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Do plan members actually understand the health information they hear, watch, and read? The answer may surprise you. And it’s worth investigating because to motivate behaviour change—and ensure plan members can effectively assess whether information is accurate and based on scientific evidence—we need to address the often misunderstood issue of health literacy.

Demystifying health literacy

Just when you thought behaviour change couldn’t get more complicated, brace yourself, there’s more to consider regarding your helping-plan-members-get-healthy strategy. It’s not enough for plan members to just listen to their health care professionals, or just watch a health-related video, or just read health information, they also need to understand it—and ideally, take action. This gets at the often misunderstood issue of health literacy.

“Misunderstood” is often the case because plan members who have a high level of general literacy may still have poor health literacy. In fact, although you may consider yourself highly literate, you may have poor health literacy in certain situations because health literacy can vary by context. Health literacy is not necessarily related to variables like general reading ability, education, or income. In fact, experts explain that “nearly nine out of 10 adults have difficulty using the everyday health information that is routinely available in our health care facilities, retail outlets, media, and communities.”

Not only is addressing health literacy key to motivating behaviour change, but it also helps ensure that plan members can effectively assess health information for accuracy, quality, and scientific basis. For instance, to pick on Gwyneth Paltrow for a moment (why not, it seems like the thing to do these days), do we really want our plan members to follow her detox and cleanse recipes that can easily run $400 to $500 a pop complete with no scientific evidence? Hopefully, wasting money is the only serious side-effect of buying into Gwyneth’s concoctions, however, the negative consequences of poor health literacy can be serious and far reaching. (Don’t get us started on Jenny McCarthy…!)

Poor health literacy = Poor health

People with poor health literacy typically have worse health outcomes than those with adequate health literacy. In fact, people with poor health literacy are more likely to have chronic conditions, and they are less able to effectively manage them. Some of the common themes in the research are that people with poor health literacy are:

- **Less adherent to medications because they have difficulty following the instructions:** Inability to understand medication instructions or labels often leads to under-doses, overdoses, and inappropriate mixing of both prescription and over-the-counter drugs. In addition, numerous workplace and home accidents are due to difficulties in successfully following safety information.
→ **Less able to successfully navigate the health care system:** Poor health literacy can affect the ability to find the right kind of health care professionals and to share personal health information with them. Poor health literacy also makes it difficult to complete paperwork like the necessary intake forms upon referral to various health professionals.

→ **At higher risk for hospitalization:** Studies show a higher rate of hospitalization and use of emergency services among people with poor health literacy, which of course translates into higher costs.

→ **Less likely to pursue preventive health services:** People with poor health literacy make more use of health services for treating complications of disease and less use of health services to prevent health issues, for instance, they are more likely to skip preventive measures like mammograms, Pap smears, and flu shots.

Obviously, addressing health literacy is key to helping plan members improve their health. And keeping health literacy top of mind will help all plan members regardless of their level of general literacy because health literacy levels are not set in stone.

### Health literacy is a moving target

Health literacy may vary from plan member to plan member—and may vary depending on the context—because a number of variables can have an impact:

→ **Rising workforce diversity:** A growing proportion of today's workforce has a first language that is not English. It is also the first time in history that we have four generations all in the workforce at the same time. And there is increased emphasis on accessibility and employee accommodations in the workplace.

→ **Health topics are inherently complicated:** Complexity is just the nature of the health-information beast. Health topics are also constantly evolving due to new scientific findings. And of course, there is the ever-dreaded “med-speak”—the unfamiliar medical jargon and insider information that often creeps into health discussions and written information.

→ **Complicated health care system:** Navigating the health care system typically includes a myriad of phone calls, in-person visits, and various instructions, forms, and pamphlets. It also typically involves interacting with different types of health care professionals who may all have a different perspective on the issues at hand.

→ **In-the-moment reporting:** Have you ever noticed that one day caffeine—or red wine or chocolate—is in the healthy good books and the next day it’s out? Whether online, on television, or in newspaper articles, the sheer volume of information and the speed at which it becomes old news, seems to fuel this kind of reporting where information is often presented as “fact,” but it’s not necessarily based on what would be considered scientific evidence.

→ **The internet:** With the internet as today’s number-one go-to place for health information, the Oxford Dictionary now includes the word *cyberchondriac:* “a person who compulsively searches the internet for information on real or imagined symptoms of illness.” However, due to lack of regulation, the internet represents a minefield of potential issues: trusting inaccurate or misleading information, making important health decisions based on sensationalized or emotionally-charged information, adopting unscientific health practices, and accepting information just because it provides a sense of control or hope.
The fact that your plan members’ health literacy may fluctuate—sometimes high and sometimes low—an essential strategy to addressing health literacy is to focus on clarity. For plan members with low health literacy, clear health information is essential so they are not only able to easily listen, watch or read it, but also understand it, and (hopefully) act on it. For plan members with high health literacy, they appreciate clear health information because it’s quickly engaging and easy to act on—no hassles.

