



Expert Recommendations for Health Literacy Policies addressing Children and Adolescents

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Project Background



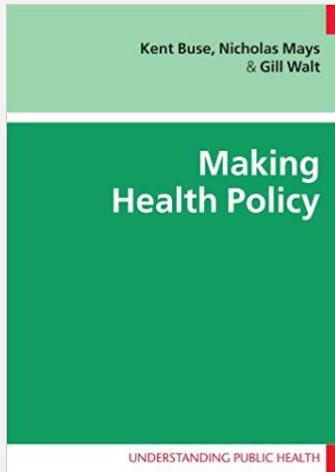
Goal

Development of recommendations and best practices for health literacy policies in childhood and adolescence

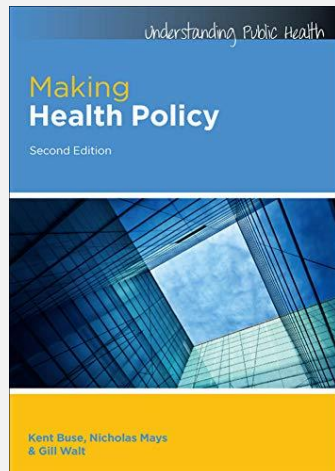
Methods and workplan

- | | | |
|--------|-----------------------------------------------------------|---------------------------------------------------------------------------------------|
| Step 1 | Literature analysis and expert consultation | |
| Step 2 | Expert interviews with health and education policy makers |  |
| Step 3 | Qualitative data analysis |  |
| Step 4 | Delphi study, synthesis, and best practices | |
| Step 5 | Policy dialogues, advocacy and dissemination | |

