Social Determinants of Patient Health Literacy

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Introduction

Health literacy, a complex and multifaceted concept, has been identified as a significant determinant of quality of healthcare for patients. The World Health Organization defines health literacy as the ability to "access, understand, appraise, and use information and services in ways that promote and maintain good health" (2024). Social factors such as patient autonomy, marital status, and language barriers can impact health literacy levels. Patient autonomy is essential for informed decision-making (Brooks & Sullivan, 2002; Barello et al., 2020). Marital status influences health literacy through social support, with more stable relationships improving access to health resources (Nielsen et al., 2024). Additionally, language barriers experienced by Spanish-speakers, can create literacy challenges and health disparities (Ugas et al., 2023). Despite this existing information, there is not a sufficient understanding of why and how these factors affect health literacy and thus health outcomes. In this study, we aim to examine how these aspects of social setting impact health literacy.

Methods

- The data used was from a subsection of a larger study.
- The participants in this study were referred by three partner health facility partners.
- After IRB and consent, the participants were asked to fill out a questionnaire that consisted of demographic, access, and health literacy surveys.
- Descriptive statistics and ANOVA were used to determine statistical significance between groups and their responses using SPSS
- The groups were divided into four categories of health literacy using the Functional, Communicative, and Critical Health Literacy (FCCHL) tool
- A total of 276 participants completed the surveys

Results

- Higher health literacy was significantly correlated with higher living status (p < .001)
- A positive correlation was found between health literacy and health provider communication (p=0.004)
- Questions included
  - Acceptable Similar: "When I look around the waiting room, I see other patients who look like me"
  - Comfort with Provider: " I prefer to see the same healthcare provider for my heh"
  - Comfort with Relationship: "Having a relationship with my healthcare provider is important to me"
  - Comfort with communication: "My healthcare provider communicates well with me"

Demographics (n=276)	Percent
Age	Average 51 (std 14.7)
Gender (Female)	54.7%
Insurance (yes)	86.5%
Primary Care (yes)	81.4%
Access: Reason you did not receive care:	
No transportation	8%
Distance to clinic	1.8%
Language Barrier	0.4%
Living Status	
Alone	19.9%
Spouse/SO	54%
Extended Family	4.4%
Shelter/Group Home/ Homelessness	23.7%

Variable related to health literacy (FCCHL) using ANOVA to compare means between health Literacy Values	Statistical Values
Marital Status (i.e. married, divorced, single)	F=0.982 (p=0.512)
Education (i.e. high school, college, grad)	F=1.385 (p=0.065)
Living Status (i.e. co-habituating, single, homeless)	F=1.941 (p<0.001)
Acceptable Similar	F=1.437 (p=0.048)
Comfort with Provider	F=1.444 (p=0.044)
Comfort with Relationship	F=1.875 (p=0.001)
Comfort with Communication	F=1.743 (p=0.004)

Conclusion & Implications

Conclusion:
The results showed that higher health literacy was associated with better patient-provider communication and the patient's perceived importance of such communication. Marital status did not significantly affect health literacy. These findings suggest that elements of social environment, such as living situation and the quality of patient-provider interaction, play a crucial role in health literacy. The study underscores the importance of a supportive social network, whether through living status or healthcare communication, health literacy. Further research is needed to explore how a lack of support systems contributes to poor health literacy and to develop targeted interventions to address this issue.

Implications:
These results emphasize the correlation between the presence of a support system with a person's health literacy. These support systems, including relationships between patient and health provider and accompanied living status enhance health literacy, while the absence of such support can exacerbate health disparities. More research is needed to explore the underlying mechanisms through which these social determinants influence health literacy to develop targeted strategies that address these disparities and improve health outcomes.

References

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