Clarity is king

You can bring the language of clarity to your health information in the following ways:

→ **Savvy marketing techniques:** If aliens land and observe the phenomenon of celebrity-as-health-expert, they are sure to beam right back up writing us off as not worth the time travel. However, with celebrity endorsements bringing in astronomical revenues it’s not just fringe-type buyers; it’s anybody and everybody—it’s people just like your plan members. As the author of the book *Is Gwyneth Paltrow Wrong About Everything?* advises: “Cleanse your system of all the pseudo-science babble that flows from many celebrities, celebrity physicians and the diet industry.”

So why do otherwise seemingly rational people (like plan members) throw all sense out the window and buy health products endorsed by celebrities who often have no medical training, no medical credentials, and in fact, often no medical knowledge whatsoever, or equally scary, misguided knowledge?

…Think Jenny McCarthy and anti-vaccination advice, Kim Kardashian and weight loss products, and Suzanne Somers and just about any health topic that sells books.

Theories abound as to why celebrity sells: we’re just gullible …we’re trying to live vicariously through the product …we think buying celebrity-endorsed products provides a peek into celebrity lives.

Although there is no definitive answer, the emerging field of behavioural economics offers some additional insight—that it’s all about emotional connection. Basically, we transfer our positive feelings about celebrities to the products they endorse. Looks like love really is blind—blind to the need for scientific evidence.

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→ **Be clear on who you are communicating to:** Increasing diversity in the workplace makes it more important than ever to tailor your communication approach to appeal to specific subsets of your plan member group. If limited English proficiency is an issue, then podcasts and video may be your best approach. For your 20-something plan members, websites and apps may be the way to go. By contrast, your 60-something plan members may prefer in-person meetings and hard-copy information.

→ **Be clear about the sources of plan member health information:** No matter where your plan member health information comes from—maybe via your health benefits provider or your EAP—make sure they only use credible sources. Whether hard-copy information, websites, or other online formats, check for credible sources like peer-reviewed and well-established medical and scientific journals (like the Canadian Medical Association Journal—CMAJ), government institutions (like Health Canada), and legitimate health associations (like the Canadian Cancer Society).
→ **Be clear on the language in plan member health information:** Clear language writing—also known as plain English writing—uses a range of writing techniques focusing on clarity to enhance reading ease and understanding. And there isn’t anything plain about plain language—just because it’s clear doesn’t mean it has to be overly simple or dull. Make sure whoever supplies your plan member health information incorporates clear language writing techniques like using familiar words, explaining technical terms, adding descriptions and examples, and using visuals to complement words.

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**We really do try to practice what we preach!**

We put Change4Life to the test…

With the whole impetus behind Change4Life being to motivate behaviour change, we developed the portal and supporting educational materials with a keen eye on health literacy. We’ve tried to appeal to all kinds of plan members through a mix of online and hard-copy materials.

…and of course, we’re all about using familiar language and being as engaging as possible—no medical jargon in sight, and wherever possible, written information is complemented by infographics, videos, and other visuals. Plus, we probably need not mention, of course it’s all about the scientific evidence.

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**Now you’re speaking (and writing, and broadcasting) their language!**

When you address health literacy you give plan members’ potential for behaviour change a major boost.

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Sources:


The future just got brighter for those most in need…

33 grant recipients receive critical funding

As the Canadian Mental Association explains, “the biggest barrier to good health is poverty.”

It’s a fact: marginalized people face numerous significant challenges in accessing health care. That’s where our Community Giving Program (CGP) comes in. Our CGP provides critical funding to community-based not-for-profit organizations that deliver frontline care to Canada’s underinsured and uninsured populations. Take a look over the next several months: we’ll be profiling how CGP funding is helping this year’s 33 grant recipients make a difference across Canada.

