At a Glance

- An individual’s health literacy depends on various factors, such as education, culture, and complexity of the information.
- Oncology nurses are in a unique position to role model and apply best practices for health literacy using evidence-based oral and written communication strategies with their patients.
- Implementing the fundamentals of universal precautions and the teach-back method are effective deterrents to the negative outcomes associated with low health literacy.

Scope of the Problem

The U.S. Department of Education assesses health literacy using the National Assessment of Adult Literacy (NAAL) (National Center for Education Statistics, n.d.-c). Capturing a nationally representative assessment of English literacy among American adults aged 16 years or older, the NAAL project has been collecting data since 1992. In 2003, changes were made to the data collection to specifically measure health literacy. These changes allowed the data to demonstrate differences between the ability to read in general and the ability to read and apply health information. NAAL added three different health-related categories of tasks to help quantify health literacy: clinical, prevention, and navigation (National Center for Education Statistics, n.d.-b). Questions assess the participant’s ability to fill out a patient form or read a drug label (clinical tasks), understand the need for preventive health services (prevention), and