

HINTS

Discussant

Health Communication

By

Scott C. Ratzan MD, MPA, MA

**Vice President
Global Health
Johnson & Johnson**

and

Editor-in-Chief

Journal of Health Communication: International Perspectives

Disclaimer: The ideas presented here are the author's only and do not represent the positions of Johnson & Johnson

The Evidence for Health Interventions

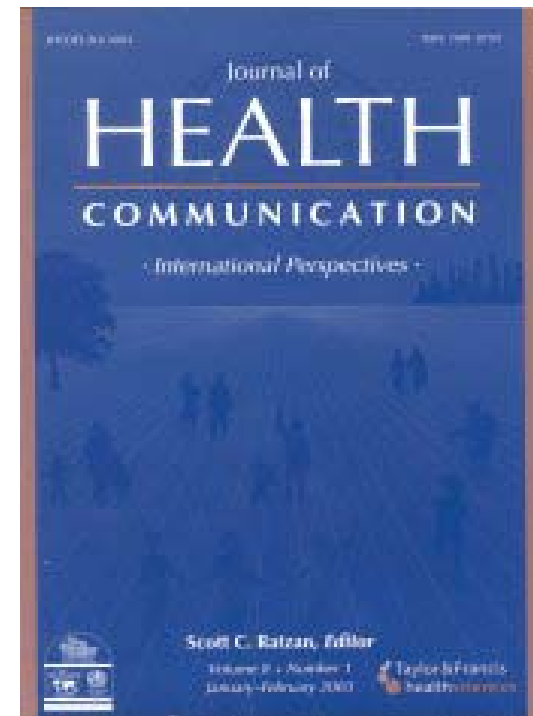


Sifting the evidence for sound studies with a take home message is laborious and the yield disappointing

The Evidence for the Value of Information

Over 14 years of research in the peer reviewed ***Journal of Health Communication*** had measurable outcomes with communication affecting:

- Knowledge
- Attitudes
- Awareness
- Practices
- Perceptions
- Intentions
- Behavior change, and
- Social Change

