

Health Literacy: It's Time to Take It Seriously! Post Test

1. Health literacy is the ability to read, understand and act on health information to make informed decisions.
T True
F False
2. Health literacy is important to healthcare professionals because of all the following EXCEPT:
A When low literacy individuals finally seek our help, they are usually much sicker than normal literacy individuals.
B Individuals with low literacy are more likely to sue.
C Individuals with low literacy have annual healthcare costs that are four times higher than for those with higher literacy levels.
3. Age is the strongest predictor of an individual's health status.
T True
F False
4. Low functional literacy results in:
A 3 to 6 % greater healthcare expenditures.
B 6% more hospital visits.
C poor health outcomes.
D all of the above.
5. In the 2003 National Assessment of Adult Literacy (NAAL), general literacy was assessed using the following types of literacy:
A Prose, Document, and Comprehension
B Quantitative, Qualitative, and Prose
C Quantitative, Document, and Prose
6. Which person is the most at risk for having low health literacy skills?
A 23 year old Caucasian currently finishing her GED
B 68 year old African American who lives alone in the suburbs
C 18 year old immigrant from China who moved here to attend college
7. All of the following are patient barriers to adequate health communication EXCEPT:
A Less time for teaching
B Lack of understanding of healthcare terms, body systems, and how the healthcare system works
C Increased demands for self-care management
8. Most patient education materials are written at the 8th grade level.
T True
F False
9. Which patient is most likely to have low health literacy?
A The patient whose eyes wander over the page, does not ask any questions, and signs the form without reading the information.
B The elderly patient who asks if she can stop taking her stool softeners.
C The patient who takes 10 different medications per day.

10. Malpractice lawsuits based on poor provider-patient communication usually result from:

- A patients feeling ignored or rushed.
- B inadequate explanation of diagnosis and treatment options
- C discounting or devaluing the patient's and family's views.
- D all of the above

11. Poor health outcomes have been linked to low health literacy. Which of the following outcomes is NOT linked to low health literacy:

- A Low medication compliance rates
- B Poor skills using a metered dose inhaler
- C Poor glycemic control with diabetes and higher rates of complications
- D Knowing how to read a thermometer

12. People with low-literacy skills often have the _____ to develop these skills; they have not had the _____.

- A opportunity, teaching
- B capability, opportunity
- C capability, lessons

13. What is the most important benefit for having clear health communication between practitioner and patient?

- A Less broken appointments
- B More patient recruitment to the practice
- C Better patient/practitioner satisfaction

14. If a person has low literacy, those closest to them are usually aware of the problem and can help with his/her reading skills.

- T True
- F False

15. In the 2003 NAAL study, the results for health literacy of American Adults included all of the following EXCEPT:

- A The majority of adults had intermediate health literacy.
- B Women had higher average health literacy than men.
- C A lower percentage of adults with below basic and basic health literacy received health information from radio and TV.
- D With each increasing level of health literacy, a higher percentage of adults got health information from family members, friends, and co-workers.

16. The segments of our population that are _____ most rapidly are those with the most _____ reading skills.

- A increasing, proficient
- B increasing, limited
- C decreasing, limited

17. Healthcare organizations can better meet the needs of those with low health literacy by implementing all of the following EXCEPT:

- A assessing the current status of health communications in the organization.
- B hiring interpreters for those with English as a second language.
- C identifying barriers in promotion and publicity, print and electronic materials, verbal

communication, and staff sensitivity to literacy issues.

D Writing policies and procedures for developing and evaluating health information materials.

18. To adequately participate in one's own healthcare, you must have health literacy skills in:

A understanding, interpreting, and analyzing health information.

B locating and evaluating health information for quality and credibility.

C navigating the healthcare system.

D understanding and giving consent to medical treatments.

E all of the above

19. In addition to reading and understanding words, a person must accurately interpret what they have read to be able to use health information.

T True

F False

20. Populations who are at risk for low literacy include the elderly, people with disabilities, minorities, and those with a GED education.

T. True

F. False