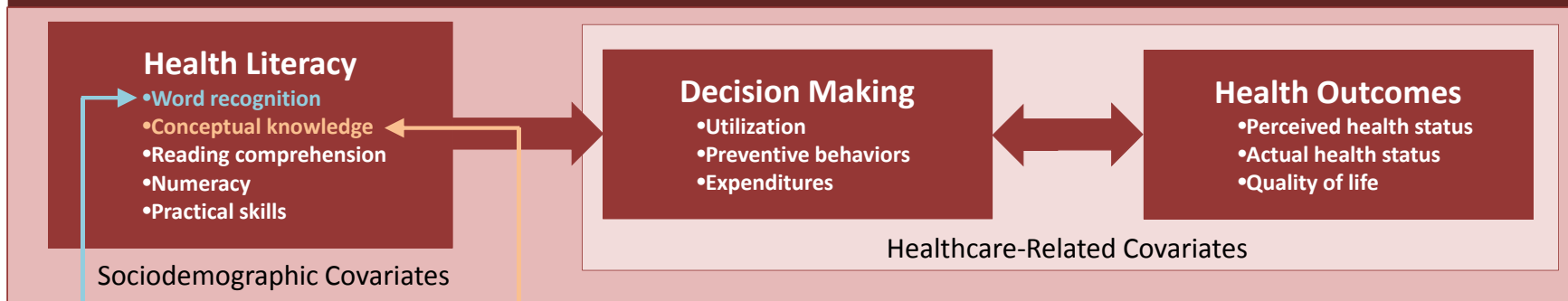# #12

Health Literacy and Oral Health: Building on Preliminary Studies

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Conceptual Model of Health Literacy and Health

Health Literacy
- Word recognition
- Conceptual knowledge
- Reading comprehension
- Numeracy
- Practical skills

Decision Making
- Utilization
- Preventive behaviors
- Expenditures

Health Outcomes
- Perceived health status
- Actual health status
- Quality of life

Healthcare-Related Covariates

Sociodemographic Covariates

Preliminary Study 1: A New Word Recognition Instrument

Background
- Existing surveys were specific to either medicine or dentistry, not both
- Combined survey would offer flexibility

Methods
- Rapid Estimate of Adult Literacy in Medicine (REALM) used as base
- Eighteen dental terms identified and added to REALM (84 items total)
- First-time patients at UCLA School of Dentistry participated (n=200)

Results
- REALM-D showed good validity and reliability
- Low scores associated with non-white race, low education*, and English as second language* (*interaction)

Conclusions
- REALM-D may be used by both medical and dental clinicians to detect differences in health literacy

Preliminary Study 2: The Influence of Ethnicity on Word Recognition

Background
- *Latino* refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish-speaking national origin
- Persons with such diverse backgrounds might be expected to interpret medical terms differently

Methods
- Combination of interviews and focus groups conducted among Latinos from Mount Pleasant (Washington, DC) (n=124)
- Determine whether ethnicity influenced results on Short Assessment of Health Literacy for Spanish Adults (SAHLSA)

Results
- Understanding of word meaning and usage differed by national origin

Conclusions
- SAHLSA may not be equally reliable across various Latino populations

Preliminary Study 3: A New Conceptual Knowledge Instrument

Background
- Conceptual knowledge not studied in context of oral health literacy
- Knowledge hypothesized as more proximal determinant of health outcomes

Methods
- Oral health-related knowledge items (44 total) developed in four domains (general and disease specific)
- Population-based sample of Baltimore adults participated (n=100)

Results
- Comprehensive Measure of Oral Health Knowledge (CMOHK) (23 items) showed good validity and reliability
- Low scores associated with young age and low education

Conclusions
- CMOHK has potential for studying link between conceptual knowledge and oral health outcomes

Introduction
- Limited health literacy is thought to influence oral health disparities
- Whereas the link between health literacy and general health outcomes is well established, few studies have attempted to identify the relationship between health literacy and oral health

Overview
- Three preliminary studies conducted by our research team served as the basis for our current work
- Our conceptual model depicts the relationship between health literacy and (oral) health outcomes while also defining the influence of intermediate factors (*i.e.*, healthcare decision making) and relevant sociodemographic and healthcare-related covariates

Implications for Research
- Our ongoing research, conducted at multiple sites, will be among the first to explore the links between health literacy and oral health
- Our comprehensive approach to exploring the influences of various health literacy skills, intermediate factors and relevant covariates on oral health will yield valuable results and serve as a model for studying health literacy in both dental and non-dental settings

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