The Problem

People experiencing homelessness, like many vulnerable populations, are at high risk for limited health literacy and have lower health status than the general population, increasing the burden of limited health literacy on their health (AMA, 2002; Fetter 2009).

These individuals have particularly high rates of chronic illness, trauma, and co-occurring mental health or substance use disorders compared to the general population and often use the costliest services for healthcare (National Coalition for the Homeless, 2006). Targeting members of this hard-to-reach population directly is not the most effective way to tackle their health literacy challenges (Faugier & Sargeant, 1997). Instead, reaching the more accessible population of case managers, who regularly communicate with this group, can address issues of health literacy and indirectly result in better health outcomes for people who experience homelessness.

References

Objectives

Objective 1: Demonstrate how current best practices in health literacy can be used for training curricula tailored for homelessness service providers.

Objective 2: Identify current health communication patterns between homelessness service providers (e.g., case managers and outreach workers), consumers enrolled in homelessness services, and people currently experiencing homelessness.

Approach

• Environmental scan of ten current health literacy trainings and interviews with five health literacy experts
• Eleven in-depth personal interviews with homelessness service providers around the U.S.
• Primary and secondary audience analysis to shape training components
• Development of prototype health literacy training tailored for homelessness service providers
• Pilot test of health literacy training with homeless service providers and development into an interactive online training program for t3

Final Product: Interactive Health Literacy Training for Homelessness Services Case Managers

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Final Product: Interactive Health Literacy Training for Homelessness Services Case Managers

Targeted:
Incorporates information from formative research specific to homelessness service providers

Relevant:
Case studies based on real experiences in homelessness services build credibility and encourage learning

Theory-based:
Adult Learning Theory and the Health Belief Model provide a foundation for the curriculum

Practical:
• Emphasizes universal precautions instead of including health literacy assessments
• Demonstrates how to use readability formulas and explains the limitations

Interactive and User-Centered:
• Optimal amount of information displayed on screen with audio narration of the content
• Relevant graphics are used to enhance content
• Easy to navigate
• Includes quiz questions, word games, and readability formula writing exercises

Actionable:
• Provides specific cues to practice newly acquired skills
• Emphasizes how altering communication style for each individual situation is paramount to addressing health literacy issues

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