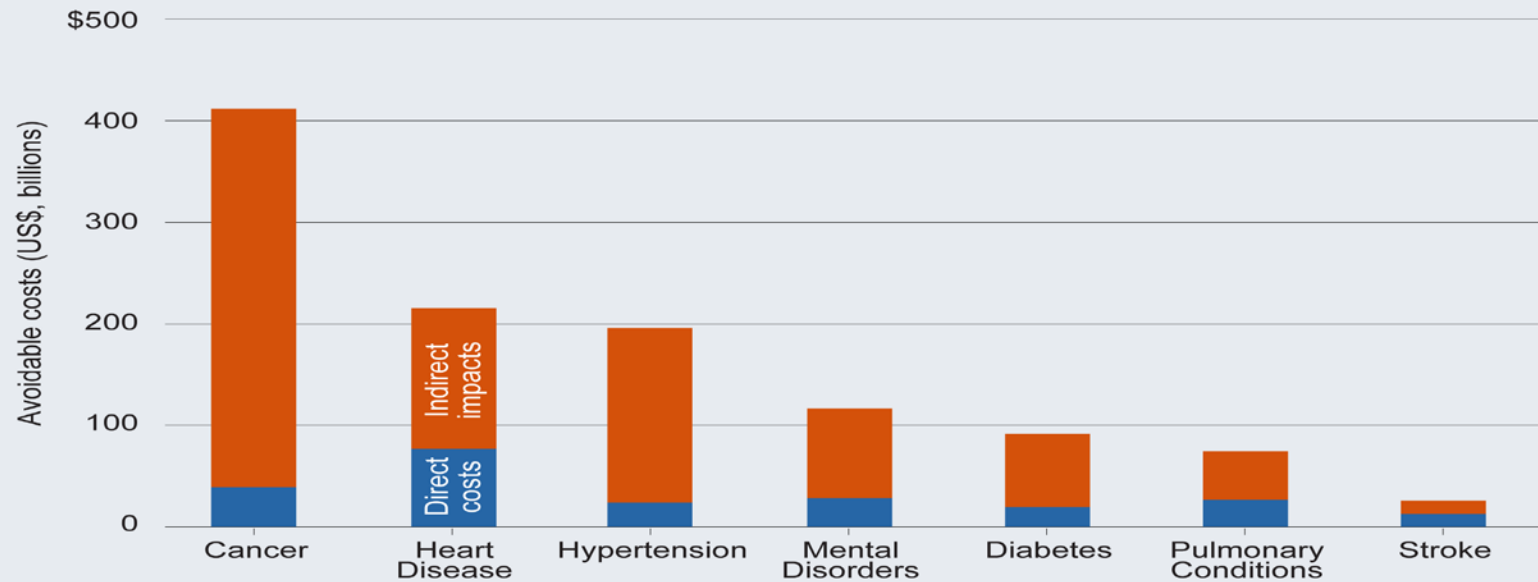


The Issue:

High Cost of Preventable Chronic Disease

Forecast Avoidable Costs of Chronic Disease

In the US, the avoidable indirect impacts (ie, productivity losses) of chronic disease are four times as high as the direct costs



Note: Avoidable costs are those that could be eliminated by reasonable improvements in behaviour and treatment. Direct costs are treatment costs. Indirect impacts are losses in output due to absenteeism, "presenteeism" and other productivity reductions.

Source: The Milken Institute, "An Unhealthy America: The Economic Impact of Chronic Disease" (2007)

What Can be Done?

“...more research is needed, but there is already enough good information that we can use to make practical improvements in health literacy.” (Moritsugu, 2006)

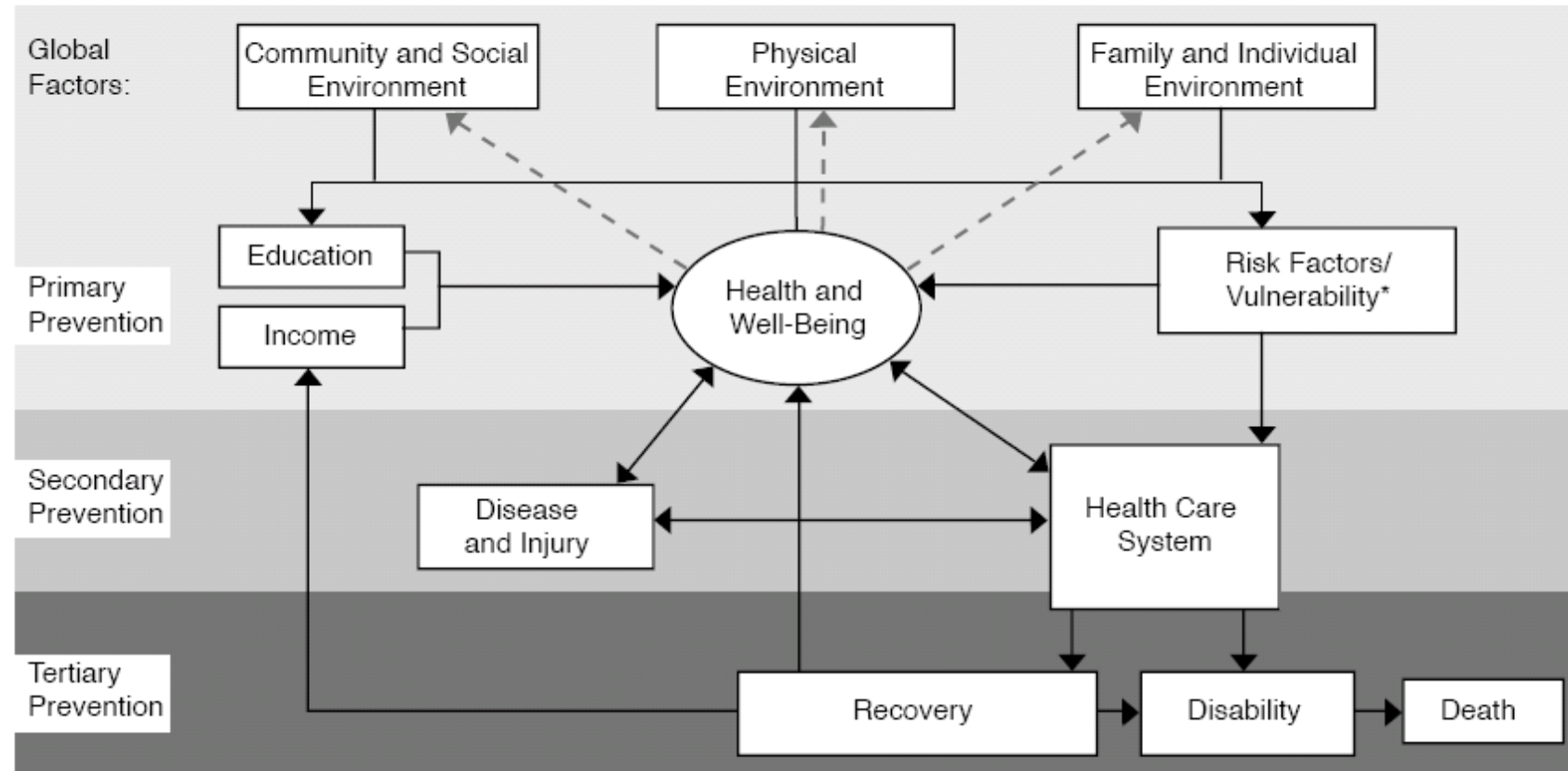
- 80% of heart disease, stroke, type 2 diabetes, and;
- 40% of cancers can be **prevented through inexpensive and cost effective interventions**



