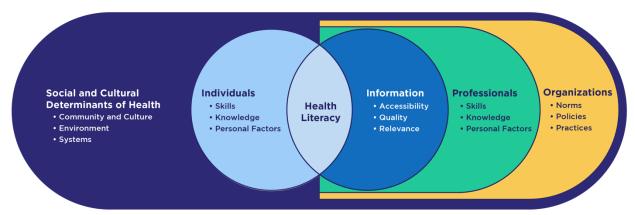


Network of the National Library of Medicine (NNLM)

Health Literacy Framework Companion Document

Updated November 9, 2023

Health Literacy Framework



Overview

This framework names the key factors that influence an individual's health literacy — or an individual's ability to access, understand, and use health information. Through overlapping layers, it illustrates that many factors can influence health literacy and that those factors can interact or overlap in a variety of ways.

The framework draws from the socio-ecological model, a conceptual model that states that "health is affected by the interaction between characteristics of the individual, the community, and the environment." In other words, a complex range of influences and interactions affect — and are affected by — individuals' health. The same is true for individuals' health literacy. This framework focuses on how these interactions collectively influence health literacy.

Finally, it's important to note that while this framework shows the inputs that contribute to health literacy, it does not show the outputs, or outcomes, that result from improving health literacy. One such outcome is progress toward health equity. While improving health literacy alone will not achieve health equity, health literacy — and the factors that influence — is a critical component of health equity.

² https://www.tandfonline.com/doi/full/10.1080/1059924X.2017.1358971



¹ https://www.cdc.gov/healthliteracy/learn/index.html

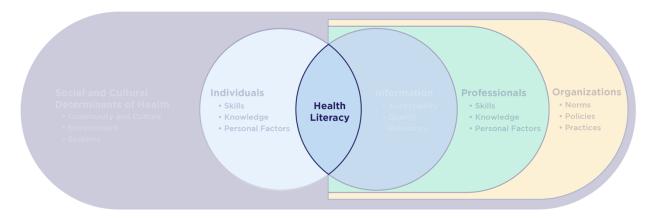
How to use the health literacy framework

Consider using the framework:

- In classes or trainings to teach other professionals about health literacy or related topics
- To evaluate whether your organization's trainings or programs are inclusive of the factors that influence health literacy
- To advocate for new ideas, programs, or policies to advance health literacy

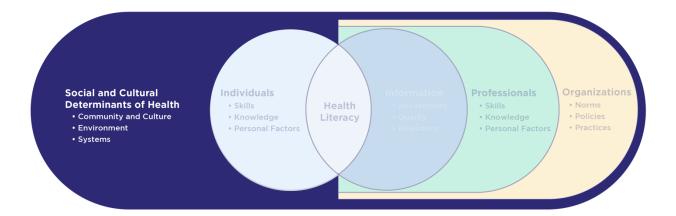
Framework structure

At the core of this framework is **health literacy**, which encompasses accessing, understanding, and using health information. The health literacy layer is at the center of the framework because all the other layers impact health literacy and how individuals are able or not able to access, understand, and use health information.

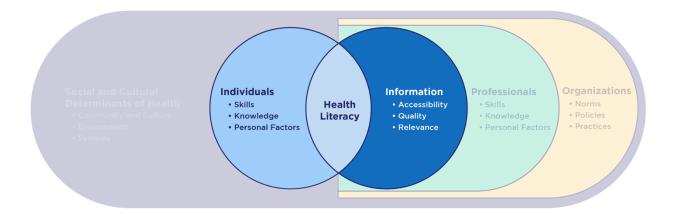


The framework has 5 layers, which represent levels of influence:

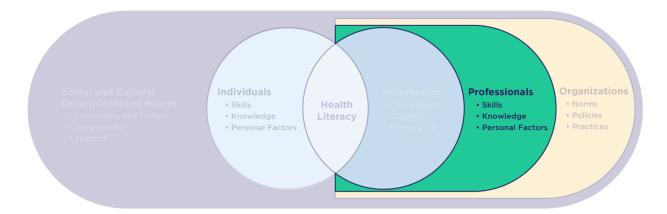
- Social and Cultural Determinants of Health
- Individuals
- Information
- Professionals
- Organizations



