

Health Literacy Needs of Patients with COPD

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Health Literacy and COPD

Health literacy: characteristics and social resources people require to access, understand and use information to make effective decisions about their health and health care

Chronic Obstructive Pulmonary Disease (COPD): chronic lung disease characterized by shortness of breath and activity limitation

Lower health literacy is associated with poorer health outcomes in patients with COPD

Higher quality of life is associated with higher health literacy.

Goals of this project:

1. Determine the baseline health literacy needs of patients with COPD
2. Determine associations between health literacy and quality of life

OPHELIA Approach

Optimising HEalth Literacy and Access (OPHELIA) approach:

- **Mixed-methods** and **patient-oriented** methodology
- guides **identification of health literacy issues** unique to a specific setting
- supports development and implementation of relevant solutions

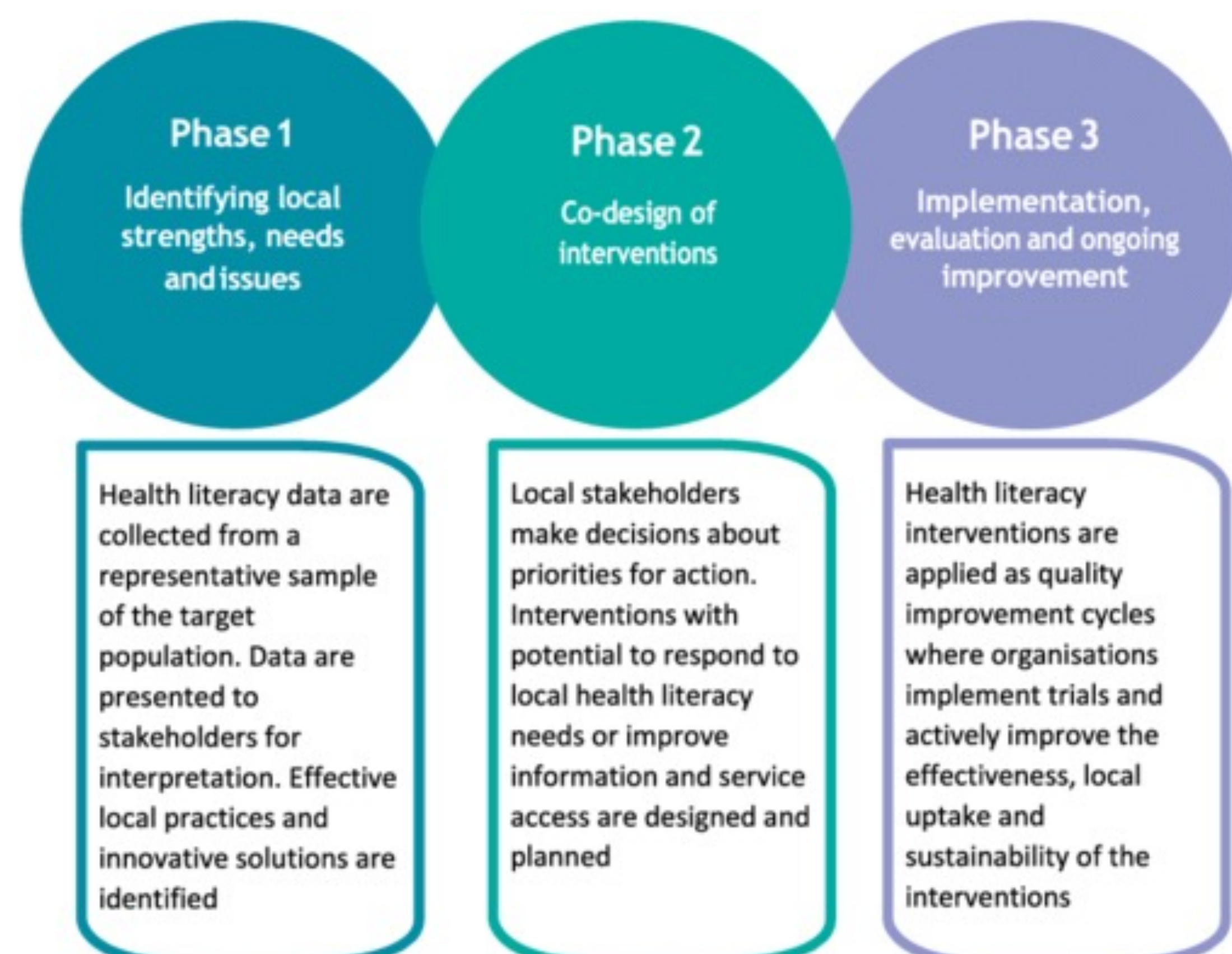


Fig. 1 Phases of the OPHELIA Approach

Quantitative Data Collection

100 participants age 40 years and older:

- spirometry-confirmed COPD
- Saskatoon outpatient respirology clinics

Health literacy needs will be assessed using the Health Literacy Questionnaire (HLQ): consists of 44 items condensed into nine scales, resulting in a health literacy profile of a population

Addition survey tools: WHO-5 questionnaire, COPD Assessment Test, Chronic Disease Self-Efficacy Scale, and the EQ-5D



Fig. 2 The nine scales of the Health Literacy Questionnaire (HLQ)

Qualitative Data Collection

- seeks to more deeply understand patients' experiences while managing chronic health conditions
- further elaborate on information collected through the quantitative arm of the study
- **25 survey respondents** will be invited to participate in a semi-structured interview

Data Analysis

- **Summary scores** for each of the nine subscales of the HLQ will be calculated for each individual, and for the sample population as a whole
- **Descriptive analysis and comparisons** will be used to explore the distributional properties of the quantitative survey data
- **Cluster analysis** will be performed to determine underlying sub-groups of patients
- **Regression** equations will be built for each of the nine HLQ scales
- Qualitative data from the interviews will be **thematically** analyzed using NVIVO software

Knowledge Translation Plans

By developing a more complete understanding of the health literacy assets and challenges among different subsets of these patient populations, we expect to develop targeted strategies that address needs in age-appropriate and scalable ways:

- **patient vignettes** will be created to enhance health care provider education and support patient advocacy
- **improved patient-oriented strategies and practices** that enhance health literacy and outcomes for patients with COPD

References

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