The 21st Century Field Model

Figure 5

Determinants of Health: The 21st-Century Field Model



← -- Potential pathway for individual and community action to influence global factors.

*Risk factors include age, nutritional status, and genetic makeup, among other factors.

Source: Adapted from Robert G. Evans and G.L. Stoddart, "Producing Health, Consuming Health Care," in *Why Are Some People Healthy and Others Not?* eds. R.G. Evans, M.L. Barer, and T.R. Marmor (1994): 53.

























A Simple Idea – Galvanizing and Measurable

A **Scorecard** with key health indicators for:

- Fasting Blood Sugar (diabetes),
 - Body Mass Index (obesity)*
 - Cholesterol (cardiovascular disease),
 - Blood pressure (hypertension)*
 - Smoking/tobacco use (cancer and CVD)*
 - Immunizations (vaccine preventable disease)
 - Cancer screenings (age and gender specific)
 - Alcohol use*
 - Physical activity*
 - Diet*
- Obtain a “personal” health score and rating against a standard.
 - Potential for clustering, electronic measures and communication
 - Developed and updated on a national level.
 - Incentives to attain better health (lower costs and premiums)

Illustrative -- Cancer prevention Scorecard

Key Health Indicators

		January 2007	January 2008	January 2009
Body Mass Index	19-24.9			
Blood Pressure	120/80??			
Cholesterol	Total or LDL			
Fasting Blood Sugar/	TBD			
Smoking/Tobacco Use	Yes			
Cancer Screenings (tailored to gender/age)	Yes			
Other, e.g., exercise, immunizations	Yes			
<hr/>				
Overall Health Score (Green/Yellow/Red)	7/0/0	 1/2/4	 2/4/1	 5/2/0



Excellent

Successful attainment of majority of indicators; continue to monitor



Borderline

A number of key indicators need to be attained



Needs Improvement

Immediate attention required to reach attainment for better health

How do we Develop a Health Literate Public?

"The extension to all peoples of the benefits of medical, psychological and related knowledge is essential to the fullest attainment of health."

-World Health Organization, Preamble to the Constitution



MARKETWATCH

Health Literacy: A Policy Challenge For Advancing High-Quality Health Care

Creating a health-literate America may not be easy, but it is the right goal for health policy.

by Ruth M. Parker, Scott C. Ratzan, and Nicole Lurie

ABSTRACT: Health literacy, at the intersection of health and education, involves more than reading ability. Studies of health literacy abilities show that many Americans with the greatest health care needs have the least ability to comprehend information required to navigate and function in the U.S. health care system. This paper defines health literacy as an important policy issue and offers strategies for creating a health-literate America.

