

National project to publicize link between literacy, health

Louise Kanonowicz

There is a strong link between literacy and health. Illiteracy affects health when medicines are used incorrectly because a patient cannot read or when instructions are not followed because the patient cannot understand them. Surveys and studies have also shown that people with limited literacy are more likely to smoke and less likely to engage in regular physical activity or to have ever had their blood pressure checked. Women with literacy limitations are less likely to undergo Papanicolaou tests.

More than one-third of Canadians — 38% — have literacy-related problems and will have serious difficulty reading and writing simple messages. For them, completing a form in a doctor's office or reading instructions on a bottle of cough syrup is an arduous task.

Surprisingly, many Canadians with literacy limitations are under age 30. The problem is common among natives, recent immigrants and refugees, those whose education was interrupted, and people with learning disabilities.

Typically, people with literacy limitations are ashamed and try to hide the problem. They are often resourceful and intelligent when trying to conceal illiteracy and have remarkably well-developed memories to help them cope with it.

Clues that physicians can

watch for include nervousness during an interview, difficulty in following instructions, or a failure to ask any questions. Illiterate patients may try to avoid completing a form by saying: "I'll complete it at home."

Unfortunately, many health care professionals are not aware of patients' literacy limitations. That is why the Canadian Public Health Association (CPHA) launched its National Demonstration Project on Literacy and Health in 1992; the project is supported by the National Litera-

cy Secretariat of the Department of Multiculturalism and Citizenship. The CPHA hopes that increased awareness about illiteracy will encourage health care workers to act to ensure that patients understand the information they receive. Where appropriate, patients with problems should be referred to organizations that can help them. The CMA and nine other national health care organizations are participating in the CPHA project.

Physicians and their office staff can play an important role in

Advice on literacy problems available from several sources

Information about literacy and ways to help illiterate Canadians is available from national, provincial and territorial sources. National contacts are:

Movement for Canadian Literacy, (613) 563-2464
La Fédération canadienne pour l'alphabétisation en français,
(613) 749-5333

Toll-free literacy hot lines are available within six provinces:

British Columbia Literacy Contact Centre, 1-800-663-1293
Prince Edward Island Literacy Alliance, 1-566-4490
Nova Scotia Literacy Department, 1-424-7544
Saskatchewan Literacy Network, 1-800-667-7522
Newfoundland and Labrador Literacy Coalition, 1-800-563-1111
L'équipe interrégionale en alphabétisation (Québec), 1-800-361-9142

Other provincial and territorial contacts:

Ontario Literacy Coalition, (416) 963-5787
Alberta Association for Adult Literacy, (403) 532-8857
New Brunswick Committee on Literacy, (506) 457-1227
Yukon Literacy Council, (403) 668-6280
Northwest Territories Literacy Office, (403) 920-3482
Manitoba Literacy Office, (204) 945-8247

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responding to the needs of patients who have difficulty reading and writing. They can create a "literacy-friendly" environment that uses alternatives to written messages. They can ensure that

the written materials they provide are clear and that they use plain, simple language. They should check with patients to ensure that instructions have been understood.

Most important, they should write down the number of the literacy agency nearest them (see sidebar) and seek more information on ways to help Canadians with literacy limitations. ■

Putting it plainly becomes communications mission of Ontario's Ministry of Health

Halyna Koba

At the heart of the current plain language debate is the need to communicate well. All communication depends on the receiver understanding the information the sender has provided. *Good* communication means that the reader or listener will have readily understood the message.

"Plain language is something that is clear and easy to understand and no interpretation is needed," explains Rhea Cohen, director of the Communications and Information Branch at the Ontario Ministry of Health. Because the ministry has been supporting and encouraging the use of plain language for several years, it is ready to act on a government-wide plain language policy, which was recently passed by the province's Management Board and officially approved by cabinet last September.

What will the terms myocardial infarction and volume-reduction unit mean to the average Ontarian? In plain language, the simple and direct substitutes are heart attack and town dump. But plain language is more than the choice of words. It is clear and effective communication that has a logical order.

Saskatchewan and Alberta



Cohen: awareness growing

were the first provinces to adopt a plain language policy. Similar moves are also being made in the United Kingdom, Australia and the United States. In Ontario, a committee involving more than half the ministries was formed after the International Year of Literacy in 1990. Ann Whalen-Griffin, director of the Literacy Branch of the Ontario Ministry of Education, explains that she received approval to organize the committee after she realized how strong the interest in plain language was.

The funding her branch had received to promote literacy had been distributed throughout the government; to Whalen-Griffin's surprise, most of that money had been spent on the revision of

materials, or employee training.

The committee members, who come from different levels of government, developed the plain language policy and a plan for putting it in place. "This can't be achieved overnight," comments Whalen-Griffin. "There needs to be a staged plan; the most important thing is to be making steady progress."

The Ontario government has appointed a plain language adviser to a 1-year term in its Management Board secretariat. The adviser will oversee the implementation of a plain language approach within the government, with each ministry being required to develop its own initiatives.

Cohen, who sat on the inter-ministerial committee, is an enthusiastic supporter. "We are responsible to the taxpayers and have an obligation to tell them about services and programs that they are funding. If you do it right the first time and [make the message] appropriate to the audience, it costs less to process and cuts back on follow-up phone calls, visits and paperwork."

At her ministry, as in many others, emphasis is being placed on training. "Plain language is not the responsibility of just the Communications Branch, but everyone," she says.

"Attention must be paid to the processes involved with plain language," explains Stephanie

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