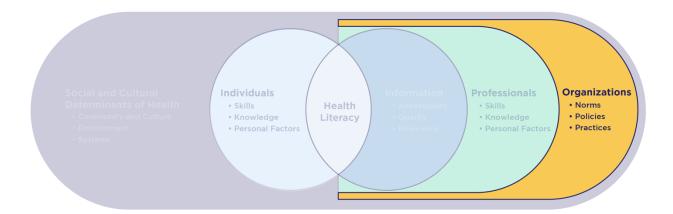
The **Social and Cultural Determinants of Health** layer represents the broad social or cultural factors that can influence health literacy — like cultural norms that help or hinder the understandability and accessibility of health information. Other major social factors include governmental policies, structural racism and discrimination, and built environments and communities that help to create or maintain inequities in accessing or understanding information. The framework illustrates that social and cultural determinants have a large impact on individuals and also affect the other layers in the framework.



Individuals and Information overlap in the framework, illustrating that health literacy sits at their intersection. On the most basic level, individual consumers interact with health information in order to access, understand, and use it. How individuals interact — or don't interact — with health information impacts health outcomes, and this maps directly to NNLM's mission. The other layers in the framework influence how well individuals can access, understand, and use information.



The **Professionals** layer represents key players in the health literacy landscape — the intermediaries and healthcare professionals who can connect individuals to health information. Professionals' role in how consumers access, understand, and use information maps directly to the Individuals and Information layers. For example, an individual's listening skills interact with a professional's oral communication skills to affect how well the individual understands health information the professional provides.



The **Organizations** layer represents the role that organizations play in providing access to health information and disseminating health information in a way that's easy to understand and use. This is of particular interest to NNLM, as organizations like educational institutions, healthcare practices, and libraries play a huge role in health literacy. For example, an organization's norms, practices, and policies might influence how health information is distributed to communities.

Note that there is some overlap in the roles that professionals and organizations play since professionals ultimately make up organizations.

Similar to the socio-ecological model, this framework conceptualizes the broad and multifaceted factors that affect health literacy — and shows how the higher levels of influence (represented by the larger layers) impact the levels underneath them (represented by the smaller layers) to ultimately determine someone's health literacy level.

The layers in the framework illustrate that there are interactions:

- Between factors on the same level of influence (e.g., the knowledge and communication skills of professionals)
- Between factors on different levels of influence (e.g., an organizational policy and the clarity of information the organization provides)
- Across entire levels of influence (e.g., between individuals and professionals)

Breakdown of Health Literacy Framework Factors

This table lists the components that make up each factor in the framework.

Details of Framework Factors Health Literacy Access (accessing information) Understand (understanding information) Use (using information) **Individuals** Listening Reading Numeracy News literacy Research literacy Skills Visual literacy Problem-solving Reasoning Navigation Physical ability Digital literacy Education Awareness of resources Memory Knowledge Personal relevance or salience (prior experience) Familiarity with a topic (prior knowledge)

Details of Framework Factors

Personal factors

Note: Demographics have an association with health literacy but do not directly contribute to an individual's skills. Though some populations are more likely to have limited health literacy skills because of factors like structural racism, their race, ethnicity, and other personal characteristics have no inherent effect on their health literacy skills. On the right is a sampling of demographics and other personal factors — but additional personal factors may be important to consider depending on the specific audience that's receiving health information.

