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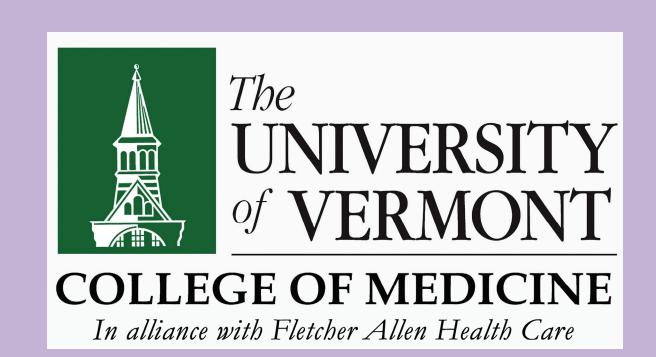
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# BARRIERS TO HEALTH LITERACY AND COMPETENCY Participatory Education in the Champlain Valley Head Start Program



Alyssa Bennett, Kenneth Christian, Rosamund Davis, Vanessa Hui, Jessie Janowski, Elizabeth Lycett, Christopher Randall, Michael Salmela with Melissa Barrett and Christa Zehle, MD

## Background

for many years<sup>1</sup>. Several barriers to achieving higher levels of health literacy have been identified and specific methods to overcome these have been applied:

- Role-playing has been shown to be an effective way to communicate ideas, creating audience participation and learner empowerment<sup>2</sup>.
- Pictographs, simple drawings depicting stories or principles, have also been used to make health information more comprehendible<sup>3</sup>.
- Non-written forms of communication have been especially useful in overcoming language barriers<sup>2</sup>.
- A recent Harvard study demonstrated the ability to increase health literacy in low-income populations. Over a three-year period, educational posters and pamphlets were placed in primary care offices throughout Massachusetts. Assessment surveys were mailed to participants before and after the trial. An increase in health competency was most significant in low-income populations<sup>4</sup>.

: These studies formed the foundation for our current : • work, which sought to improve health literacy among parents of the Chittenden County Head Start A paired Student's t-test was used to assess Program. This is a nationally-funded program significance. dedicated to providing free, comprehensive health, nutrition, and social services to families with preschool children (ages three to five). Participants in the Head Start Program must have low-income to be : eligible.

#### Methods

Poor health literacy has impeded public health efforts Two one-hour educational sessions were held on two : separate days. Prior to the sessions, the Head Start : program distributed a survey to parents to determine health topics of interest to them. "How to keep colds and Iflu away" and "Quick, Inexpensive and Healthy Meals" were selected as the focus for the two sessions, based on parent interest as indicated on the returned surveys.

> Sessions were held at 6:00 p.m. in the Burlington Children's Space in Vermont.

Incentives for attendance:

- Free dinner
- Childcare
- Gift cards to local grocer
- First-aid materials (band-aids, thermometers)

Session schedule included:

