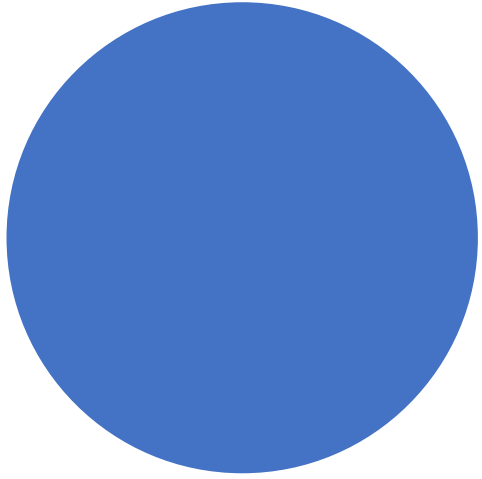


Health Literacy in Teens with Special Health Care Needs

Deena Chisolm, PhD
Nationwide Children's Hospital
and The Ohio State University



Children with Special Health Care Needs (CSHCN)

- Nearly a quarter of Ohio (23%) youths have chronic conditions requiring enhanced health-related services
- CSHCN are more likely to live in socio-economically disadvantaged families
- CSHCN are more likely to have unmet medical, dental, and prescription medication needs

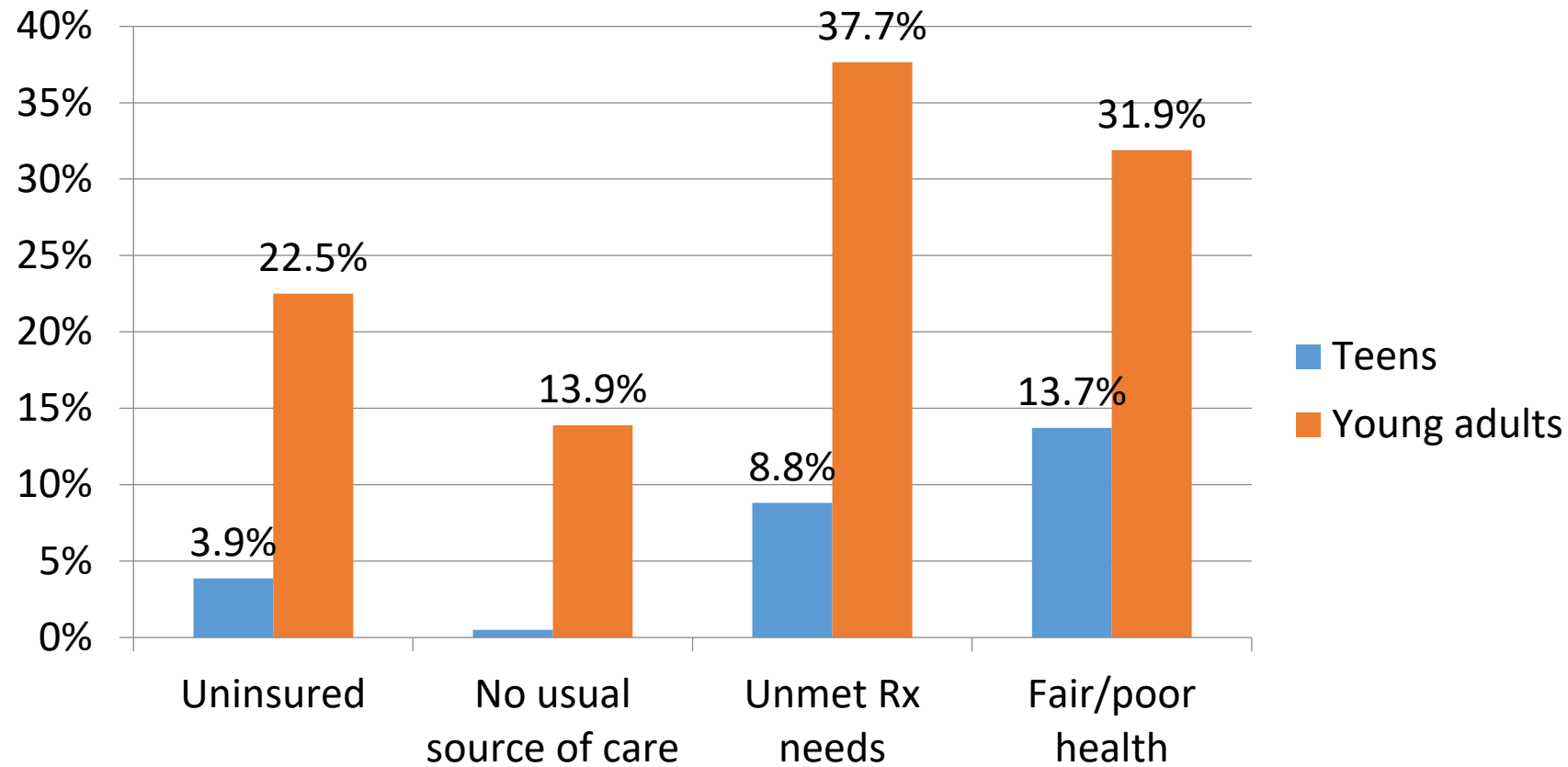
Transition to adult care

- During transition families must prepare for changes in providers, disease management responsibility, insurance, and more
- Nationally, only 40% of parents received desired, comprehensive counseling on preparation for transition
- Communication is less likely to occur when children live in poverty, when they are publically insured or uninsured, and when they have more complex conditions
- Nothing is known about whether such communication is occurring with the youths directly or how parent and child health literacy are associated with transition communication



Source: www.childhealthdata.org

Teens with SHCN face special challenges in transition and transitions are failing



Source: 2012 OMAS preliminary data



The Big Question

How might health literacy play a role in effective transition planning?