- Language
- Age
- Culture
- Gender
- Geographic location
- Income
- Health status
- Education
- Beliefs
- Attitudes
- Emotional state (e.g., stress, anger)
- Motivations
- Self-efficacy
- Situational context
 - Health issues
 - Life stressors

Information	
Accessibility	 Visibility (e.g., color contrast, text size) Website performance speed and responsiveness Navigability Format (written, spoken, or visual)
Quality	 Accuracy Adherence to clear communication best practices Readability Actionability Inclusivity Empathy
Relevance	Cultural competence and relevanceDiversityRelatability

Details of Framework Factors

Professionals	
Skills	 Written communication Oral communication Visual communication Numeracy News literacy Research literacy Digital literacy Problem-solving Reasoning Interpersonal skills Empathy Cultural awareness and cultural humility
Knowledge	 Education Awareness of resources Memory Personal relevance or salience (prior experience) Familiarity with a topic (prior knowledge)
Personal Factors	 Beliefs Attitudes Emotional state (e.g., stress, anger) Motivations Bias
Organizations	
Norms	Staff buy-inCompany mission and valuesLeadership support
Policies	Staff trainingInformation quality standardsOrganizational requirements

Details of Framework Factors	
Practices	 Patient care models Accessibility Healthcare delivery systems Health information systems
Social and Cultural Determinants of Health	
Community and culture	 Social support Community-based resources Demographic makeup of the community Community and cultural norms Beliefs and attitudes (among the community or culture) about health Available languages for information and interactions
Environment	 Built environment, neighborhood and housing safety Environmental quality (e.g., air quality, water quality) Transportation infrastructure

Details of Framework Factors Systemic access Access to healthcare providers/systems Access to internet Access to education Access to transportation Systems of oppression Racism Sexism Heterosexism Systems Ableism Other forms of discrimination and prejudice Healthcare

Health insurance cost and

Culturally competent care
 Federal, state, and territorial policies

Hospital care models/patient care

coverage

models

and laws

Action Steps to Advance Health Literacy

Libraries can:

- Provide community members with free access to clear, comprehensive health information online
- Include current, high-quality health information resources in their collections
- Hold events where healthcare providers and other professionals teach community members about relevant health topics
- Teach community members (through programs or one-on-one interactions) how to recognize misinformation and find trustworthy, reputable information

Healthcare organizations can:

 Institute policies that require staff to undergo training in clear communication best practices

- Work with health literacy experts to create plain language health resources for patients
- Form patient/caregiver advisory groups to provide input on gaps and needs related to both written and oral communication
- Use assessment tools to ensure health information resources are clear, accessible, and culturally relevant
- Form a health literacy council to help ensure organization-wide adoption of relevant norms, practices, and policies

Colleges and universities can:

- Include health literacy and clear communication in curricula for students in medical school, nursing school, and other relevant fields of study
- Offer a Health Communication concentration for relevant degrees (e.g., Master of Public Health, Master of Communication)
- Form a health literacy task force to help ensure the institution is taking a holistic approach to advancing health literacy
- Encourage health literacy research

Primary and secondary schools can:

- Include health education in their curricula
- Have school nurses participate in classes or trainings related to health literacy or clear health communication
- Provide students and families with clear, actionable information about relevant health topics (like preventing the spread of respiratory diseases)

Research organizations can:

- Institute policies that require staff to undergo training in clear communication best practices
- Work with health literacy experts to create plain language resources for patients like informed consent forms and research summaries
- Form participant advisory groups to provide input on gaps and needs related to both written and oral communication
- Use assessment tools to ensure resources are clear, accessible, and culturally relevant
- Form a health literacy council to help ensure organization-wide adoption of relevant norms, practices, and policies

Community-based organizations can:

- Organize health education programs, presentations, and events
- Form a health literacy coalition to advocate for programs and policies to advance health literacy and promote clear communication

- Train healthcare providers and other professionals who provide health information on clear communication best practices
- Connect community members with clear, accessible, culturally relevant health information

NNLM can:

- Offer trainings on health literacy and health communication to help organizations build their internal capacity to communicate clearly about health information
- Provide assessment tools that staff at libraries and other organizations can use to ensure that health education materials follow health literacy best practices — and teach staff how to use these tools
- Connect organizations with plain language health information they can share with their own audiences
- Provide resources that organizations can use for health education programs in their communities