



Health Literacy Program for Recent Immigrant Adolescents in New York City

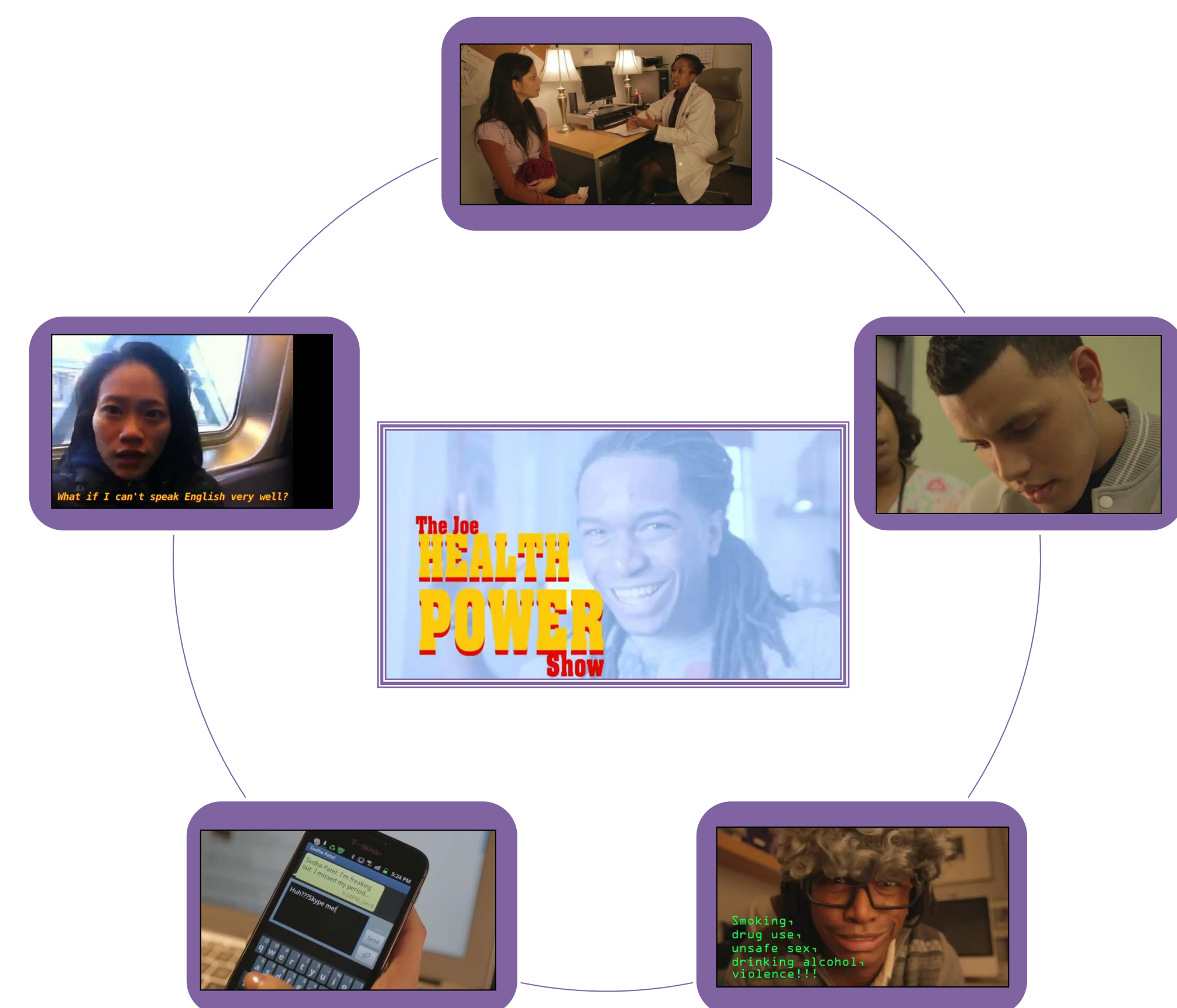
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Mobile Health Van Program



BACKGROUND

Health literacy is defined as “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions” (USDHHS, 2010). Improving health literacy is an integral part of the Patient Protection and Affordable Care Act and will be crucial in meeting the objectives set forth in Healthy People 2020 (USDHHS, 2010). While limited health literacy can affect anyone regardless of age, race, income, or education level (nearly 9 out of 10 adults have difficulty using everyday health information), lower socioeconomic and minority groups are disproportionately affected (Bass, 2005; USDHHS, 2010). Teenagers often forgo needed health care or delay seeking treatment until problems become severe (NAHIC, 2008). Recently immigrated adolescents may have difficulty accessing and effectively using health care, thereby increasing their likelihood of negative health outcomes.