Teen Literacy in Transition (TeenLIT)

Specific Aims

- Assess the relationship between adolescent health literacy, parent health literacy, and effective planning for the health care transition from adolescence to adulthood.
- Assess the relationship between adolescent health literacy, parent health literacy, and adolescent health indicators including health-related quality of life and health care utilization.
- Identify mediators and moderators of racial disparity in health literacy in a large, diverse Medicaid managed care population of adolescents with special health care needs. Relationships tested will include primary language spoken at home, rural/urban residence, and parental education.

Study population

- Initial Screening - Medicaid Claims data
 - Ages 15-17
 - Diagnosed with at least one of twenty diagnoses found in over 90 percent of CSHCN
 - Enrolled in Medicaid for 12 previous months
- Secondary screening - Telephone
 - QuiCCC-R
 - English proficiency
 - No significant developmental delay
 - Functional limitation classification

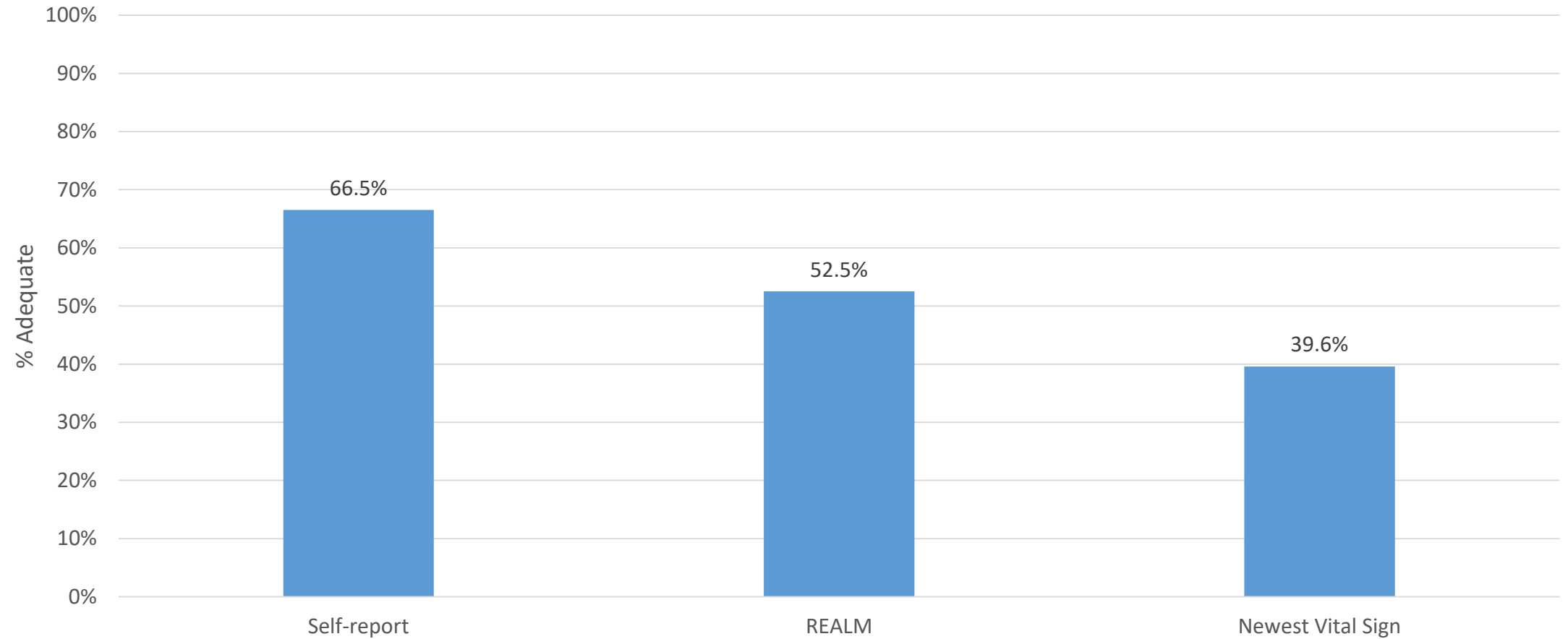
Core Measures

- Rapid Evaluation of Adult Literacy in Medicine
- Newest Vital Sign
- The Brief items (Chew)
- E-HEALS Electronic Health
- Transition Core Indicator – NS-CSHCN
- Transition Readiness Assessment Questionnaire (TRAQ)
- Health care utilization (Medicaid Claims Data)