The Opportunity to Advance Health:

Health Literacy for the Public Good



World Health Organization Preamble to the Constitution:

“Informed opinion and active cooperation on the part of the public are of the utmost importance in the improvement of health of the people.”

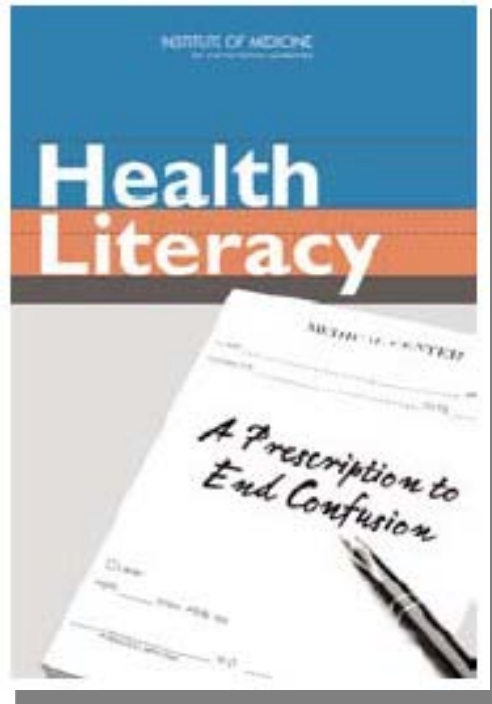


United Nations Ministerial Declaration:

“We stress that health literacy is an important factor in ensuring significant health outcomes and in this regard call for the development of appropriate action plans to promote health literacy.” (July 9, 2009)

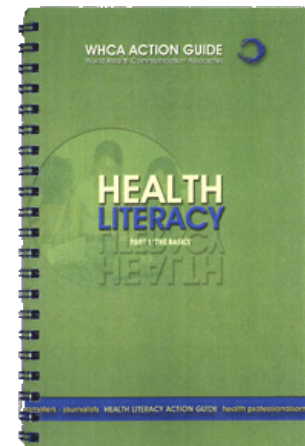
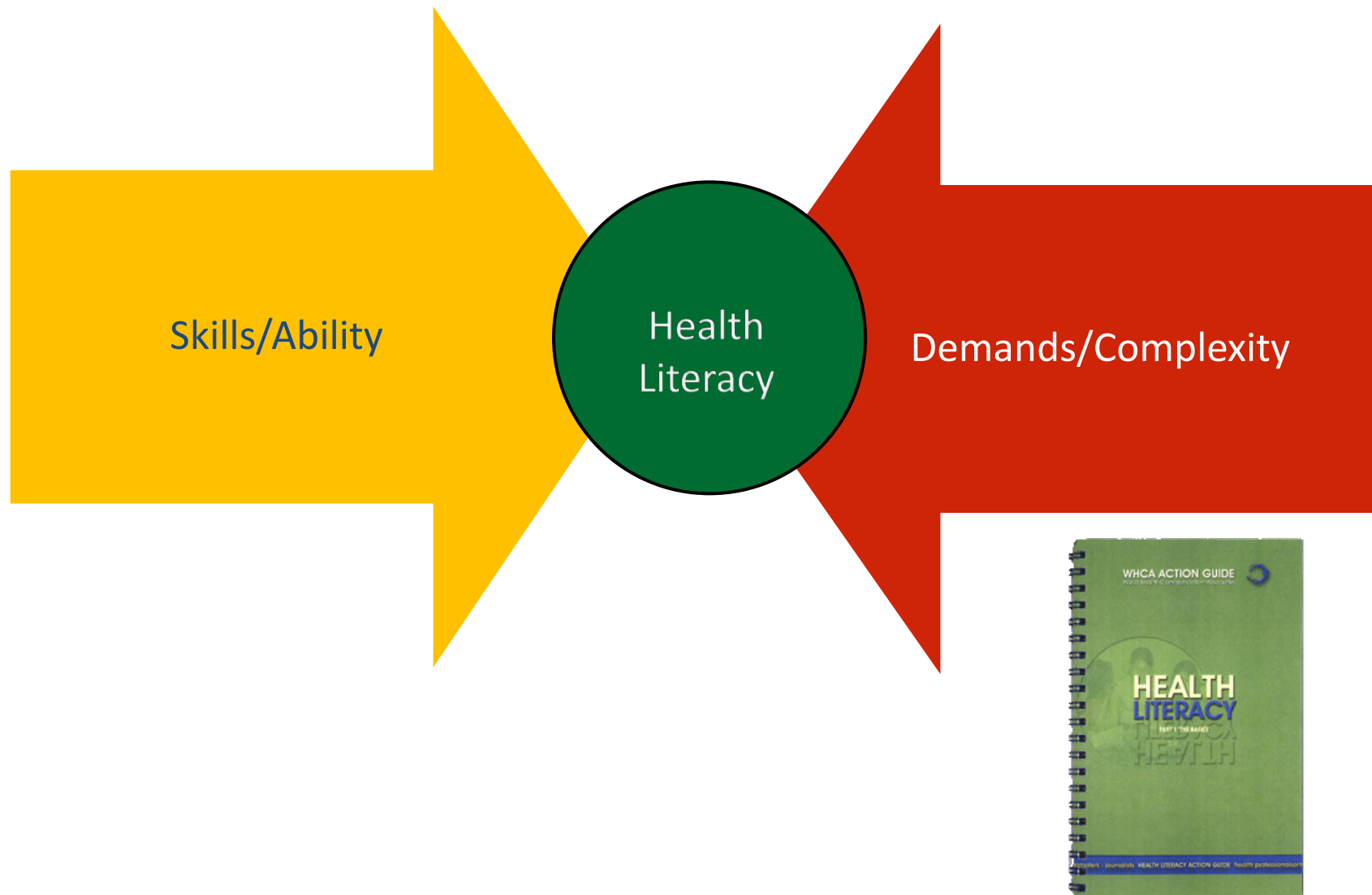
Health Literacy