PURPOSE

The New York University College of Nursing (NYUCN) was awarded a five-year grant through HRSA for its Mobile Health Van Program (MHVP), with a portion of the grant allocated for the creation of the Health Literacy Project (HLP). In response to the need for improved health literacy among adolescents, the HLP was designed to increase health self-efficacy for immigrant adolescents in relation to knowledge, skills, and attitudes, leading to: 1) expanded access, 2) competence in seeking preventative health care, 3) attitudes that value primary care, and 4) self-advocacy through effective navigation of the U.S. health care system. The HLP is a unique program that specifically targets immigrant adolescents' health literacy and health self-efficacy skills in New York City. IRB approval was obtained through NYU and the NYC Department of Education.

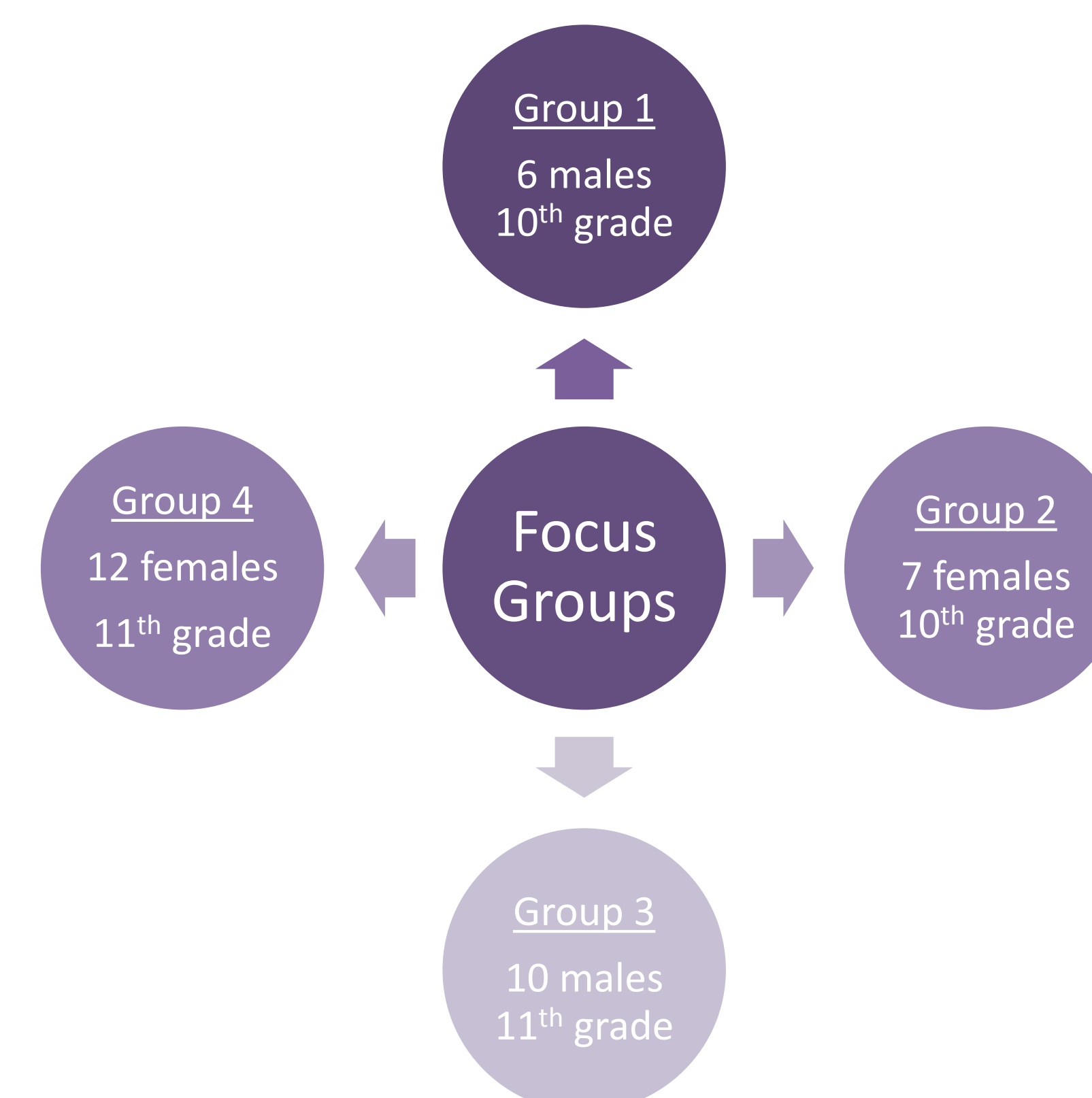
PROJECT IMPLEMENTATION

Figure 1. Countries Represented in Focus Groups



The MHVP team, led by its social worker, conducted four focus group sessions in May 2011 with diverse students from two international high schools in Brooklyn, NY (Figures 1 & 2). The focus group participants identified a number of barriers and facilitators for accessing health care for adolescents and their families (Figure 3).