Definition of Policy

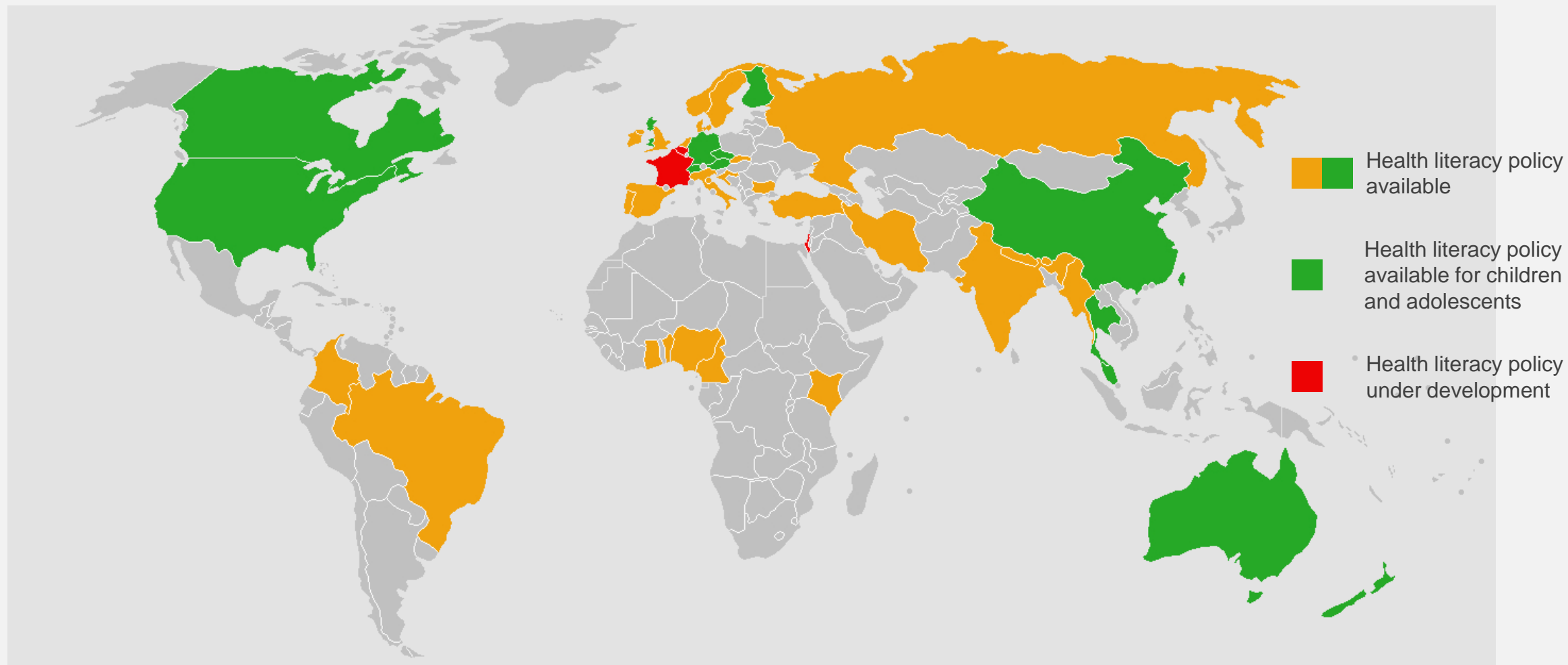


“Decisions taken by those with responsibility for a particular policy area.” (Buse et al, 2005)

