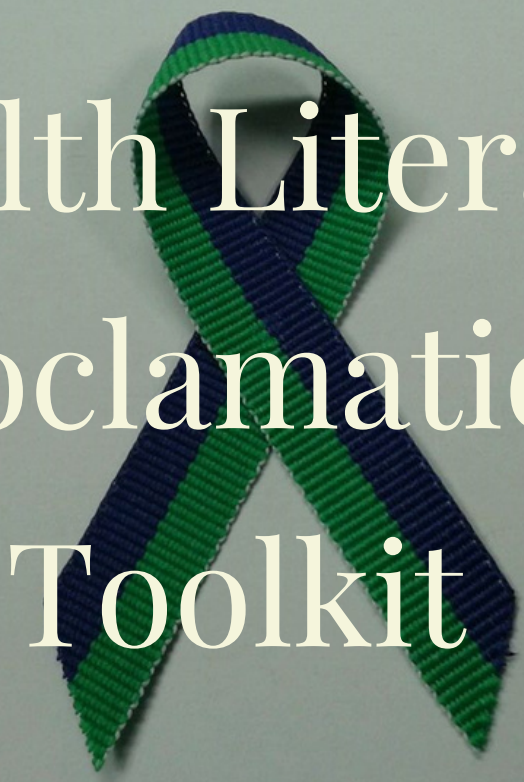


HEALTH LITERACY
REGIONAL
NETWORK

A blue and green awareness ribbon is centered on the page, partially overlapping the title text. The ribbon is made of a textured fabric and is tied in a loop.

State Health Literacy Proclamation Toolkit

2022

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Background

Healthy people 2030, define **health literacy** as:

- Personal literacy: the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others; and
- Organizational literacy: the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

The American Medical Association (2007) estimates that 9 in 10 Americans lack sufficient health literacy skills necessary to prevent and manage disease and chronic conditions and effectively seek and obtain healthcare. Inadequate health literacy impacts all segments of the population, regardless of age, race/ethnicity, education, or socioeconomic status. Understanding the gamut of consumer health information from prescription medication labels and discharge notes to health statistics and disease prevention measures, health literacy skills help conquer the patient – health professional divide.

Addressing health literacy can reduce healthcare costs and improve access to health information and consumer satisfaction with government health agencies and healthcare systems, and improve the overall health, safety, and quality of life for millions of Americans. Widespread and consistent use of health literacy best practices and communication techniques, including the “teach-back” or “show me” method, Ask Me 3[®], accessibility (508-compliance), plain language, and easy-to-read, culturally and linguistically appropriate written materials is one way to prevent communication-related adverse health outcomes and health inequities. Another, is fully integrating health literacy into our nation’s:

- K-12 public schools health education curricula,
- Accredited graduate and professional school curricula,
- Health professional continuing education, and
- Federal, state, and organizational policies and practices.

Introduction

Helen Osborne, an occupational therapist and nationally recognized author and health literacy consultant first proposed Health Literacy Month in 1999, to raise awareness about health literacy and clear communications among clinics and health care systems, insurance providers, literacy programs, libraries, and social service agencies, industry, government agencies, and others.

The State Health Literacy Proclamation Toolkit builds upon the work of Ms. Osborne with the goal of providing guidance to states to develop and submit a health literacy proclamation to the Governor's Office for the month of October, and promotion of the proclamation signing.

The primary audience for this toolkit includes:

- State literacy and health literacy coalitions and organizations,
- Universities and colleges,
- State health departments,
- Health education, healthcare, or disease-specific organizations, and
- Other advocacy groups.

Submitting a proclamation

A state proclamation, also referred to as a “commemorative message” is an official, ceremonial document and declaration on behalf of a state, to commemorate, a specific time period, historical milestone, or significant state or local event. The issuance of a proclamation does not indicate or imply a policy endorsement.

Proclamations are signed by a state's governor, a county's chairman, or a city's mayor and council. Requests generally must be submitted 20-30 business days before the requested date of signature by a non-profit group or organization that resides within the appropriate jurisdiction (state, county, or city). Submissions may have a limit on the number of words, “whereas” and “therefore” clauses, and citations for statistics mentioned may be required. Please review our recommended state proclamation template in [Appendix A](#), which can be modified to suit your state's needs.