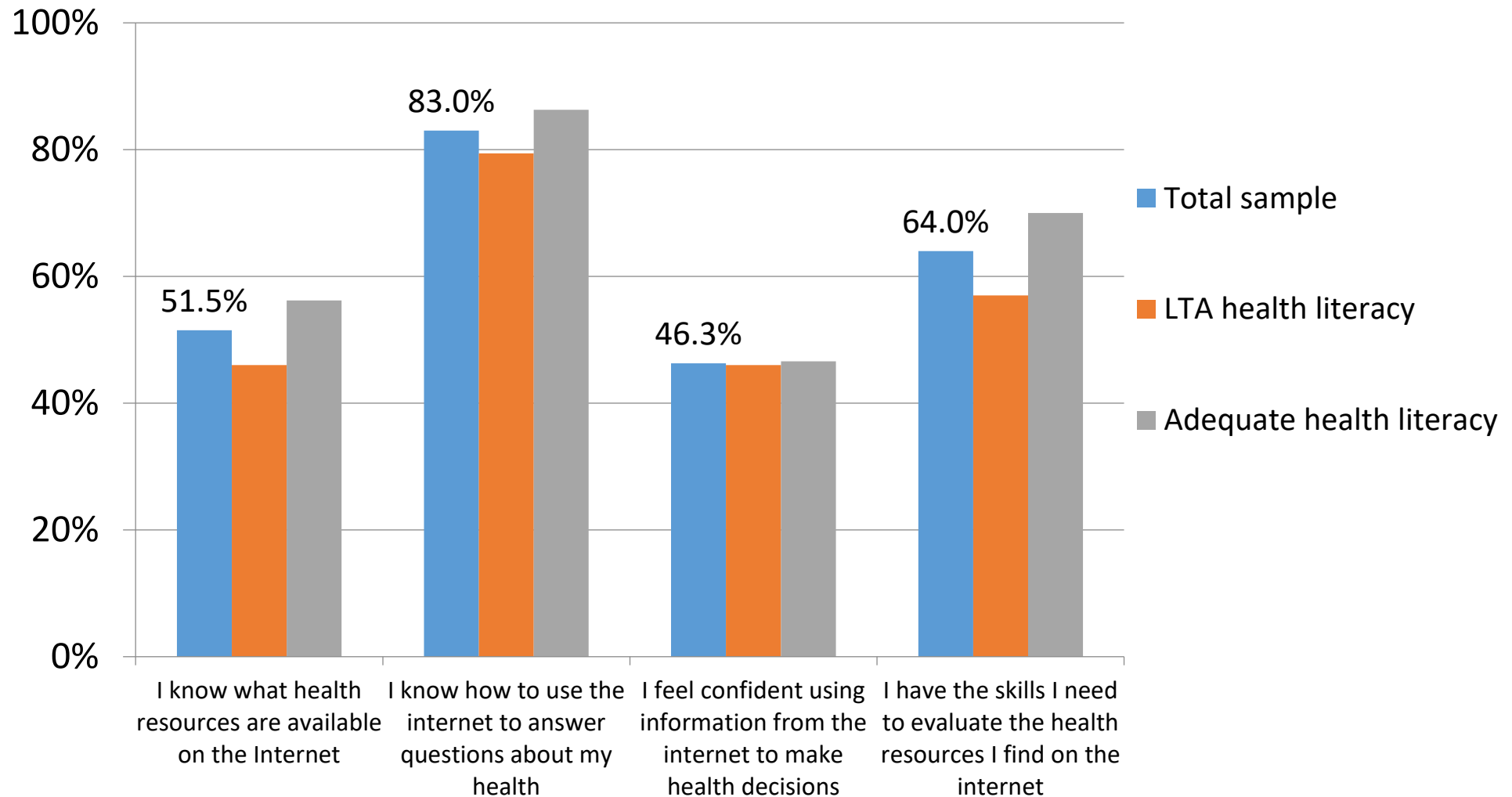
Participant characteristics (N=591)

Characteristic	Parent	Teen
Age Mean (range)	30-40 years (43.1%)	16.8 years
Gender		
Male	32 (5.4%)	283 (47.9%)
Female	559 (94.6%)	308 (52.1%)
Race		
White	373 (63.1%)	340 (57.5%)
Black	175 (29.6%)	182 (30.8%)
Other	43(7.3%)	69 (11.7%)
Level of Limitation		
None		150 (26.8%)
Some		249 (44.5%)
Severe		161 (28.8%)