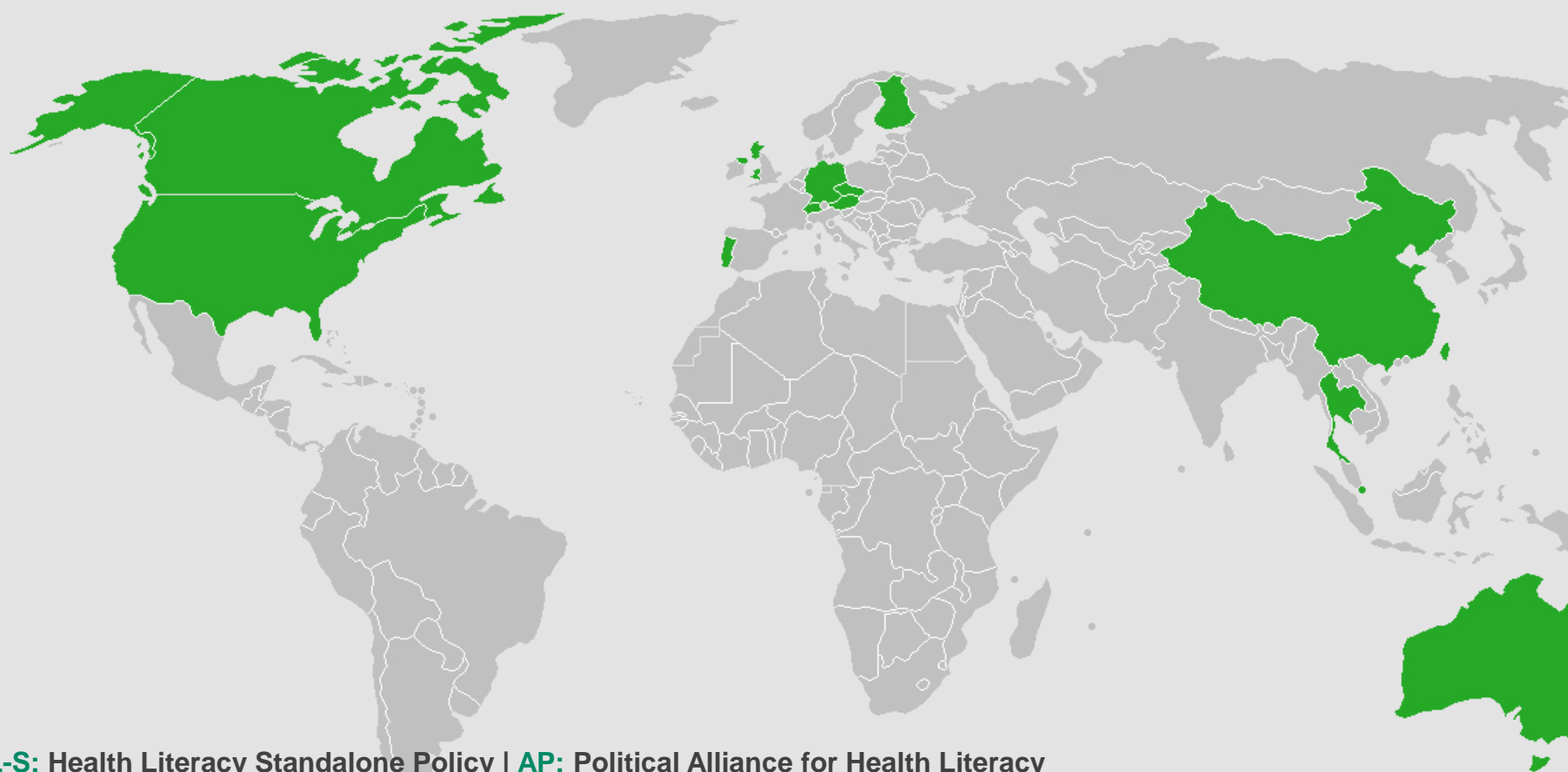


“Broad statement of goals, objectives and means that create the framework for activity. Often takes the form of explicit written documents, but may also be implicit or unwritten.”
