

Strengthening the health literacy of people with intellectual disabilities

D. Afroukhte¹, P. Khan², L. Behrens², S. Schniering¹, K. Wilharm², K. Gemes², B. Pohler², J. Kranert², W. Rodewald², A. Lehmann², T. Zillmann², M. Richter¹

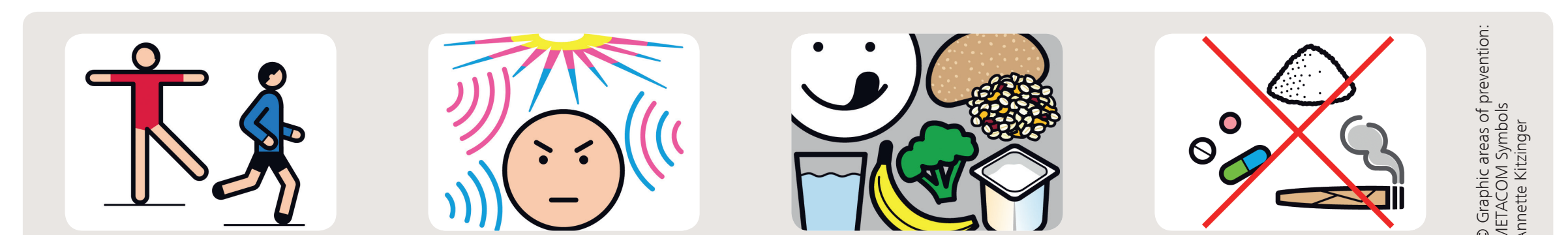
¹Department Nursing and Management, University of Applied Sciences Hamburg ²Protestant Hospital Alsterdorf, Protestant Foundation Alsterdorf

Background

People with so-called intellectual disabilities are more likely than the general population to experience long-term health conditions; this increased prevalence is accompanied by a higher mortality rate [1]. Health promotion and disease prevention services may have the capacity to tackle this disparity, but inclusive or specific services for this target group are relatively rare, and this population faces a range of barriers to accessing healthcare services [2], compounded by structural barriers in the healthcare system and, in many cases, a reduced level of health literacy [3, 4]. We therefore recognized a need to provide support to people with intellectual disabilities in planning health-promoting activities and utilizing health promotion and disease prevention services, enabling them to expand their health literacy.

Project objectives

- Support people with intellectual disabilities in the development and implementation of individual health promotion and disease prevention plans
- Promote health literacy among this target group by empowering them to engage actively with their health and with services
- Improve individual health, resilience and health-related quality of life among this target group by giving them the opportunity to participate in health promotion and disease prevention activities in four areas (mobility, stress, nutrition, addictive behaviors)

