

Health Literacy for Immigrant Elders

MetLife Health Literacy Initiative

Debra David and Gabrielle Boles

(Portions of this presentation are adapted from California Health Literacy Initiative presentations. See www.calhealthliteracy.org)

Learning objectives

At the end of this session, you will be able to:

- Identify health communication issues facing older immigrants with limited English proficiency.
- Explain how aging may affect the ability of older adults to learn new health information.
- Give examples of cultural beliefs and practices that may lead to misunderstandings between older immigrants and “mainstream” health care providers.
- Describe strategies for communicating clearly with older immigrants with limited English proficiency.
- Describe strategies for working effectively with an interpreter.

Failure to Communicate

- Doctor: “You have hypertension. You need to abstain from high sodium foods, and partake in a rigorous exercise regime.”

Health communication

- Have you ever been confused by your doctor?
- Have you ever asked a question of your doctor, and not understood the answer?
- Have you ever not asked a question because you were embarrassed or scared?

Definition of health literacy

- Health literacy is the degree to which individuals have the capacity to obtain, process, understand, and act on basic health information and services needed to make appropriate health decisions.

Healthy People 2010

Prevalence

- Almost half of the U.S. population has low health literacy. This includes both native speakers of English and people who learned English as non-native speakers.
- They are at higher risk of misunderstandings, mistakes, unnecessary hospitalizations, and poor health outcomes.

Why are they at risk?

- Increasingly complex medical system.
 - More medications
 - More tests and procedures
 - Growing self-care requirements
- Heavy reliance on written materials for health information.

What can we do?

- Understand the problems faced by patients and health care providers.
- Advocate for system change.
- Learn strategies for communicating more effectively.

Additional challenges for Limited English Proficiency (LEP) individuals

- Major language barriers.
- Cultural differences in health beliefs, knowledge, and practices.
- Limited vocabulary in English and/or native language, particularly medical jargon.
- Reliance on family members and interpreters.

MetLife Health Literacy Initiative

- Response to health literacy needs of elder immigrants.
- Joint effort by Project SHINE (Students Helping in the Naturalization of Elders) at Temple University (Philadelphia) and San Jose State University.

Main goals

- Increase ability of elder immigrants to access health care and communicate with health care providers.
- Increase the knowledge base of older immigrants about health topics.
- Increase opportunities for college students to learn about and address the health literacy needs of immigrant elders.

Needs assessment

- Focus groups and interviews were conducted with 101 older immigrants in Philadelphia and San Jose.
- Respondents were from 7 main language groups: Chinese, Asian Indian, Spanish, Korean, Vietnamese, Russian, and Cambodian.

Key findings

- Many elders were able to find primary care providers who spoke their language.
- Difficulties common when seeking emergency and secondary care.
- Elders relied on family members for translation, transportation, brokering care. Family not always available, not optimal translators.

Key findings

- Despite regulations requiring health care providers to provide interpreters, availability often inadequate.
- Complex forms in English, challenging technology (especially phone systems), unfamiliar health system, etc., compounds challenges.
- For most immigrant elders, it is not realistic to expect them to learn to communicate adequately in English.

Key recommendations

- Provide trained bilingual medical interpreters whenever possible.
- Develop “plain language” materials in English and other languages.
- Develop basic health ESL units.
- Provide health information for family members.
- Educate current and future health care providers on how to communicate more effectively with this population.

Can elders learn?

- DEFINITELY!
 - Older adults who are **motivated** and **healthy** show little decline in the ability to learn.
 - Older immigrants who have formal education and good vocabularies in their native language often learn well.
- BUT.....

Barriers to learning in later life

- Low motivation to learn.
- The (false) belief that older adults can't learn.
- Limited formal education and/or negative experiences with schooling.
- Fear of looking foolish or disrupting social norms.
- Sensory deficits.
- Health problems.

Helping older adults learn

- Relate new information to their experience.
- Explain the direct benefits of learning for their lives.
- Repeat. Short-term memory is often less efficient as people age.
- Check for understanding.
- Minimize distractions and fatigue.

Steps for Sheltering English Communication with Limited English Proficiency Adults



Step 1: Make Them Comfortable

- Establish a positive environment by acknowledging and respecting cultural and linguistic diversity
 - Learn to greet people in the languages represented
 - Ensure steps to keep the interactions friendly, but formal
 - Know and plan to explain the reasons for your communication.

Step 2: Make It Accessible

- Because information needs to be presented either more slowly or with translation services...reduce topic size:
 - Healthy eating
 - reducing fat intake
 - Heart Health
 - Exercising for a healthy heart
- Develop simple concise messages
 - Get Active—Feel Better!

Step 2: Make It Accessible

- Focus on positive behaviors and demonstrate when appropriate
 - Remember, it's never too late to start!
 - You can do it!
 - *Walk, swim, climb, bicycle, dance, fish!*
- Recommend concrete steps to promote gradual change
 - Get off the bus one or two stops early and walk
 - Use the stairs
 - Dance to your favorite music

Step 3: Make It Relevant to Them

- Recommend activities they are already doing
 - E.g. Get 30 minutes of exercise each day

Walk for 10 minutes after lunch

+

Walk 10 minutes with your grandchildren after work

+

Dance 10 minutes while cooking dinner

=

30 minutes!

Step 3: Make It Relevant to Them

- Use a sample cultural recipe and change the ingredients to more healthy options:

Bad

Lard

Fried

Butter

Refried beans

Good

Vegetable oil

Baked

Margarine

Whole beans

Step 4: Shelter Your Spoken Language

- **Avoid medical terminology**
 - Explain unfamiliar, but necessary terminology
- **Modify your speech**
 - Slow down
 - Control use of slang
 - Reduce idioms and sentence length
- **Break information into chunks** with activities or media changes in between

If You Want to Say...

- Screening
- HDL
- LDL
- ADL

USE...

- Blood pressure test
- Good Cholesterol
- Bad Cholesterol
- Daily activities or talk about them individually

HMO/Managed Care
Organization

Your doctor

Now It Is Your Turn

- You have hypertension. You need to abstain from high sodium foods, and partake in a rigorous exercise regime.
- Drugs like Lipitor have occasionally been known to damage muscle tissue, so be sure to inform your physician if you notice any muscle tenderness, weakness or pain.
- Diabetes mellitus is a group of metabolic diseases characterized by high blood sugar (glucose) levels, which result from defects in insulin secretion, or action, or both.

Working with an Interpreter

- Before your presentation
 - Meet with your interpreter in advance to explain topic and any medical terminology
- During the presentation
 - When giving explanations and directions, use simple sentences
 - Speak at a normal rate, but lengthen the pauses between sentence boundaries
 - Check frequently for comprehension

Step 5: Sheltering Your Presentation Style

- English language learners acquire both language and content more effectively when instruction facilitates student interaction.
 - Use gestures and body language to assist in interest
 - Use visuals, samples, graphic organizers, media and other sources to explain the concepts
 - Repeat key points through out the presentation
 - Ask comprehension questions
 - Don't assume information has been understood.

Step 6: Shelter Promotional Materials

- Minimize using multiple fonts
- Utilize formatting, bold, italics, font sizes sparingly
- Allow white space (20%)
- Use pictures and graphs to reinforce topics
- Reduce sentence length (25 words or less)
- Reduce the amount of paper distributed. Too much is overwhelming. Less is more
- Have versions in translation, if possible