(updated definition by Buse et al, 2012)

Results Literature Analysis and Expert Consultation



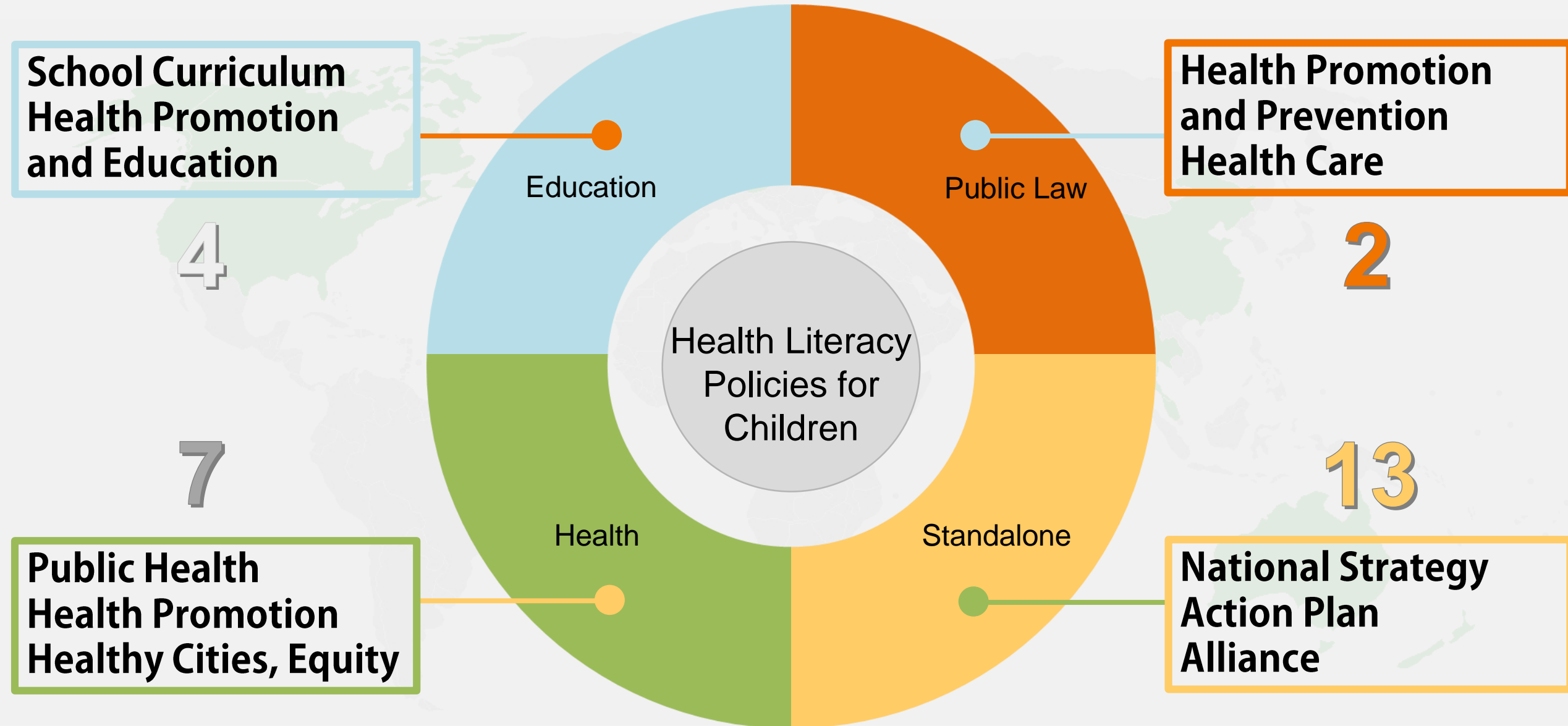
Results Literature Analysis and Expert Consultation: 26 Policies in 18 countries



