



## **The National Academies of Practice Health Literacy Position Statement**

### **Background & Significance:**

Over the past 30 years, health literacy has been defined in ways that encourage people to actively learn and use information to make informed healthcare decisions (Healthy People 2030; Pinheiro, 2021). More recently, definitions of health literacy have broadened to include three distinct components: personal, organizational, and digital health literacy. Personal health literacy is the extent to which individuals use information to inform their healthcare actions, while organizational health literacy is the extent to which healthcare organizations provide information to inform individual healthcare decisions (Healthy People 2030). Digital health literacy is the ability to find, understand, and use online health information, which is crucial as patients use digital tools to manage their care (van der Vaart & Drossaert, 2017). The relationship between health literacy and digital health literacy and how these impact health outcomes has been documented (Ban, Kim & Seomun, 2024; Siedel, Cortes, & Chong, 2023). As healthcare practices evolve, interprofessional teams should develop integrated approaches to improve health literacy among the groups they serve. As digital technologies continue to advance, asynchronous communication with the entire health care team using various digital health literacy tools will become increasingly important. By improving health literacy, health outcomes caused by gaps in health literacy may be impacted (Healthy People 2030; Milken, 2022; Santana et al., 2021; Sørensen, 2024; WHO, 2024).

Improving health literacy is a critical step that leads to better health outcomes through increased patient engagement, adherence to treatment plans, and informed decision-making (Berkman et al., 2011; Henna & Bo, 2017; McDonald & Shenkman, 2018; Meherali, Punjani & Mevawala, 2020). People with higher health literacy are more likely to understand health information, communicate effectively with healthcare providers, and navigate complex healthcare systems (Nutbeam, 2021; Yuen, Winter, Savira, Huggins et. al. 2024). Interprofessional organizational health literacy supports positive outcomes by providing

accessible, understandable information. This helps people make informed health-related decisions and act (Kaper, Sixsmith, Reijneveld & Winter, 2021). These efforts can reduce hospital readmissions, improve chronic disease management, and decrease healthcare costs, contributing to overall improved health equity (Milken, 2022; WHO, 2024).

### **Position Statement:**

The National Academies of Practice (NAP) recognizes that health literacy is a multifaceted concept encompassing personal, organizational, and digital health literacy, as well as numeracy and other forms of literacy that influence an individual's ability to access, understand, and use health information. These various dimensions of literacy are interconnected and collectively impact health decision-making, communication with healthcare providers, and the ability to navigate complex healthcare systems. Therefore, we use the term health literacy as an inclusive framework that addresses these diverse but interrelated areas.

NAP believes that achieving affordable, accessible, and coordinated quality healthcare for all individuals is possible through improved health literacy. When individuals possess strong health literacy skills, they are better equipped to understand medical information, follow treatment plans, manage chronic conditions, and engage in shared decision-making with the interprofessional healthcare team. At the same time, healthcare organizations play a critical role in fostering environments that support clear communication, patient education, and equitable access to health information.

Importantly, NAP recognizes that individuals with communication disabilities, including hearing, speech, and language impairments, may experience significant barriers to health literacy. Accessible communication strategies and accommodations are essential to ensuring that individuals with communication disabilities can access, understand, and use health information effectively. Health literacy efforts must be intentionally inclusive of these needs to promote equitable health outcomes.

We acknowledge that health literacy is not solely an individual responsibility but also a systemic issue that requires the commitment of healthcare professionals, educators, policymakers, and organizations. Strengthening health literacy at all levels—personal, community, and institutional—can help reduce health disparities, improve patient outcomes, and enhance the overall efficiency of healthcare delivery.

NAP encourages its members to support and implement the recommendations in the following section. These recommendations aim to advance health literacy, provide practical strategies and guidelines for healthcare professionals, organizations, and policymakers to implement health literacy strategies, and create toolkits and resources to support health literacy initiatives. By working together across disciplines, we can create a more inclusive and equitable healthcare system where individuals are empowered with the knowledge and skills needed to make informed health decisions. It is through interprofessional collaborations and active advocacy at federal, state, and local levels that we strive to drive policy changes that strengthen health literacy initiatives.

### **Recommendations:**

Aligning with the National Action Plan to Improve Health Literacy (2020), NAP strongly supports the development and implementation of interprofessional, evidence-informed best practices to enhance health literacy, including:

1. Creating and implementing national, industry, and organizational interprofessional health literacy plans.
2. Developing interprofessional networks, partnerships, and collaborations to implement, monitor and evaluate the goals and outcomes of the established plans.
3. Ensuring the use of a consistent approach to health literacy by applying accessible interprofessional health literacy toolkits, resources, and guides.
4. Committing to further interprofessional health literacy research and dissemination of findings to guide decision-making, policy development, and advocacy efforts.
5. Ensuring that health literacy initiatives intentionally include strategies to address communication disabilities, by promoting accessible communication methods, augmentative supports, and accommodations for individuals with hearing, speech, and language impairments.