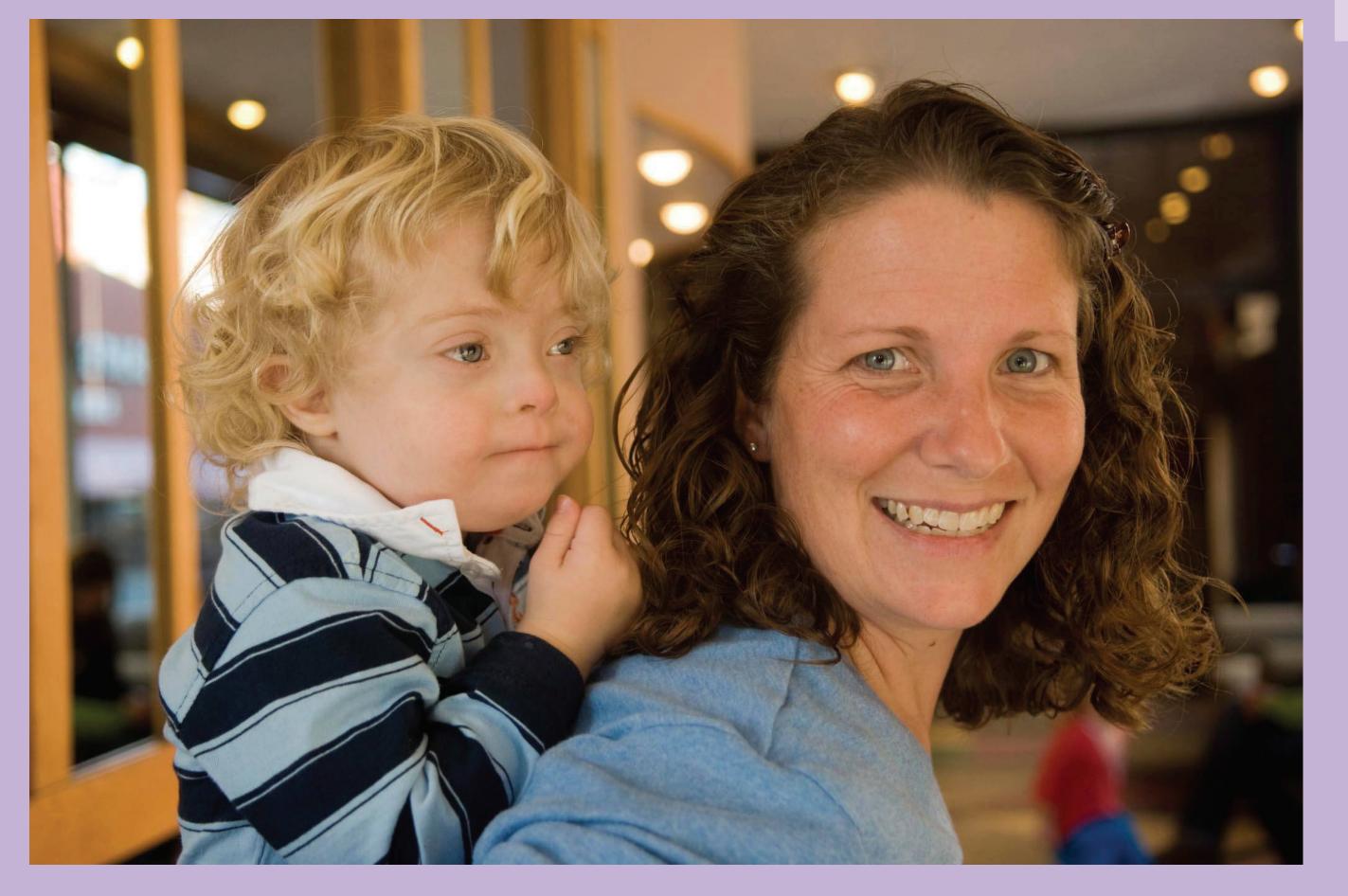
- Pre session test to gauge topic knowledge:
  - Ten true or false questions
  - Presented on paper and orally
- A Participatory discussion
- Educational module using pictographs, games and
- Post test in the same format as the pre session test

#### Results

- Nine individuals completed the pre-test, with seven individuals completing both tests
- Pre-session test scores had a mean of 8.57 out of 10
- Post-session test scores had a mean of 9.14 out of 10:
- Difference of the mean scores was an increase of 0.57 questions correct, with a *p*-value of 0.17

#### Healthy Eating: Tips for Picky Eaters and A Guide to Eating Well

1.	At least half of the grains I eat each day should be whole grains.	TRUE	FALSE
2.	A serving size is always the size of the package or bottle that the food comes in.	TRUE	FALSE
3.	Most adults should consume between 2000 and 2500 calories per day.	TRUE	FALSE
4.	I should offer my picky eater 2 choices to set limits.	TRUE	FALSE
5.	My children can drink as much juice as they want per day.	TRUE	FALSE
6.	Good nutrition can help my children learn better.	TRUE	FALSE
7.	The best drinks to give your children are water and low fat milk.	TRUE	FALSE
8.	A picky eater should be allowed to eat whenever they are hungry.	TRUE	FALSE
9.	Eating too many calories can cause heart disease.	TRUE	FALSE
10.	Trans fats are good for me.	TRUE	FALSE



## Conclusions

Test scores tended to increase following the educational sessions. Further study will be necessary to achieve conclusive results regarding the effectiveness of the training programs employed by this work.

Limitations to the study include:

- Limited transportation
- Difficult weather conditions
- Proximity to holidays

Each of these factors may have contributed to low attendance at the training sessions.

One of the goals of this project was to develop presentations that would be utilized in future educational sessions conducted by members of the Head Start staff. Staff are required to hold quarterly meetings with the parents to address issues pertinent to the care and well-being of their children. Staff members were encouraged to attend the educational sessions, and all learning materials were presented to the program following the completion of the project.

## References

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