way
Cambridge, MA 02138

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CITATION CATEGORIES

The 177 citations were reviewed and grouped into the following broad categories. Each citation was limited to one category. This file contains the citations for the category in enlarged-bold print.

1. Links Between Literacy and Health (9)
   1A. Studies (6)
   1B. Editorials and Letters (17)

2. Literacy Levels of Patients, Clients, or Program Participants (16)

3. Match Between Reading Ability and Written Materials (21)

4. Functional Literacy and Institutional Settings (8)
   4A. Consent Forms (11)
   4B. Emergency Department Discharge Information (7)

5. Materials Assessment (25)

6. Research Tools for Assessing Health Literacy (5)
   6A. Health Instruments: Readability Considered (7)
   6B. Health Instruments: Validity Issues (4)

7. Program Descriptions
   7A. Literacy Noted as Key Issue (13)
   7B. Literacy Noted (7)

8. Guidelines for Practice
   8A. Materials/Readability (11)
   8B. Patient/Health Education (9)
3. Match Between Reading Ability and Written Materials


Assesses 50 patient education materials across five units of a medical center (oncology, surgery, cardiac step-down, perinatal, and diabetes). Surgery education and oncology materials were found to have the highest readability levels. The mean readability of the five groups of materials was 9.84.


Examines the readability of 50 information booklets available to women with breast cancer using the SMOG and Flesch reading tests (in the UK). Generally, the booklets were found to have a high reading level, not be suitable for the majority of the population.


Compares reading skills of cancer patients reading level of materials. Used the WRAT-R2 to measure 63 cancer outpatients’ reading levels and used the Flesch Index to analyze the reading levels of the booklets the patients used. Found the reading level of 27% of the sample was less than that of all 30 pamphlets. The authors recommend that written educational materials for cancer patients must be carefully matched to patient reading levels.


Compares reading comprehension ability of ambulatory care patients with reading level of materials. A large discrepancy was found between the average patient reading comprehension and the skills levels needed to read patient education materials in 5 different ambulatory care settings. The average reading comprehension of the 151 patients was 6th grade, while the education materials required between an 11th and a 14th grade reading level.


Tests reading ability of adult in-patients in public and private substance misuse treatment settings and compares reading ability with patient education and consent form readability levels. Between 1/3 and 1/2 of the patients tested below a 9th grade reading level, whereas standard treatment materials were written on the 11th to 18th grade reading levels.

Compares the reading ability with educational materials. Assessed the reading ability of 369 parents or caretakers accompanying pediatric outpatients with the REALM and the WRAT-R. Assessed readability of written educational materials with the computer program Grammatik IV. The mean score on the REALM placed parents at the 7th-8th grade reading range, although 80% of the materials examined required at least a 10th grade reading level. Suggests the need to screen at-risk parents for low reading levels.


Examines the extent to which patients used and learned from drug literature written at three readability levels. Concludes that people with little formal education would benefit the most from materials written at lower readability levels than are to be found in the many health-teaching materials available today.


Applies the Cloze technique to test 189 patients’ ability to understand health information prepared at grade levels five and nine. Recommends that patient materials be written at the fifth grade level.


Assesses preferences of cancer patients. 90% of the 63 cancer patients studied indicated a desire for all available cancer information, 68% wanted to be involved in care decisions, and 77% preferred personal interactive learning. The REALM was administered and the mean score was a 7th to 8th grade reading level. Over half of the patients read below their stated educational levels and would be unable to read many patient education materials.


Assesses cancer education materials developed for African Americans. Results from the Cancer Prevention Materials and African Americans Project indicate that only 54% of the breast cancer and 40% of the prostate cancer materials were culturally sensitive. In addition, many of the materials were written at inappropriate reading levels.


Compares literacy in patients with systemic lupus erythematosus (SLE) to the reading level of patient education materials specific to SLE. Found that current SLE patient education materials were written on too high a level for many patients and that low-literacy patients must be provided with appropriate materials.

Provides an overview of patient education for practicing rheumatoid arthritis clinicians. Alternative methods of delivering patient education are compared and practical guidance is given on methods of ensuring that written information is readily understandable by patients.


Compares reading skills of American Indian diabetic patients using the WRAT (66% read at 5th grade or higher) and with the readability of a sample of diabetic education materials (mean readability was 10th grade level). Education booklets were then developed to target a 5th to 7th grade reading level.


Tests reading levels of 100 patients at an urban VA Arthritis and Immunology Center using the WRAT-R2 and used the SMOG formula to determine reading level of Arthritis Foundation education materials. Nearly 50% of patients read below the 10th grade level and 31% below the 7th-grade level. However, education materials required an 8th-13th-grade level of reading comprehension.


Compares educational approaches. 1,100 patients receiving colon cancer screening were randomly selected and assigned to one of three groups: receiving a colon cancer education booklet, view a videotape, or receive no intervention. Subjects receiving the interventions showed increased knowledge compared to control subjects, suggesting the usefulness of personalized educational materials to improve colon cancer knowledge.


Compares two versions of a cervical cancer brochure — one containing text in a bullet format, and the other containing text in narrative style together with drawings to complement the text. Women gave significantly higher overall ratings to the brochure with illustrations and narrative text than the one with bullet-type and no illustrations. Among poor readers, comprehension was significantly greater for women who read the narrative text with illustrations, with no differences in comprehension of the 2 brochures for better readers.


Compared comprehension of materials prepared at different reading levels. 85 diabetic patients were randomly assigned to read diabetes foot care material at Grade 6 and 11 or at Grade 6 and 9 (as assessed by the SMOG formula). The mean CLOZE score (measure of comprehension) was better for patients who read the Grade 6 materials than for both the Grade 9 and 11 information. Concluded that reducing literacy demands of health literature improves patients’ comprehension.


Discusses why attention to readability in diabetes programs and their publications is important and emphasizes the importance of self-care of management routines to achieve good metabolic control.


Studies the comparative effect of tailored materials. A computer program was written to produce appropriate health information brochures based on the patients’ education level and answers to a health history questionnaire. After 3 months, there was no increase in specific health-seeking behavior among the 81 patients receiving the booklets when compared with 213 controls who did not receive the computer-generated booklets.


Studies the comprehension of patient information among 30 discharged GI patients with an average of post-high school education and mean word recognition score at the high school level. Found a moderate correlation between years of schooling and word recognition score and a strong correlation between word recognition and reading comprehension scores. Attention to word recognition ability and educational level may be insufficient to ensure comprehension.