## References:

- Ban, S., Kim, Y., & Seomun, G. (2024). Digital health literacy: A concept analysis. *Digital Health*, 10. DOI:10.1177/20552076241287894.
- Berkman, N., Sheridan, S., Donahue, K., Halpern, D., & Crotty K. (2011). Low health literacy and health outcomes: An updated systematic review. *Ann Intern Med*. 55(2), 97-107.
- Health Literacy [Internet]. World Health Organization. Obtained on 12-11-2024 from: <https://www.who.int/news-room/fact-sheets/detail/health-literacy>
- Healthy People 2030 [Internet]. Washington, DC: U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion, Obtained on 12-11-2024 from: <https://odphp.health.gov/healthypeople/priority-areas/health-literacy-healthy-people-2030>.
- Henna, K., & Bo X. (2017). Health literacy in the eHealth era: A systematic review of the literature, *Patient Education and Counseling*, 100(6), 1073-82.  
<https://doi.org/10.1016/j.pec.2017.01.015>.  
(<https://www.sciencedirect.com/science/article/pii/S0738399117300150>)
- Ji, H., Dong, J., Pan, W., & Yingying, Y. (2024). Associations between digital literacy, health literacy, and digital health behaviors among rural residents: evidence from Zhejiang, China. *Int J Equity Health*, 23(68). <https://doi.org/10.1186/s12939-024-02150-2>
- Kaper, M. S., Sixsmith, J., Reijneveld, S. A., & de Winter, A. F. (2021). Outcomes and critical factors for successful implementation of organizational health literacy interventions: A scoping review. *International Journal of Environmental Research and Public Health*, 18(22), 11906. <https://doi.org/10.3390/ijerph182211906>
- McDonald, M., & Shenkman LJ. (2018). Health Literacy and Health Outcomes of adults in the United States: Implications for providers. *The Internet Journal of Allied Health Sciences and Practice*, 16(4), Article 2.
- Meherali, S., Punjani, N., & Mevawala, A. (2020). Health Literacy Interventions to Improve Health Outcomes in Low- and Middle-Income Countries. *Health Literacy Research and Practice*, 4(4), e251–e266. <https://doi.org/10.3928/24748307-20201118-01>
- Milken Institute. *Health Literacy and Its Impact on Public Health*. Published 2022. Accessed [date]. Available from: [Milken Institute Website]
- National Action Plan to Improve Health Literacy | [odphp.health.gov](https://odphp.health.gov). (2020). Health.gov. <https://odphp.health.gov/our-work/national-health-initiatives/health-literacy/national-action-plan-improve-health-literacy>
- Nutbeam D. (2021). Health literacy as a public health goal: a challenge for contemporary health education and communication strategies into the 21st century. *Health Promot Int.*, 36(1):11-15.
- Pinheiro, P. (2021). Conceptualizations of health literacy: Past developments, current trends, and possible ways forward toward social practice. *Health Literacy Research and Practice*, 5(2), e91–e95. <https://doi.org/10.3928/24748307-20210316-01>

Santana, S., Brach, C., Harris, L., Ochiai, E., Blakey, C., Bevington, F., Kleinman, Dushanka, D., & Pronk, N. (2021). Updating health literacy for Healthy People 2030: Defining its importance for a new decade in public health. *Journal of Public Health Management and Practice* 27(Supplement 6), S258-S264. DOI: 10.1097/PHH.0000000000001324.

Seidel, E., Cortes, T., & Chong C. (2023). Digital Health Literacy. Agency for Healthcare Research and Quality, U.S. Department of Health, and Human Services. Rockville: MD.

Sørensen, K. (2024). Fostering digital health literacy to enhance trust and improve health outcomes. *Computer Methods and Programs in Biomedicine Update*, 5, <https://doi.org/10.1016/j.cmpbup.2024.100140>.

van der Vaart, R., & Drossaert, C. (2017). Development of the digital health literacy instrument: measuring a broad spectrum of health 2.0 skills. *Journal of Medical Internet Research*, 19(1), e27.

World Health Organization (WHO, 2024). *Health Literacy Development for Equity in Health: An Action Plan*. Geneva: WHO Press.

Yuen, E., Winter, N., Savira, F., Huggins, C. E., Nguyen, L., Cooper, P., Peeters, A., Anderson, K., Bhoyroo, R., Crowe, S., & Ugalde, A. (2024). Digital health literacy and its association with sociodemographic characteristics, health resource use, and health outcomes: Rapid review. *Interactive Journal of Medical Research*, 13, e46888. <https://doi.org/10.2196/46888>.

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