Health literacy in teens with chronic illness

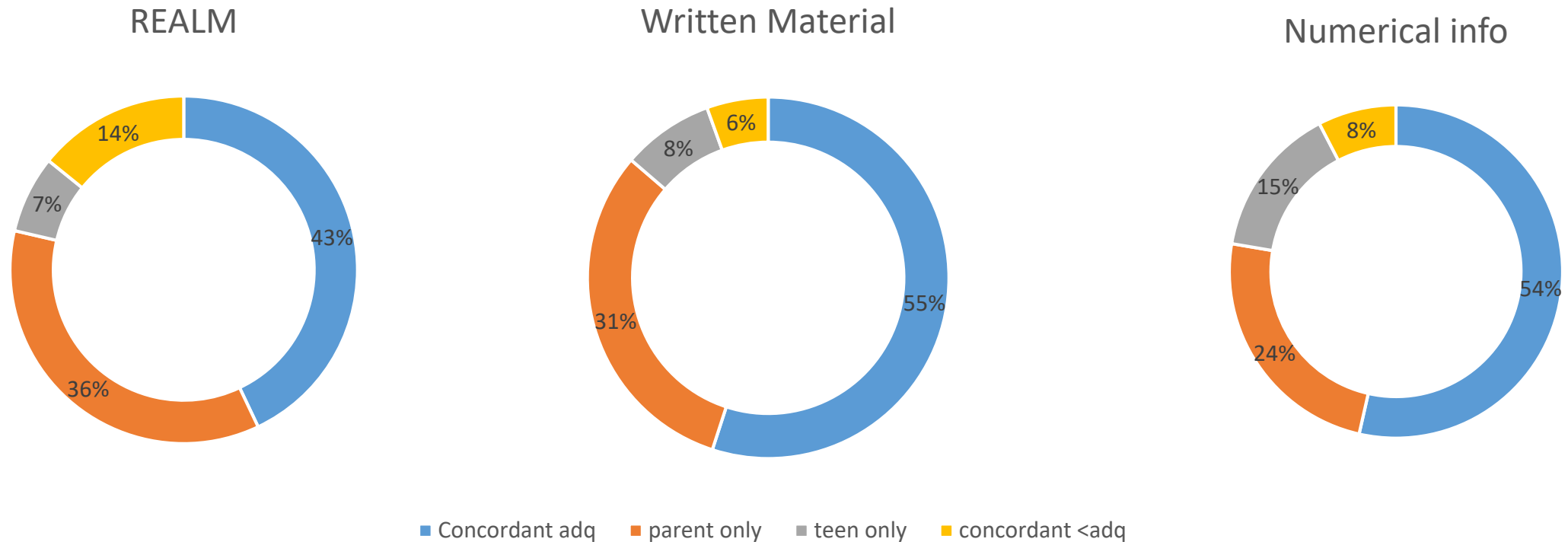


Linking Health Literacy and E-Health Literacy



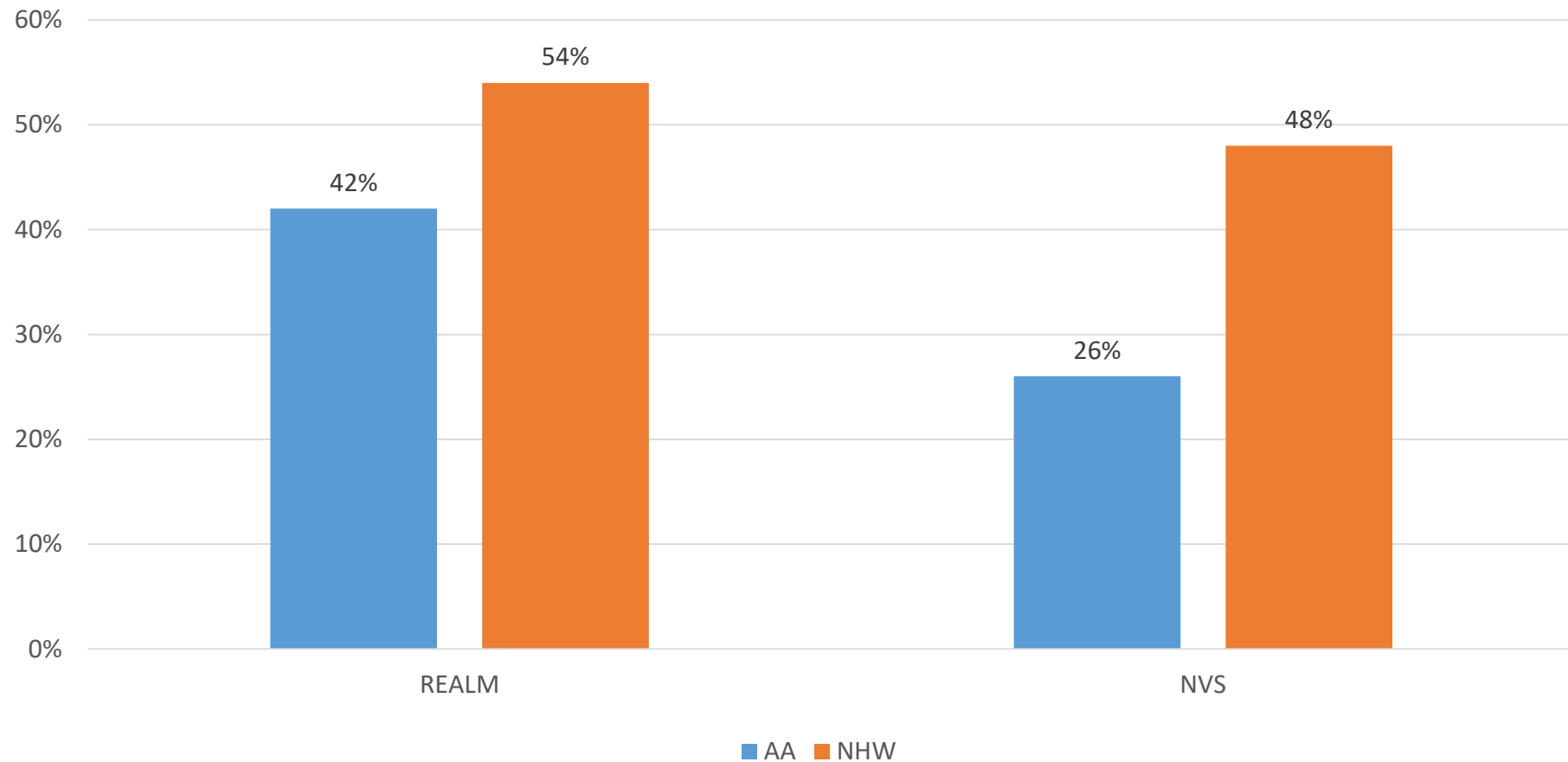


Parent-Teen Health Literacy Concordance

