Improving Health Literacy

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“What medications are you taking?” I ask Ms Scott.

“Oh, I’m sorry, I forgot to bring them in. I’m not sure of the names or doses.”

“No problem, I’ll get them from your referral letter”

It turns out she is on 7 pills, and doesn’t know what they do, or why they have been prescribed. Adele is 74, a retired sales clerk, mentally sharp and quite active. As a hypertensive diabetic, her pill count is predictable. But, according to the Public Health Agency of Canada, 60% of Canadian adults and 88% of seniors are not health literate. Some seniors cannot follow instructions on a medicine bottle.¹² Many of my patients have reduced vision, hearing and/or comprehension.

I spend the next 30 minutes asking about her symptoms, explaining how the body works, and what pills do. I encourage her to make a list, even better have a Health File. She might be glad she had it with her if she takes sick on her travels.

It led me to ask myself ‘how much of my time is spent educating people on basic concepts?’

I realized some time ago that we have done a poor job of teaching our citizens about their body, about health and disease. A process that should start in primary school, and cover off more pragmatic issues later on. Someone said to me once “Oh, I’m sure they teach them that stuff in Biology Class - you know, frog’s leg-reflexes, and photosynthesis”. I replied I didn’t take school Biology, and wouldn’t know a bronchus from a uterus if it hit me on the head. Someone told me about STDs, but not about appendicitis or nutrition. Smoking was ‘cool’, and drinking alcohol to excess was a right-of-passage.

Recently a friend (ML) pointed out that manufacturers advise patients about the sugar content of their product as being ‘35 grams’, not ‘9 teaspoonfuls’. Maybe only older patients understand what 9 teaspoonfuls looks like (lots), but I suspect very few of us recoil from 35 grams. We live in a society awash with sugar, and the consequences of ingestion (obesity, diabetes, etc.). Why is it that we accept this marketing standard? And do smokers know how many cancer-producing chemicals they inhale with each cigarette?

Often drugs are labelled to satisfy the pharmaceutical provider, but not really the potentially myopic and medically illiterate end-user. In addition to packaging that is awash with minutiae (like the DIN number), you will note the NAME and DOSE of the drug are less than prominent. And if you look at the flyer inside the box it comes in, there - in microscopic script - is a list of every side effect recorded (without mention of incidence of occurrence). Complex medical terms are the norm. Who on earth reads this sheet? If I don't, will other users? If our duty to the patient is to give them wise advice founded on scientific evidence, shouldn’t we first educate them (a) about health and disease (b) about the illness they have, why they are on a drug, and what else they can do to improve things (c) about common side effects, which may be manageable (d) that the benefits of treatment may substantially outweigh any perceived risk. If we don't make this effort, I predict a future where doctor-advice is viewed with suspicion, drug-compliance is poor, and the pressure to accept alternative treatments is huge.

In my day, you climbed the academic ladder by being (a) smart (b) hardworking (c) on good terms with the...
Can we encourage teachers and nurses, and politicians - to advance this agenda? Are there countries in the world we can learn from?²

Let’s train health professionals how to teach our youth, our elders, and our patients. Maybe we can make a dent in Health Literacy, for everyone’s sake.

**Works Cited and Suggested**

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