## HEALTH INFORMATION SEEKING BEHAVIORS IN ADULTS WITH BELOW AVERAGE LITERACY, NUMERACY AND PROBLEM SOLVING SKILLS

**RESULTS FROM THE 2012 PIAAC US DATASET** 

IRIS FEINBERG MA, GEORGIA STATE UNIVERSITY JAN C. FRIJTERS PHD, BROCK UNIVERSITY DAPHNE GREENBERG PHD, GEORGIA STATE UNIVERSITY **KNOWING HOW ADULTS WITH LOW LNPS ENGAGE IN HISB IS IMPORTANT BECAUSE** THOSE WHO ACTIVELY SEEK HEALTH INFORMATION FROM A VARIETY OF SOURCES ARE LIKELY TO BE MORE COGNITIVELY AND PSYCHO-SOCIALLY PREPARED TO ENGAGE IN MEDICAL **DECISION-MAKING** AND WITH THE MEDICAL SYSTEM

#### HEALTH LITERACY & HEALTH INFORMATION SEEKING BEHAVIORS (HISB)

- Patient Centered Care
- Complex and Situational Demands of Health Literacy
- Seeking information as the first step in using information

#### LITERACY, NUMERACY, & PROBLEM SOLVING

- Reading & Writing
- Using numbers for health
- Challenges of digital literacy

# **RESEARCH QUESTIONS**

**RQ1:** 

What sources do people with below average LNPS utilize when seeking health information?

#### **RQ2**:

When looking at Gender, Age, Race, Educational Attainment, Health Status, Use of Preventive Measures and Facilities in Reading, Writing, and Speaking/Understanding Spoken English, which of these factors predict different health information sources for people with below average LNPS?

# **US PIAAC DATA SET**

### • Health Related Measures

- Sources of Health Information (DV)
- Health Status
- Use of Preventive Health Measures
- Background Information
  - Age, Gender, Race
  - Educational Attainment

### • Facilities in English

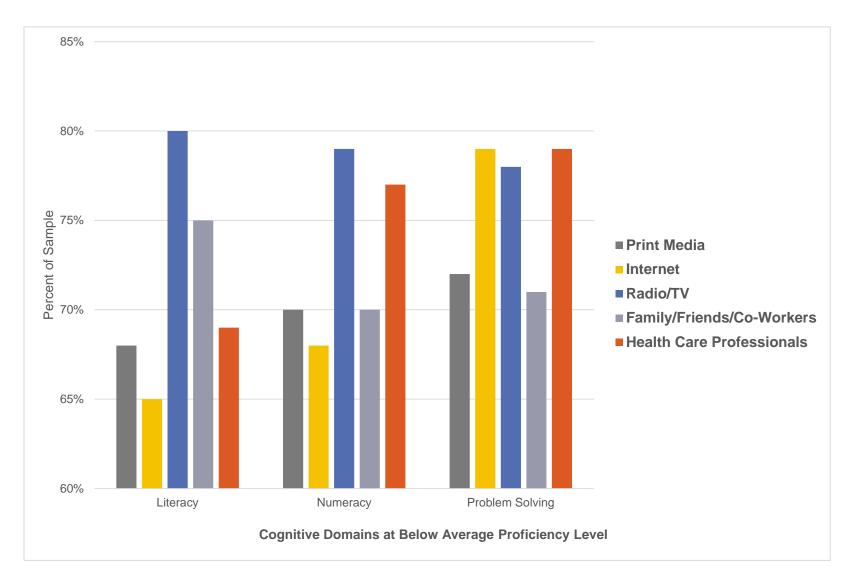
- Reading
- Writing
- Speaking/Understanding Spoken

#### **SAMPLE:** BELOW AVERAGE PROFICIENCY LEVELS DEFINED ACCORDING TO THE CLASSIFICATIONS BY THE UNITED STATES DEPARTMENT OF EDUCATION

### • Literacy (n=2270)

- Below Level 1, Level 1, Level 2
- Cut Score 275
- Numeracy (n= 2810)
  - Below Level 1, Level 1, Level 2
  - Cut Score 275
- Problem Solving (n= 2270)
  - Below Level 1, Level 1
  - Cut Score 290

### **RESULTS RQ1:** USE OF HEALTH INFORMATION BY COGNITIVE DOMAIN



### **RESULTS RQ2:** PREDICTING USE OF HEALTH INFORMATION

|               | Print Media | Internet | Radio /TV | Social | Health<br>Professional |
|---------------|-------------|----------|-----------|--------|------------------------|
| Gender        | Female      | Female   | Female    |        | Female                 |
| Age           | Older       | Younger  | Middle    |        | Older                  |
| Race          | BAH         | HA       | BH        |        | В                      |
| Education     | HS          | HS       |           |        |                        |
| Health Status | Good        | Good     | Good      | Good   | Good                   |
| Preventive    | +           | +        |           | +      | +                      |
| Reading       | High        | High     | High      |        |                        |
| Writing       |             | High     |           | High   | High                   |
| Speaking      |             |          |           |        |                        |

## **KEY FINDINGS**

- Those who seek health information are more likely to report better health.
- Participants use multiple sources of health information.
- Oral sources (Radio/TV, Health Professionals, Friends/Family/Co-Workers) are generally used more frequently than written sources (Print Media, Internet)
- Those who report a high Facility in Writing are more likely to use Health Professionals and the Internet.

## FUTURE DIRECTIONS FOR RESEARCH

- How does native language status affect HISB?
- How do individuals use the information they acquire from different sources?
- Impact of writing skills on use of the Internet
- Impact of writing skills on use of Health Professionals

# IMPLICATIONS FOR POLICY & PRACTICE

- Facility in written and spoken English and the most readily modifiable factor that predicts health information utilization
- Cost-effectiveness of ABE funding
- Low literacy / Numeracy / Problem Solving equivalent importance across types of access
- Implications for content, curricula of Adult Basic Education