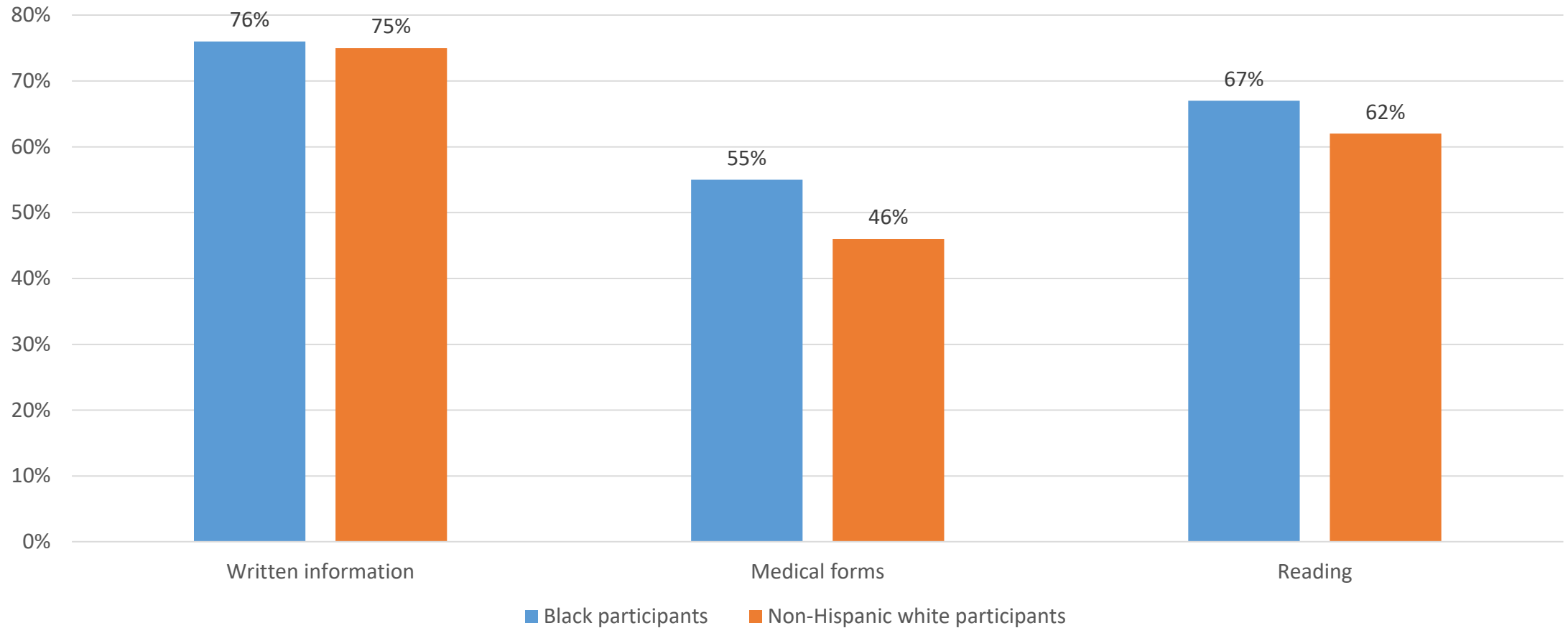




Disparity in Assessed Health Literacy

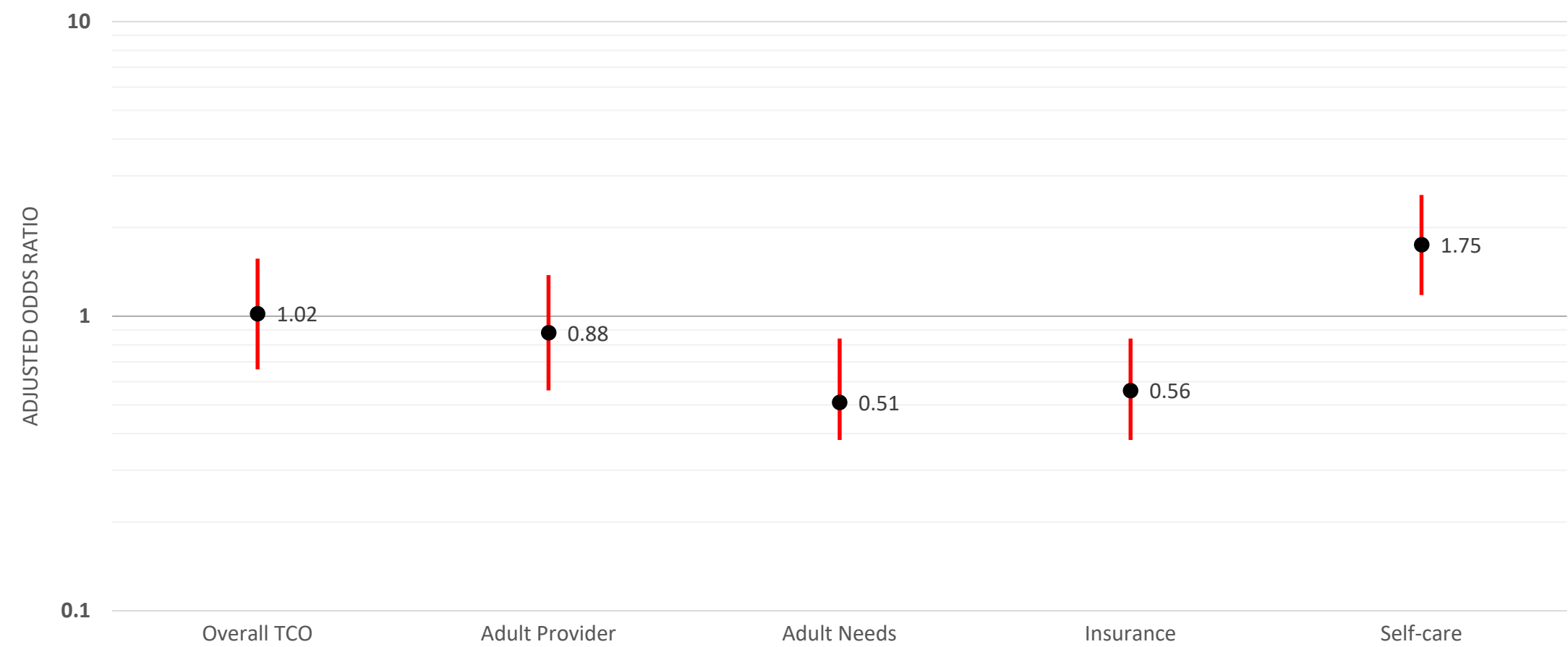


Disparities in Self-Reported Health Literacy



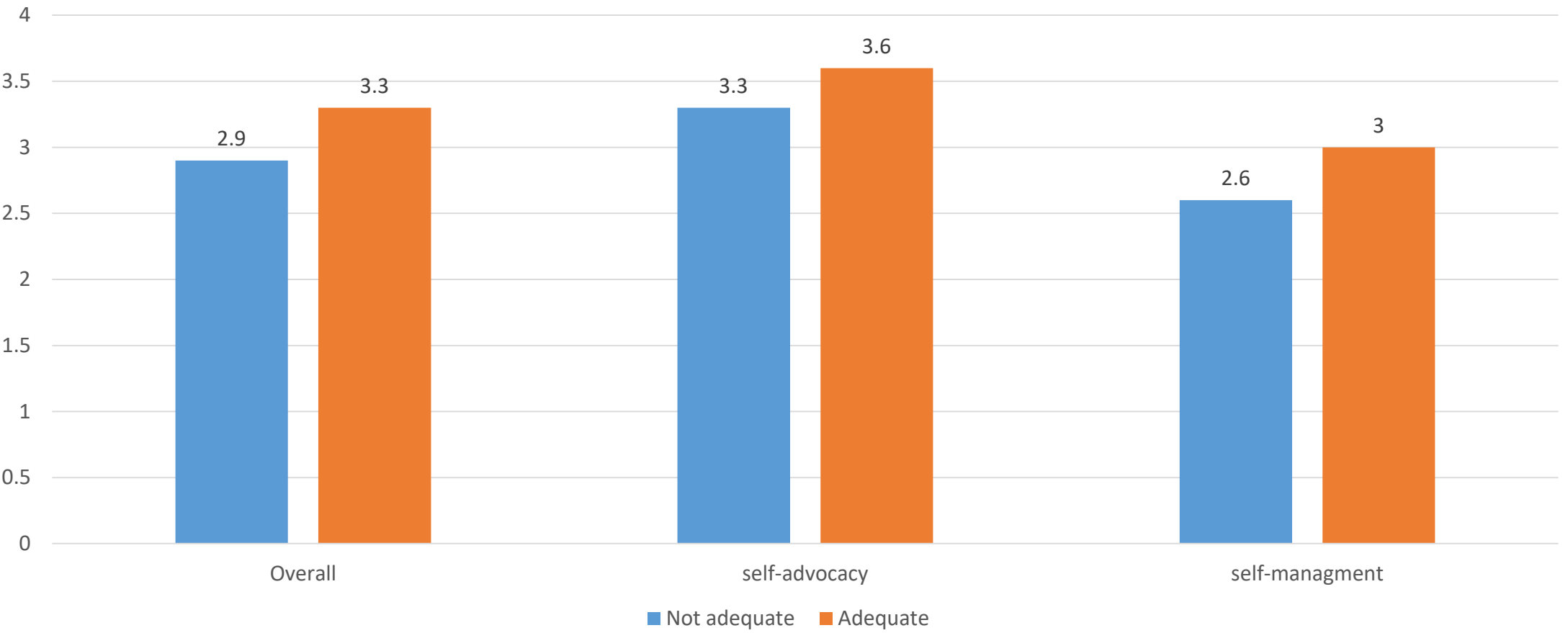