2019	Portugal, HL-S
2018	Germany, AP Thailand, Heal-S
2017	Czech Republic, HL-S Germany, HL-S
2016	Taiwan, Heal-S [2017]
2015	Singapore, HL-S New Zealand, HL-S Portugal, Edu-S Germany, Law
2014	Australia, HL-S Finland, Edu-S [2016] Scotland, HL-S [2017] Northern Ireland, Heal-S
2012	Australia, Edu-S Thailand, AP
2011	Austria, Heal-S [2017] Wales, Heal-S Tasmania, AP [2014]
2010	U.S. HL-S & Law Switzerland, HL-S [2016]
2009	Australia, Heal-S
2008	China, HL-S Canada, PR [2011]
1995	United States, Edu-S

HL-S: Health Literacy Standalone Policy | **AP:** Political Alliance for Health Literacy
Heal-S: Health Policy with Health Literacy | **Edu-S:** Educational Health Literacy Policy
Law: A Law that includes Health Literacy | **PR:** Policy Report

26 Policies in 18 countries



Expert Interviews with Health and Education Policy Makers

Interview guide and structured interviews

Questions in seven areas, including sub-questions

Recruitment by email and via policy networks

Interview language: Mostly English, five interviews in German

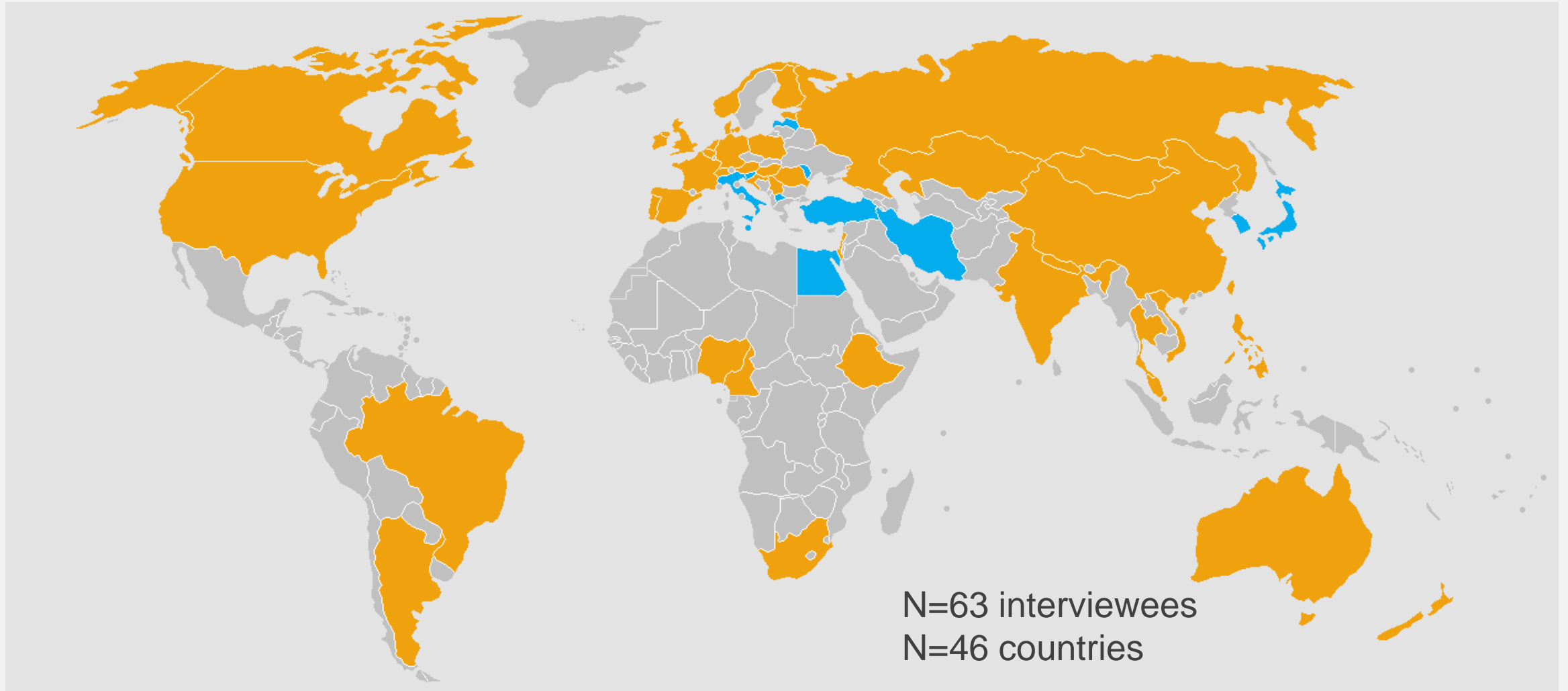
N=63 interviewees in N=46 countries

Qualitative data analysis (based on Hsieh and Shannon, 2005)

12k code lines, ~500 codings in 36 codes



Expert Interviews with Health and Education Policy Makers



Expert Interviews: Interview Guide and Code System

Q1 – Role / Background	What is your role in general, and do you have any background in health literacy-related policy work?
Q2 – Health literacy	What is health literacy regarding children (1) in your perspective and (2) in your country's perspective?
Q3 – Health literacy policies	Are there any health literacy policies in your country that address or refer to children?
Q4 – Enabling factors and processes	What factors might contribute to place health literacy of children and adolescents on the policy agenda, and how could health literacy be addressed in education and schools?
Q5 – Hindering factors and processes	What factors are barriers for the uptake of health literacy in policy-making?
Q6 – Stakeholder	Who is responsible in terms of policy-making, leadership and governance in your country related to health literacy in children and adolescents?
Q7 – Recommendation	Open answer...

Codesystem	534
Recommendations - Empfehlungen	0
Be careful about unintended side effects	1
Make the children's plan coherent to the adult plan	3
Focus on critical competencies	1
Policy as holistic life span approach adults and children	1
Children have the right	1
Identify gaps	1
Showcase that HL can be applied to any health related topic	2
Transfer	2
Embedd HL into existing intervention approaches (synergies)	3
Professionals and Capacity Building	42
Interventions	1
Target group specific	19
Knowledge and HL	1
Health Sector	1
Media (digital stakeholders, Social Media, Internet)	4
Define realistic and achievable goals	2
Define HL precisely	7
Monitoring	8
Research	22
Need for more practical examples	1
Start early	5
Make HL understandable, easy to comprehend	18
Free access to health services	1
Early Childhood kindergarten - address health literacy	2
Evidence-based information, knowledge and messages	2
Participation, Involvement, Inclusion	54
Less fragmentation	2
Create independent structures / infrastructure / capacities	2
Inclusion	1
Funding and resources	22
Health equity	23
Setting Approach	13
Cooperationen and collaboration between the different actors	39
Benefit / Cobenefit for sector and systems (clarify/highlight)	6
Policy, Politi, Politics and Governance	98
Schools and Education	123
Sets	0

Expert Interviews: Interview Guide

Q7: Recommendation – Open Answer

“Well, I think the concept needs to be clearly stated in a way that can be eventually measured and monitored in/ at the school level. What are the student outputs in health literacy that are truly basic and achievable by all students in different contexts? (...) we can offer to schools that kind of clarity about what can be achieved and how it can be measured and monitored. (...) health literacy is still vague and still being explored in different ways/ you know, productive ways, and lots of theories and models and so on.” [Interview_3_LL_38]

Clear definition of health literacy for it to be measurable at school level

Defining outputs on the action level

“So, in all of MY experience in government and, of course, political systems vary from country to country, but in the countries that I'm more familiar with my first response is that I'm not sure/ Sorry, I'll reframe that: I will always try to work/ I would use the expression working with the grain.” [Interview_17_LL_44]