Frontline care in action in the Region of Peel

The Region of Peel, located west and northwest of Toronto, is rapidly growing with a population from hundreds of different origins speaking numerous different languages. Here’s how two of our CGP grant recipients are helping those most vulnerable throughout the region:

Spectra Community Support Services—Every Call Answered

The “Every Call Answered” program is a free telephone helpline available in eight languages. Trained staff and volunteers provide non-judgmental, kind, caring, empathetic support to all callers who may be experiencing physical or psychological health issues, relationship problems, social isolation, loss, postpartum-related issues, stress, or abuse. In addition to supportive listeners, as navigators, they refer callers to other types of support and information. Funding from GSC will enable the program to embark on a comprehensive marketing strategy to raise awareness of the helpline to the public. This includes developing marketing materials in the eight helpline languages, which should make promotional activities especially effective. See how the helpline is making a difference by visiting their website at www.spectrahelpline.org, Facebook: http://www.facebook.com/SpectraSupport, Twitter: https://twitter.com/spectrasupport, and LinkedIn: https://www.linkedin.com/company/spectra-community-support-services

Vita Manor—Vita Centre Health Connection

Vita Manor provides support, education, and counselling for people 15 to 30 years old throughout the Region of Peel who are pregnant or young parents; most clients are either living in poverty or on the cusp of poverty. A variety of free programs focus on parenting and life skills with one-on-one counseling integral to the support services. As navigators, the counsellors refer clients to resources related to physical and psychological health, as well as addictions, violence, poverty, housing, and stigmatization due to age, race, or culture. Funding from GSC will enable the Manor to more fully develop their navigator activities by establishing the Vita Centre Health Connection. The goal of the Health Connection is to help clients determine what their health care needs and goals are and then to help them address them through referrals to appropriate care. Keep up to date as the Health Connection comes to life by visiting the Manor’s website at http://www.vitamanor.org/, Facebook: https://www.facebook.com/pages/Vita-Centre/120216661391771, and Twitter: https://twitter.com/VitaCentre

1 To improve health, tackle poverty: CMA report, Pat Rich, July 30, 2013, Canadian Medical Association website, retrieved August 2015: https://www.cma.ca/En/Pages/To-improve-health-tackle-poverty-CMA-report.aspx
PROVINCIAL COVERAGE EXPANDS FOR NEW HEPATITIS C DRUG HOLKIRA PAK

Provincial coverage for the hepatitis C drug Holkira Pak continues to grow. The provinces of British Columbia, Saskatchewan, Manitoba, Ontario, Nova Scotia, and Quebec, as well as the Yukon territory, have all announced that their formularies will cover Holkira Pak.

When compared to other options, new hepatitis C drugs—like Holkira Pak, Harvoni, Sovaldi—not only have a cure rate of 90% or greater, but they also have fewer side-effects and shorter treatment times. For example, for some patients, Holkira Pak delivers a 93-99% cure rate.

What does this mean for your plan? These ground-breaking hepatitis C drugs are expensive, however, for your plan members they may be life-savers. To help contain costs, GSC will coordinate with the provincial plans wherever possible.

Keep an eye out for the fall 2015 edition of Follow the Script™ when we will be providing additional information about the new hepatitis C drugs plus an update of other high-cost drugs you’ll be hearing about soon.

GOODBYE SUMMER… HELLO WINTER HOLIDAY!

With the last of the summer long weekends soon to be in the rear-view mirror, plan members need something to look forward to! Encourage them to plan ahead for their winter holiday because the effect of the weak Canadian dollar continues to be widespread—including travel insurance rates. The best way to avoid sticker shock later as the winter months roll in, is by getting holiday plans in place now including travel insurance. And remember, travel insurance is just as important when traveling within Canada to avoid another kind of shock—the shock that not all out-of-province expenses may be covered by your plan member’s home province plan.

ONLINE SERVICES—FOR HEALTH CARE PROVIDERS—ENTER NEW AND IMPROVED TERRITORY

Enhancing the effectiveness and efficiency of how our health care providers work leads to enhanced service delivery all ‘round—everyone wins: health care providers, plan sponsors, and plan members. To figure out what potential enhancements to focus on, we asked our health care providers directly—they answered and we listened! They gave us a number of suggestions that they felt would help make their lives easier and more productive. We’re all for that, so this fall our provider online services—known as providerConnect™—will include enhanced capabilities like:

- Easier online management: New health care providers will find the registration and application process a breeze; current health care providers will have access to new functions like updating their profile and keeping up to date on changes via a “What’s New” page.

- Simplified claims submission: No matter what type of health care provider, there is something in the works to make their lives easier and more productive—like the ability to submit claims in a snap (or at least just a couple of clicks).

And there’s one other change on the horizon. As of October 1, health care providers will have a choice to opt for payment in a monthly cheque via snail mail or convenient bi-weekly direct deposits—now that’s fast payment.

All coming soon!
Winner of the draw for an iPad mini

Congratulations to L. Diet, of Windsor, Ontario, the winner of our monthly draw for an iPad mini. Through this contest, one name will be drawn each month from plan members who have registered for Plan Member Online Services for that month.

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