Transition Communication



Measure: Transition Core Indicator NSCHCN

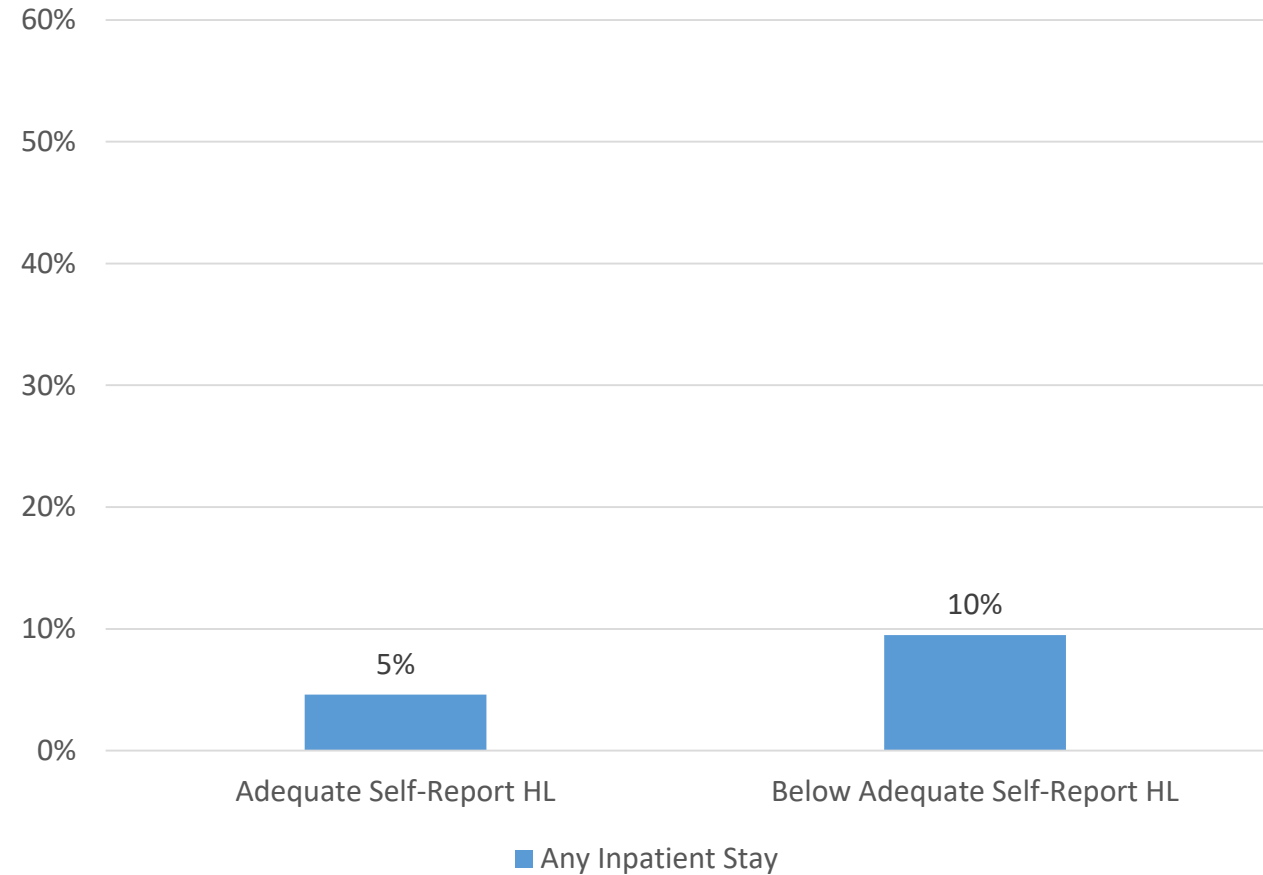
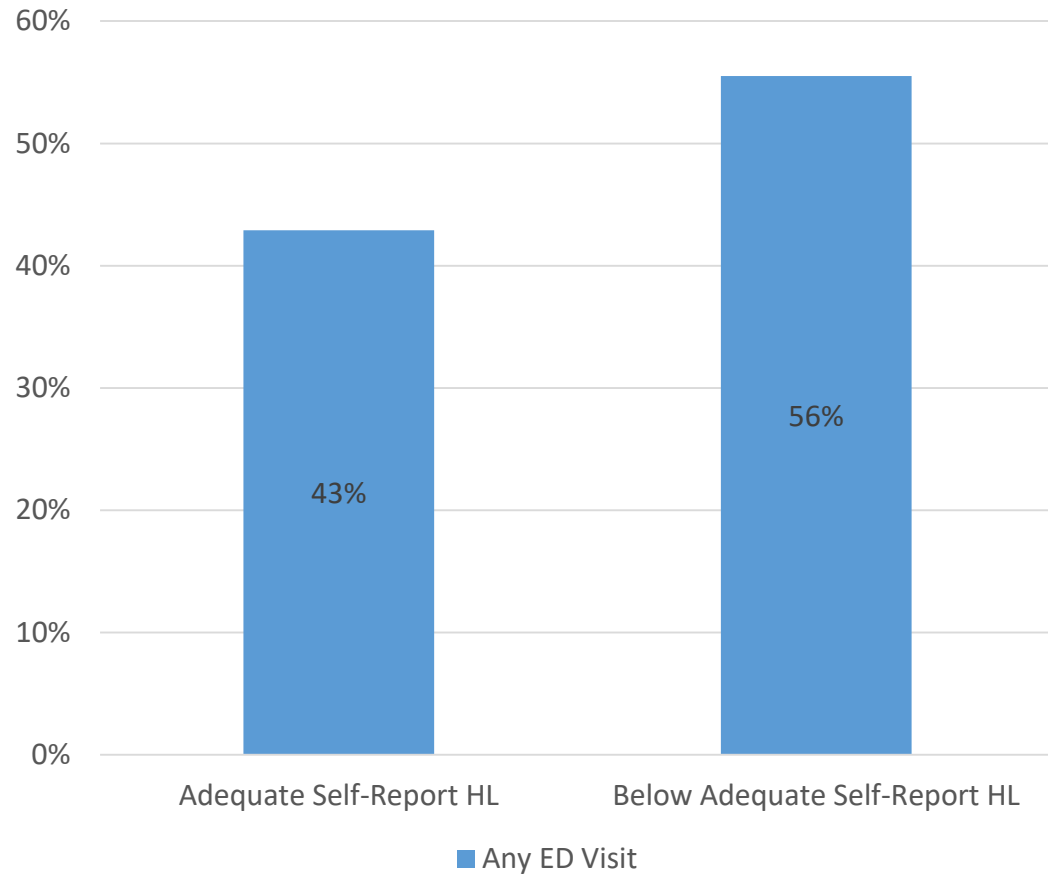
Transition Readiness



Measure: The Transition Readiness Assessment Questionnaire (TRAQ)



Health Care Utilization



Take Home Messages

- Teens with chronic illness are increasingly expected to actively engage in health management
- For some teens, health literacy limitations make that difficult
- Parents aren't always the solution
- Health literacy is an important consideration for transition planning and education

Thank You!

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