Figure 2. HPL Focus Groups



To address these factors (Figure 3), the MHVP team and Third Space Creative, a Brooklyn-based health education film company, created nine short health education videos for implementation in the high schools' health education classes. The videos, called “The Joe Health Power Show,” present a variety of common health situations facing teens today including: teen pregnancy, sexually transmitted infections, diabetes, and depression. Test questions designed to measure students' knowledge of effective health management and their ability to effectively access and navigate the health care system will be administered before and after viewing of the videos. Figure 4 outlines the various implementation phases of the HLP.

Figure 3. Factors Affecting Health Care Access

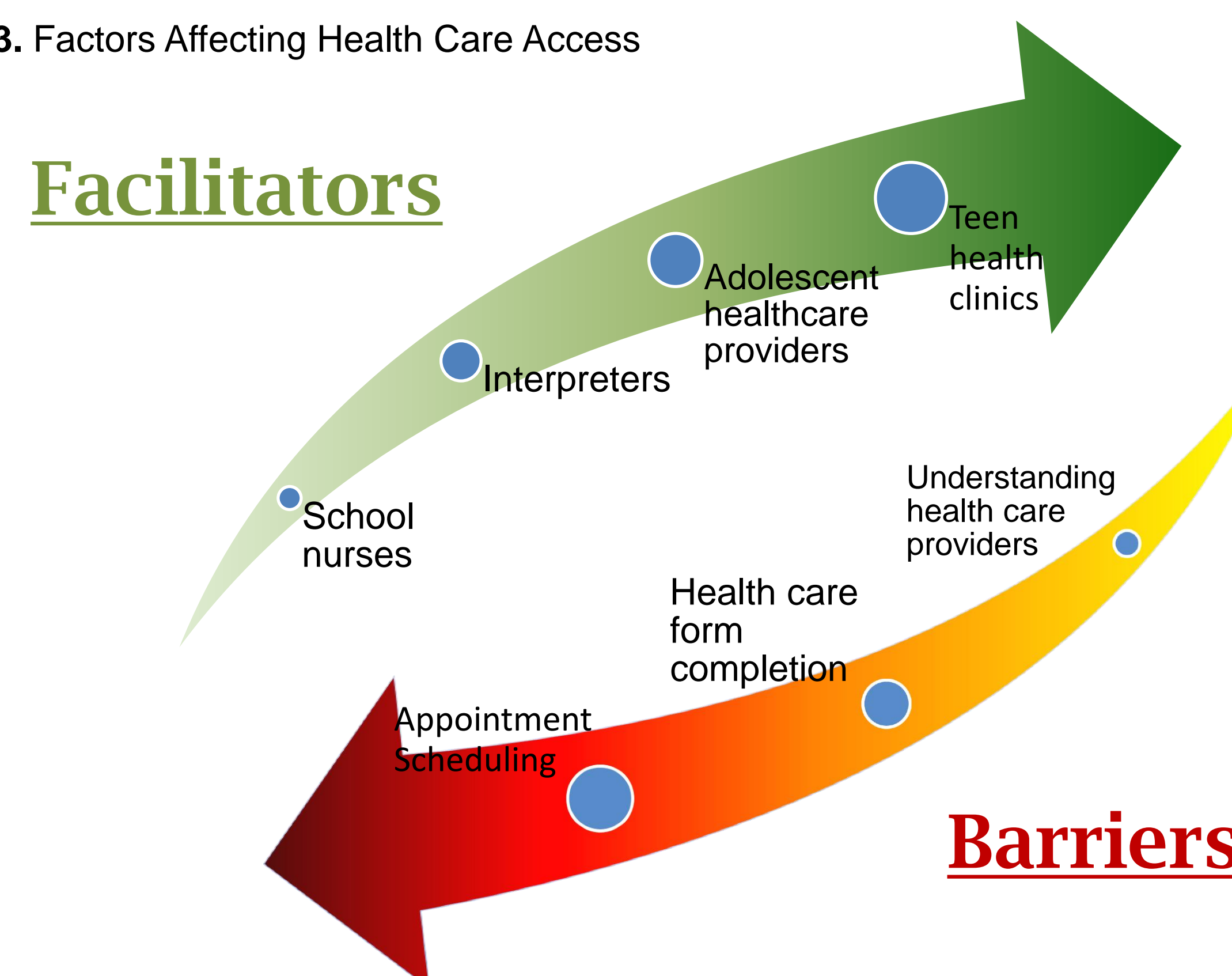
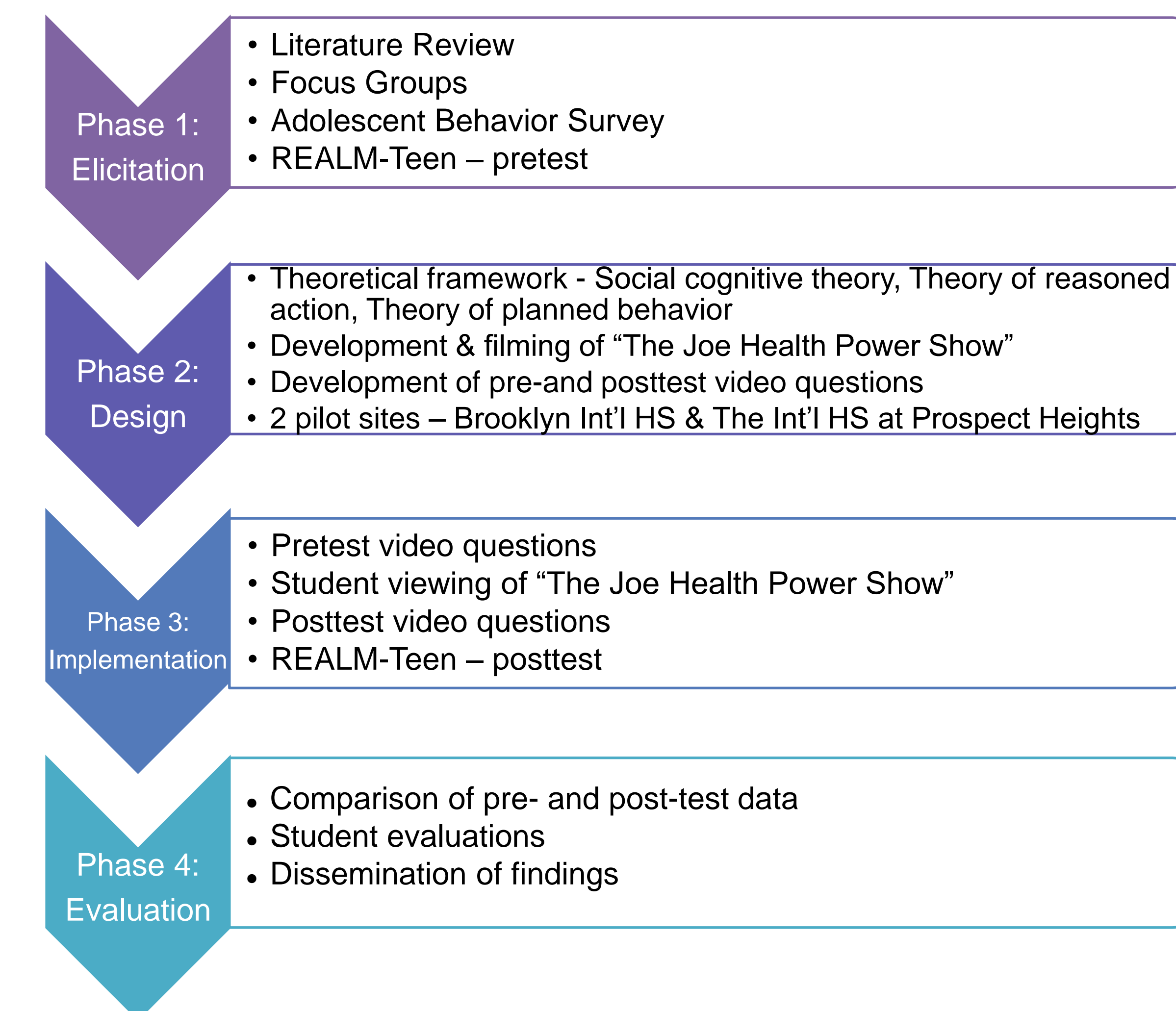


Figure 4. HLP Implementation Phases



RESULTS AND FUTURE DIRECTIONS

The MHVP plans to implement Phase 3 of the HLP in Spring 2013, followed by evaluation of the collected data in Phase 4. The HLP by design will be a replicable model for other high school sites that have recent immigrant student populations, thereby increasing its potential for achieving a broader public health impact, an important factor in light of our city and country's growing immigrant population. According to the 2012 census, approximately 37% of Brooklyn residents are foreign born and 46.1% speak a language other than English at home. The HLP also has policy implications as a vehicle for overcoming health disparities by improving health self-efficacy, thus increasing the potential for expanding health access, utilizations, and improving outcomes for this high risk population. The HLP will strengthen the overall health capacity of these adolescents, their families, and communities and provide a model for effective health self-management.

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