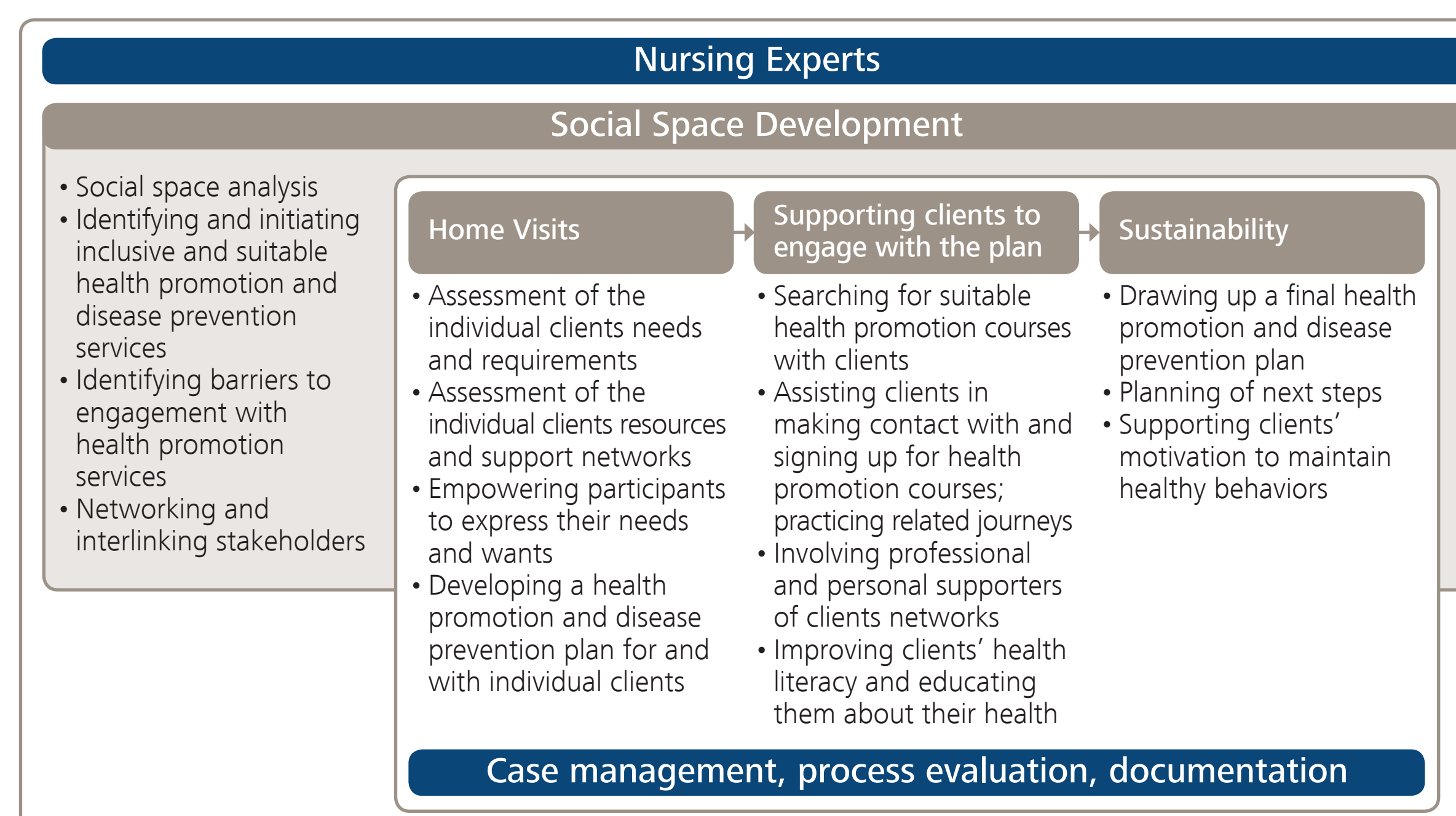


Intervention

In the intervention, trained specialist healthcare professionals carry out case management, social space analysis and disease prevention planning and deliver counseling in outreach home visits, alongside providing support and assistance to the target group with taking action to promote their health.

Methods

A mixed-methods-evaluation is currently in progress to accompany the intervention. We take an inclusive approach to the evaluation process, bringing members of the target group on board as coresearchers. The study protocol [5] provides detailed information on the study.



Conclusion

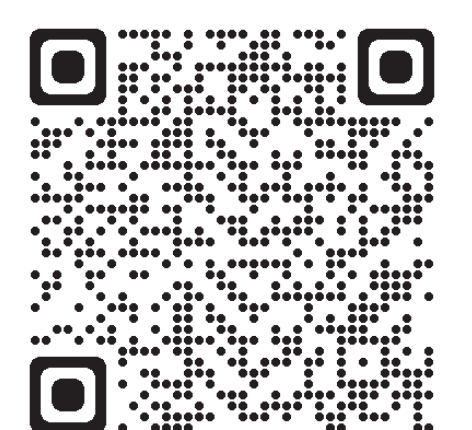
Analysis conducted during the ongoing evaluation has revealed various challenges in the task of improving health among this target group; these notwithstanding, we have observed numerous instances in which participants entered into processes of improving their nutrition and boosting their level of physical activity. The diversity evident among the population group of people with intellectual disabilities, manifesting in their varying levels of knowledge and their divergent motivations and aims, necessitates a tailored approach to the promotion of health literacy, meeting clients 'where they are', in their unique situations. Participants and professionals identified strengths around health literacy and engaged in exercises that helped the participants perceive and express their needs and wants and reduced their anxiety. Clients gained greater ability to engage in social contact.

The data gathered from the project thus far illuminate specific healthcare needs among people with intellectual disabilities and the potential to meet these needs via deploying specialized care expertise and appropriate case management procedures. Structural improvements in health literacy, delivered through individual and group-based services, may serve to reduce the deficiencies and limitations currently apparent in healthcare serving this population. The task for healthcare professionals working in this specialist area is to navigate existing structures and collaborate with clients, caregivers, and professional stakeholders on the development of appropriate solutions to the issues.

Alongside overcoming barriers to interprofessional collaboration in the area of health literacy among individuals with intellectual disabilities, they should work in a participatory manner with their clients, involving them in their care and in proactive engagement with their health needs.

References

- [1] Iwanaga K, Wu JR, Chan F, et al. (2021) A systematic review of systematic reviews of secondary health conditions, health promotion, and employment of people with intellectual disabilities. *Aust J Rehabil Couns* 27:13–40.
- [2] Doherty AJ, Atherton H, Boland P, et al. (2020) Barriers and facilitators to primary health care for people with intellectual disabilities and/or autism: an integrative review. *BJGP open* 4:3.
- [3] Baccolini V, Rosso A, Di Paolo C, Isonne C, Salerno C, Migliara G, et al. What is the prevalence of low health literacy in European Union Member States? A systematic review and meta-analysis. *J Gen Intern Med.* 2021; 36:753–61. <https://doi.org/10.1007/s11606-020-06407-8>.
- [4] The Economist Intelligence Unit. Health literacy around the world: policy approaches to wellbeing through knowledge and empowerment. 2021. https://impact.economist.com/perspectives/sites/default/files/0n_-_es_-_health_literacy_paper_v8_0.pdf. Accessed 25 Jun 2022.
- [5] Nadolny S, Bruland D, Grunwald M, et al. (2023) Case management and care expertise as a prevention approach for adults with intellectual disabilities (FaPP-MgB): study protocol for a randomized-controlled trial. *Trials* 24:136.



www.projekt-besser.de