Health Literacy is “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.”



Sources: Ratzan and Parker, NLM Complete Bibliographies of Medicine, 2000; USDHHS, Healthy People 2010; Institute of Medicine, 2006

Conceptual Framework



Source: Parker, Ruth, in World Health Communication Associates, 2009. *Health Literacy, Part 1 "The Basics."*

WHCA Action Guide. Presented at IOM, February 2009.

An example: Healthcare Systems: The D5 for Secondary Prevention of Diabetes



DIABETES SCORECARD

FIVE GOALS FOR LIVING WELL WITH DIABETES

Do you know all your D5 scores?

Fill out this card with your doctor and work together to achieve D5 success!

The D5 are recommended goals for patients with diabetes. Your goals may be different based on your individual needs. Talk to your doctor about the D5 goals that are right for you.

For more information about the D5, visit www.theD5.org

	GOALS	MY D5 SCORES
1 CONTROL BLOOD PRESSURE High blood pressure makes your heart work too hard. It can cause heart attack, stroke, and kidney disease.	BP less than 130/80 mmHg	<input type="text"/>
2 LOWER BAD CHOLESTEROL LDL or "bad" cholesterol can build up and clog your blood vessels. It can cause heart attack or stroke. HDL or "good" cholesterol helps remove cholesterol from your blood vessels.	LDL less than 100 mg/dl	<input type="text"/>
3 MAINTAIN BLOOD SUGAR High blood glucose levels (too much sugar in your blood) can harm your heart, blood vessels, kidneys, feet, and eyes.	A1c less than 7%	<input type="text"/>
4 BE TOBACCO-FREE Smoking doubles your risk of heart disease. Both smoking and diabetes narrow blood vessels. Smoking can damage the blood vessels in your legs, increasing the risk of amputation.	✓ YES	<input type="text"/>
5 TAKE ASPIRIN DAILY (ages 40 and older) Taking aspirin every day can help reduce the risk of heart disease and stroke. Ask your doctor whether taking aspirin is right for you.	✓ YES	<input type="text"/>

