BOLTON CLARKE

Be true to you

iLead

Topic 3: Supporting Health Literacy

Inclusive Leadership Training
Program May 2022

The new face of RSL care + rdns

Welcome to the iLead training for the leaders of small CHSP organisations

These modules will assist in preparing your organisation to demonstrate compliance with the Aged Care Quality Standards in relation to diversity.

It is intended to be an introduction to the following four topics:

Topic 1 – Cultural Safety and the Diversity Conceptual Model

Topic 2 – Provide culturally safe care

Topic 3 – Supporting health literacy

Topic 4 – Managing workforce diversity

Each topic is a PowerPoint presentation and can be completed in approx. 15 minutes making them useful for discussion team meetings or staff development and / or new staff orientation to your organisation.

It is recommended that they are done in numerical order and have been designed to cover key definitions and useful resources for CHSP providers.

It is accompanied by a User Guide on the Diversity at Work site

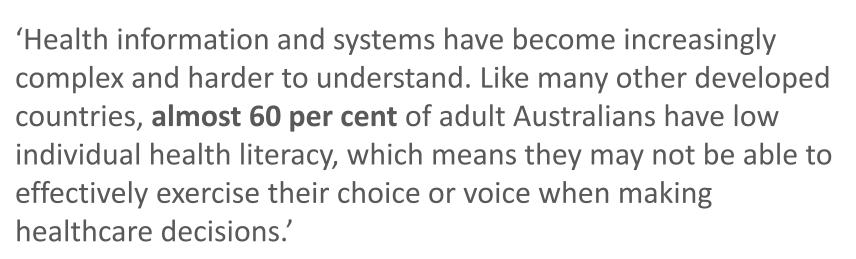# Topic 3: Learning objectives for supporting health literacy

Learners will be able to:

1. Be aware of health literacy

2. Understand the benefits of 'plain language'

3. Understand translation standards

4. Locate resources

There is additional information contained within the notes view of these slides to support your learning

Health literacy: A significant issue in Australia

'Health information and systems have become increasingly complex and harder to understand. Like many other developed countries, **almost 60 per cent** of adult Australians have low individual health literacy, which means they may not be able to effectively exercise their choice or voice when making healthcare decisions.'

'Low individual health literacy is associated with higher use of health services, low levels of knowledge among consumers and poorer health outcomes.'

(Health Literacy: Taking Action to improve safety and quality)

Health literacy

Providing information that is easy to access and understood is important because:

- Low health literacy can affect health and wellbeing.

- Some people including the workforce may have an inability to access, understand, appraise or apply information.

- Diversity characteristics of an individual can affect their health literacy and may contribute to disadvantage and their ability to participate in their care.

Considerations for developing information in plain English

Considerations include:

- Simple, everyday language is used.

- Short uncomplicated sentences, for example, no more than 16 words.

- Avoiding metaphors and colloquialisms for example, 'fight disease'.

- Avoiding acronyms. If they must be used, they should be spelt out in full with a short explanation.

- The active rather than the passive voice is used, for example, 'Our nurse will change the catheter' is better than 'The catheter will be changed by our nurse'.

- Information related to health practices is culturally respectful and relevant to all intended users.

Considerations for developing information for plain English continued

Considerations include:

- Use of gender-neutral words, for example, 'person' rather than man or woman (Note: The use of gender-neutral words may not be possible in languages other than English with grammatical gender).

- Unfamiliar medical and clinical jargon has been avoided. If you must use jargon, provide a short explanation, for example, Palliative Care (Care of people with life limiting conditions).

- Headings and subheadings are used to explain the text and to divide it into meaningful chunks, for example, question/answer format.

- Difficult ideas are not included, and explanations are encouraged through photos, visuals etc.

Considerations for developing information in plain English continued..

Considerations include:

- Unfamiliar concepts, for example, 'Consumer Directed Care', have a short explanation.

- Nouns are not used as adjectives, for example, 'advice about food' is better than 'food advice'.

- The average grade reading level of the text is grade '8' or below. The computer-generated Readability Test Tool has been used to assess this.

- The information has been developed and/or tested with existing or potential consumers.

- Text size from 12 to 16 has been used and 1.5 spacing between lines.

Examples of plain English

Use plain language and avoid jargon and/or medical terminology:

- **'illness that causes breathing problems'** instead of *respiratory illness*

- **'Signs you are sick'** instead of *symptoms*

- **'You should wash your hands regularly'** instead of *hand washing should be undertaken regularly*

Getting your message across

Key factors to provide clear understandable information:

- know your audience

- focus your message

- know where, when, to whom the message is for

Translation Standards

The [translations standards tick](#) is a quality mechanism to demonstrate that the bilingual translation has been developed in accordance with translation standards; has been tested/approved by the community; and is of high quality.

- Wherever possible essential information should be made available to people in their preferred language.

- Translated information should be checked to ensure it is culturally and linguistically appropriate for the specific community using it.

Translation Standards continued..

The 10 translation standards which are:

1. Develop the English text and/or test the translation with members of the Language other than English (LOTE) speaking community.

2. Undertake a cultural and linguistic assessment of the English text in preparation for translation.

3. Undertake a subject matter assessment of the English text as appropriate.

4. Organise for the English text to be translated by a professional translator.

5. Undertake a cultural and linguistic assessment of the translation.

Translation Standards continued..

The 10 translation standards which are:

6. Organise for the translation to be proofread by a professional translator.

7. Include the title of the text in English on the translation.

8. Include the name of the target language in English, on both the English text and the translation.

9. Distribute the translation in bilingual format – English and LOTE.

10. Monitor, evaluate and update the English text and the translation as part of and ongoing review program.

Resources

Click on the links below:

- Australian Commission on Safety and Quality in Health Care. *Health Literacy: Taking Action to improve safety and quality.* 2014

- Bolton Clarke: Diversity At Work

- Readability Test Tool

- Drop the Jargon

- Centre for Culture, Ethnicity and Health (CEH) Online Health Literacy Course

- Health Translations: Online Directory

- National Statement on Health Literacy

- Inclusive Health and Aged Care