

Can your patients understand you?

Nearly half of Canadians have low literacy skills, and Dr. Owen Hughes says this has huge implications for physicians. "It's a major hurdle for many of our patients and we don't realize it," the Ottawa family physician explained during the First Canadian Conference on Literacy and Health. "These people are at a significant disadvantage in our health care system. The onus is on health care providers to remove obstacles."

The *Canadian Report of the International Adult Literacy Survey* (1995) says 47% of Canadian adults have difficulty reading printed documents and about 80% of those over age 65 have serious literacy limitations. These data were part of the reason for the Ottawa conference, which was sponsored by the Canadian Public Health Association and the National Literacy and Health Program, a coalition of 27 national health associations.

Hughes, a communications expert who heads the Division of Maternal and Newborn Care at the Ottawa Hospital, told the 200 delegates that health care providers must identify illiterate or low-literacy patients, use simple and clear language (both written and verbal), and ensure that their messages are understood.

But first, physicians need training in communication. "Give patients time to get their story right," he advises, because more effective consultation leads to improved outcomes. (On average, said Hughes, physicians listen to patients for 19 seconds before telling them what to do about a problem.)

The need for better communication also extends to the forms patients are expected to sign. Lawyer Philip Knight, a Vancouver-based plain-language specialist, said frightened patients too often sign consent forms without clearly understanding what they're doing. He said consent forms for research subjects can be 30 pages long and many forms for surgical procedures resort to mind-numbing

legalese. "If your concern is to ensure that patients understand what they are signing, then you need to use clear-language techniques."

Legally, patients must know the basic nature of a proposed treatment and agree to it. "A signed consent form by itself is not proof that the duty to disclose is satisfied," said Knight.

Few people know more about the need for plain language than Ceci Conrath Doak and Leonard Doak. This Maryland couple has trained more than 11 000 health care professionals in the

do you want patients to do? Why should they do it?

- Keep the words simple and specific. What do you mean by excessive bleeding? A spot? Soaking a pad? What is "regular" exercise? Once a day? A week?
 - Illustrations must relate directly to the text. A person with low literacy needs visuals cues, not distractions.
 - Interact with the reader through Q and A or short questionnaires. Interaction aids memory.
- There are several plain-language re-



What's the message? Patients thought this illustration (left) was telling them to take their medication with a shot of whisky. The revised illustration (right) makes it clear that patients should read labels.

principles of plain language, and analysed more than 2000 sets of health care instructional materials for clarity. Their evaluation system, Suitability Assessment of Materials (SAM), provides ratings based on 22 factors in 6 categories: content, literacy demands placed on readers, graphics, layout and typography, learning stimulation and cultural appropriateness.

The Duke University Medical Center had adopted SAM for all of its patient literature. The test takes about 45 minutes, and provides a numerical measure of a document's suitability.

The Doaks offered several plain-language tips:

- Write in terms of behaviour. What

sources for physicians. The National Adult Literacy Database (www.nald.ca) includes a reading-effectiveness tool (indicates grade level) and a thesaurus that supplies simpler words. As well, the Canadian Public Health Association offers a plain-language service for doctors (www.pls.cpha.ca).

Physicians attending the meeting also had a chance to read advice solicited from patients. "They [health providers] shouldn't assume people can fill out these [medical] forms," one wrote. "They should automatically say, 'We have some forms we have to fill out, can I ask you a few questions?', and then fill out the forms themselves." — *Barbara Sibbald, CMAJ*