In adults with Diabetes Mellitus who experience Limited Health Literacy (LHL) skills, how can nurses communicate relevant information to self-manage their health condition?

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Introduction

- Approximately 200,000 people are known to have Diabetes in New Zealand (Ministry of Health, 2014).
- Diabetes is a chronic disease, requiring a through understanding to manage acceptable Blood Glucose Levels (BGL) (Ministry of Health, 2014).
- Moreover, 56.2% of adult New Zealanders experience inadequate health literacy skills, required for everyday living (Ministry of Health, 2010).

What is Health Literacy?

Health literacy is the ability to obtain, process, and understand basic health information and services to make appropriate health decisions (Ministry of Health, 2010).

The Importance of Health Literacy

Health numeracy is vital in managing diabetes because measurable skills, are essential for BGL monitoring, carbohydrate calculating and medication administration (Cavanaugh et al., 2009).

If diabetes is not managed effectively, it can lead to long term health complications (World Health Organisation, 2014).

Population Groups affected by LHL include

- ⇒ The elderly population
- ⇒ minority groups
- and those from a lower socioeconomic background (Sarkar, Fisher, & Schillinger, 2006).

Empowering the Patient to Understand their Condition

The teach back method, revealed positive results and involves health professionals engaging patients to teach-back essential health information, which then allows the health provider to clarify aspects where required with the health consumer (Osbourne, 2013). The author states that formal literacy assessment tests are not conducive to those with LHL as they instigate shame and anxiety.

Implications for Practice

Effective communication between the nurse and patient is key to improved health outcomes.

Patients who are well-informed, will have a beneficial understanding on diabetes, which encourages autonomy to occur, outside of the health setting.

Conclusion

- The teach-back method is the most effective instrument for teaching that nurses can use in their practice.
- Providing simple reading material or visual cues to support methods to educate patients with LHL is imperative for success.
- Training needs to occur with all health professionals regarding communication methods on health/numeracy and communication skills.

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PECOT category	Information relating to the question	Explanation
Population	Adults with either Type 1 or	Population groups primarily
	Type 2 Diabetes Mellitus	affected by LHL are ethnic
	aged over 18 years old with	minorities, older people and
	LHL skills.	individuals diagnosed with
		chronic illnesses such as diabetes
		(Stiles, 2011).
Exposure (intervention)	Understanding and assessing	Diabetics require a self-care
	LHL diabetes adults using the	approach and be competent to
	teach back technique	learn monitoring their BGL with
	(Nielsen-Bohlman, Panzer, &	a finger-lancet test, noting this
	Kindig, 2004).	result, and the action required
		after (Sarkar et al., 2010).
Comparison/control	The use of a clinical tool to	This is a validated tool
	measure literacy, Test of	commonly used in most research
	Functional Health Literacy in	regarding LHL
	Adults (TOFHLA) (Parker,	(Frisch, Camerini, Diviani, &
	Baker, Williams, & Nurss,	Schulz, 2012).
	1995).	
Outcome	Identifying the effectiveness	The writer is interested in what
	of either literacy assessment,	provides the best result for LHL
	as identified in the	diabetics in patient teaching and
	intervention and comparison	education by improving self-
	category.	efficacy levels.
Timeframe	Not applicable.	For this clinical question, the
		timeframe is not required
		(Schneider, Whitehead,
		LoBiondo-Wood, & Haber,
		2013).
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PICOT used to refine the clinical question (Schneider, Whitehead, LoBiondo-Wood, & Haber, 2013).

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