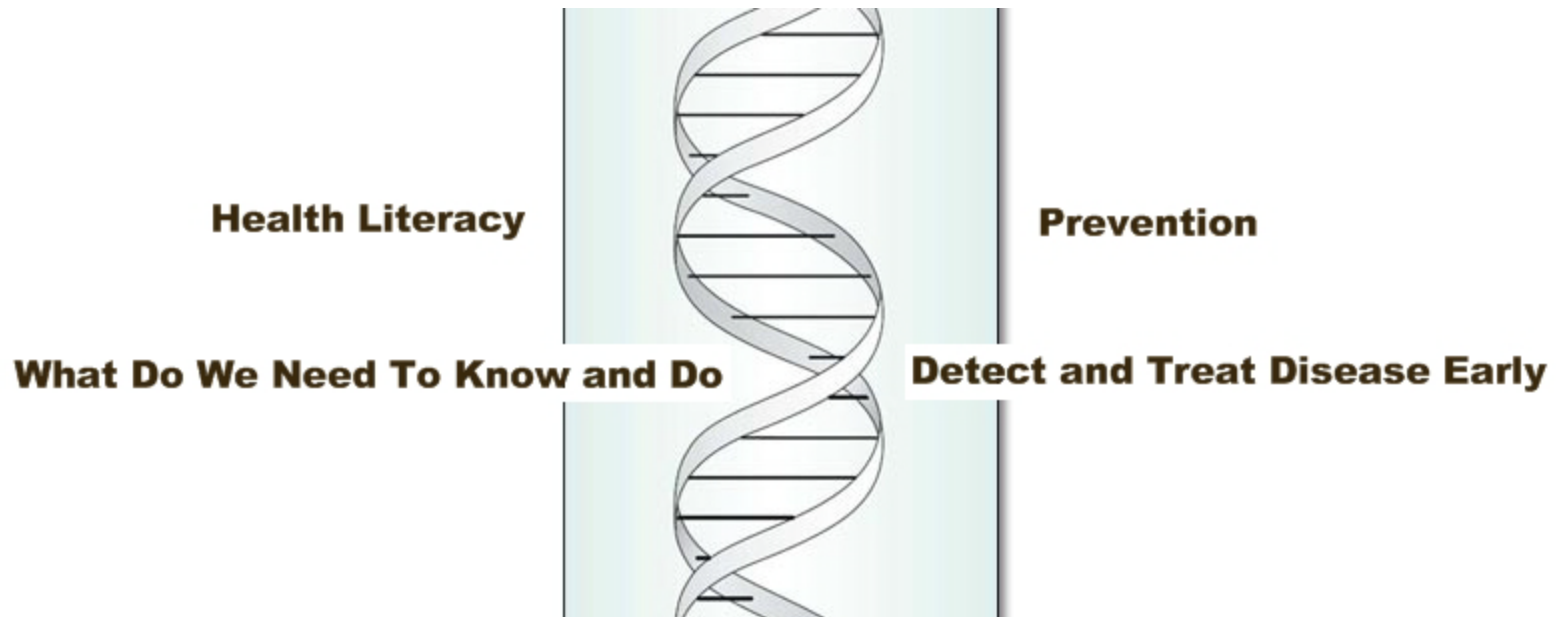
Conceptual Constructs

1920: Winslow's definition of public health

"Public health is the science and art of preventing disease, prolonging life and promoting physical health and efficacy ...which will ensure every individual in the community a standard of living adequate for the maintenance of health"

1988: IOM

The mission of public health "fulfilling society's interest in assuring conditions in which people can be healthy."



Consumer Perspectives on Health Care Needs

- Primary Prevention: “Staying healthy” refers to getting help to avoid illness and remain well.
- Secondary Prevention: “Getting better” or “Living with Illness” refers to getting help to recover from an illness or injury and/or getting help with managing an ongoing, chronic condition or dealing with a disability that affects function.
- ***“Preventive care...is one of the best ways to keep our people healthy and our costs under control.” - President Barack Obama***

Source: Institute of Medicine. Envisioning the National Health Care Quality Report. 2001