Working with the target group, using a grass roots approach (bottom up and participation)

Expert Interviews: Interview Guide

Q7: Recommendation – Open Answer

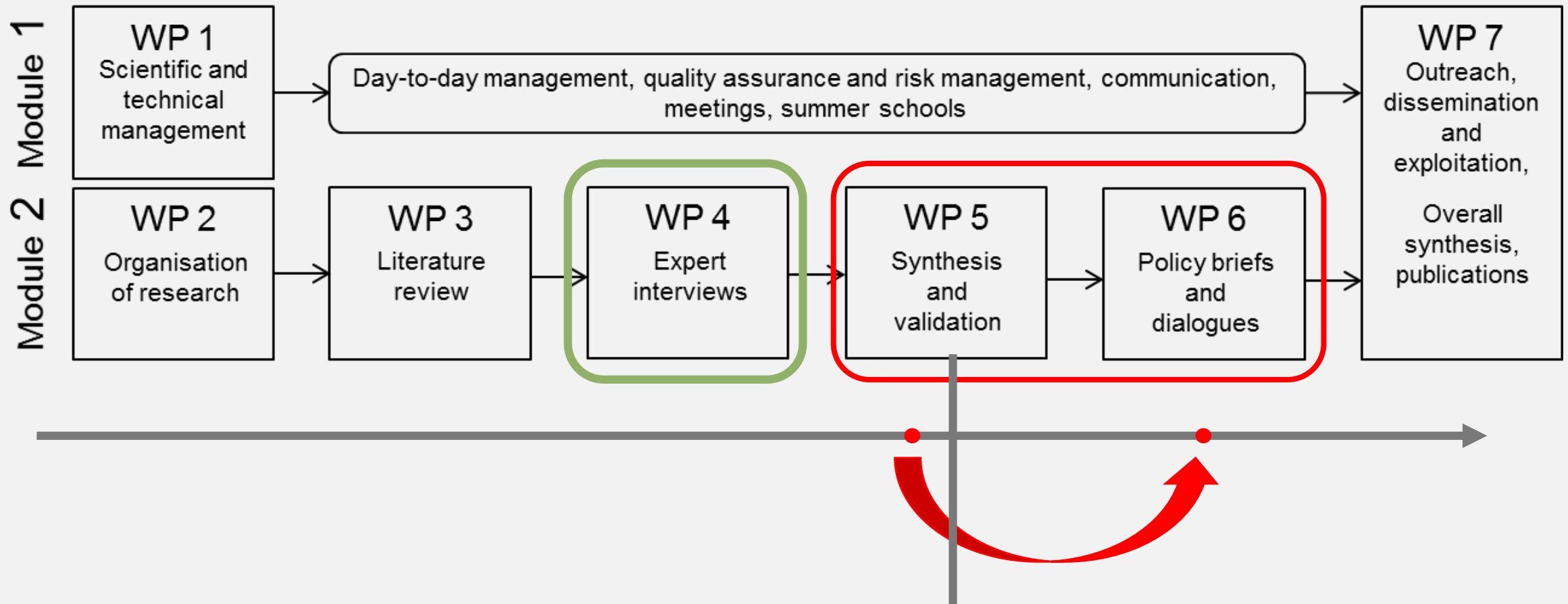
*“What we need is another policy on health literacy, I would start by saying: **You HAVE this existing policy on personal, social and health education.** (...) It's always tempting to want to promote a new policy whereas my experience is: If ACTUALLY want change to occur and for it to be sustainable it's always better to work with what's in place rather than try to invent something new.” [Interview_17_LL_46]*

Use policies that are already in place and try to build in health literacy rather than developing a new policy

*“So, I would be saying instead of: “You need to do one more new thing”, I would be saying: **“You're already doing this great work and what I am proposing will enhance, accelerate, extend the effectiveness of that work.”** [Interview_17_LL_46]*

Appreciate the good work already been done and try to show intersections with and benefits of health literacy for the education work

Expert Interviews with Health and Education Policy Makers: “The Corona Incident”



This is where we were at when corona struck.



Thank you for your attention

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