

# Research - Research Findings

## New Research Findings

### **Home Visitation Promotes Parental Health Literacy**

Home visitors in six programs representing several national models, and one program using telephone visitation only, collaborated in ground breaking research to further understanding of functional health literacy and how to promote it. Since improvement in parental health literacy translates to better healthcare for parents and children, better selfcare for parents and better caregiving for children, it is an especially urgent matter for growing families at risk. The two-year project conducted at University of Washington was jointly funded by the Agency for Healthcare Research and Quality, the National Institutes of Health Office of Behavioral and Social Science Research and the Institute for Child Health and Human Development.

### **Key Findings**

- **Health literacy improves with home visitation.** Both skilled and unskilled readers of all ages showed statistically significant improvement in the first six months and linear stepwise progress over time. Those with lower reading ability showed the greatest improvements. Parents of all ethnicities improve at about the same rate, but with different patterns.
- **The Functional Health Literacy Measure (FHLM - say film) is a reliable and valid measure of parental functional health literacy.** More research is needed to firmly establish validity. The FHLM is comprised of two scales derived from the Life Skills Progression instrument (LSP), an outcome and intervention planning tool for use with families at risk.<sup>1</sup> The Functional Healthcare Literacy scale (FHcL) rates a parent's use of adult and child healthcare services, including preventive care. The Functional Selfcare Literacy scale (FScL) gauges parents' management of personal and child health at home, including establishing safe environments, maintaining a healthy lifestyle and supporting child development. The FHLM captures the impact of both increased knowledge and improved functioning and may be useful in healthcare delivery settings particularly in adults with chronic conditions.

### **Background & Significance**

Health literacy describes a person's capacity to understand and use information and services to manage health.<sup>2</sup> Researchers estimate only 12% of US adults have proficient health literacy.<sup>3</sup> Skilled and unskilled readers alike struggle to act on information about health and illness,<sup>4</sup> to follow treatment instructions, administer medication, judge risks, and maintain a healthy lifestyle. Consequently, according to National Network of Libraries of Medicine, anyone with a high school education or less is vulnerable to the negative impacts of low health literacy.<sup>5</sup>

## **Research Design**

This was a quasi-experimental multi-group cohort study using multiple waves of measurement. The study period was Sept 2006 through August 2008. Since participating programs represent several national home visitation models, and the study population is large and diverse, the results of this study may be more generalizable than is usually expected in a cohort study. Visitors in the participating sites routinely complete the LSP on each parent-child dyad at intake, every six months, and at closure. Sequential measures show progress over time. For this project, the participating programs transferred their de-identified LSP databases to University of Washington for secondary analysis according to protocols approved by institutional review boards at University of Washington, University of Indiana, Virginia Polytechnic Institute, and the Medical College of Georgia.

## **Participating Sites**

- Healthy Families Indiana MOM Project — Indianapolis, IN
- Healthy Families of Grant Co — Marion, Indiana
- Child Health Investment Partnership of Roanoke — Virginia
- Enterprise Community Healthy Start — Augusta, Georgia
- Partnership for Strengthening Families — Bozeman, Montana
- Early Head Start Monterey Co Office of ED — Salinas, California
- Presbyterian Health Services — Albuquerque, New Mexico
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The sites differ in location, specific goals, staffing models, and service populations. All serve low-income families in the prenatal to preschool period. All believe low health literacy is a barrier to parents' goals for their families and to the goals of home visitation. Visitors were trained to use the *Beginnings Guides* curriculum and reflective practices to promote health literacy and reflective functioning.

## **Study Population**

- 2532 parent/child pairs. Parents include pregnant women. Children are aged 0 to 3 years.
- 32% African American; 18% Latina; 29% Caucasian; 2% other; 20% unknown or missing
- Parental age ranged from 13 to 68 years. Average age = 25.4 years (SD=7.4 years)
- Visitors completed up to 7 LSPs for each parent-child pair, plus 1 or 2 reading skills assessments
- At intake, 30 to 36% of parents were screened at-risk for reading skill < 6th grade, compared to about 20% in clinical populations.

## **Recommendations**

In a 1.5-day study completion conference funded by ZERO TO THREE and the University of Indiana Institute for Action Research in Community Health, staff and directors of the participating programs, funders, and national experts reviewed findings and recommended:

- Quickly disseminate findings and implement promising practices to promote health literacy
- Seek additional funding to conduct further analyses and additional studies
- Continue to build the national database for ongoing cross-program studies
- Establish a national web-based data entry system
- Expand the Home Visitors Research Network, which includes the participating sites
- Incorporate functional health literacy promotion into home visitation policy and practice

For information on the Life Skills Progression instrument contact author Linda Wollesen:

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For more information on this research, the Home Visitors Research Network, or the *Beginnings Guides* curriculum and training contact principal investigator, Sandra Smith, MPH, PhD <mailto:sandras@beginningsguides.net> 800-444-8806