State proclamation websites

The following are links to state governor's office proclamation websites that contain guidelines and instructions for submission. Most state governors' websites include an online form to submit a proclamation request. Others only provide a phone number, email, or general form to request more information on how to submit a proclamation.

- [Alabama](#)
- [Alaska](#)
- [Arizona](#)
- [Arkansas](#)
- [California*](#)
- [Colorado](#)
- [Connecticut](#)
- [Delaware](#)
- [Florida](#)
- [Georgia](#)
- [Hawaii](#)
- [Idaho](#)
- [Illinois](#)
- [Indiana](#)
- [Iowa](#)
- [Kansas](#)
- [Kentucky](#)
- [Louisiana](#)
- [Maine](#)
- [Maryland](#)
- [Massachusetts](#)
- [Michigan](#)
- [Minnesota](#)
- [Missouri](#)
- [Montana](#)
- [Nebraska](#)
- [Nevada](#)
- [New Hampshire](#)
- [New Jersey](#)
- [New Mexico](#)
- [New York](#)
- [North Carolina](#)
- [North Dakota](#)
- [Ohio](#)
- [Oklahoma](#)
- [Oregon](#)
- [Pennsylvania](#)
- [Rhode Island](#)
- [South Carolina](#)
- [South Dakota](#)
- [Tennessee](#)
- [Texas](#)
- [Utah](#)
- [Vermont](#)
- [Virginia](#)
- [Washington](#)
- [West Virginia](#)
- [Wisconsin](#)
- [Wyoming](#)

*State agency must sponsor

Planning and promotion

[The Health Literacy Month Handbook \(2008\)](#), created and written by Helen Osborne, M.Ed., OTR/L of [Health Literacy Consulting](#) and distributed in collaboration with the Institute of Healthcare Advancement (IHA) has more information about Health Literacy month and is an excellent tool for planning health literacy awareness activities. As Ms. Osborne states, health literacy awareness should be a continuous, all year activity. Nonetheless, targeted activities during the month of October have the potential to reach a larger audience, as leaders, policymakers, and the media may pay special attention. Health literacy awareness activities paired with an official signing of a Health Literacy Proclamation can only serve to magnify its promotion and impact.

The following are tips specific for planning and promoting a Health Literacy Proclamation event, such as a conference, fair, workshop, forum, or webinar:

- Develop a **vision** for the event, including activities that will accomplish your goals and objectives (e.g., increase health literacy awareness among policymakers, leaders, the media, and other influencers).
- Determine a **key audience**. Who do you want to influence with the event, or encourage to act upon information presented at the event? This could include key personnel from the following sectors:
 - **Government:** State representatives and senators, county and city policymakers, government councils, Health and Human Services, Education, and Commerce Departments, Governor’s Office, and Ombudsman’s Office.
 - **Healthcare:** Leaders and providers from clinics, hospitals, healthcare centers, Indian Health Service, federally qualified health centers. Include health, pharmacy, dentistry, nursing, and allied health professionals.
 - **Education:** Leaders and educators from K-12 public schools, graduate and professional schools, libraries, adult education and literacy programs.
 - **Non-profit and advocacy:** Leaders and professionals who work on disease-specific issues, healthcare, literacy, and health literacy, or work with specific segments of the population such as American Indians and people of color, children, older adults, people with disabilities, LGBTQ, or immigrants and refugees.
 - **Funding agencies and foundations**
 - **Media and the press:** Leaders, professionals, and influencers who work in communications and mass media, including television, radio, newspaper, and social media.
- Develop an **invite list** for specific individuals within the target sectors. A spreadsheet with last name, first name, title, organization, phone number, and email address is helpful. A **“Save the Date” flyer** should be sent out to those on the invitation list as soon as possible, as schedules fill up fast.

- Create an **event registration** website or use a commercial event registration platform (e.g., Eventbrite). A link to the registration can be sent out in an email (preferably with calendar-add option), added to a website, and shared through social media.
- Decide the structure of the health literacy event:
 - **Virtual events** may be more cost-effective for both the host and the participants and allow for greater participation; especially for communities who would otherwise have to travel long distances to attend.
 - **Hybrid events** are a combination of in-person and virtual activities. They are more complex to coordinate but provide participants with options.
- Consider **partners, collaborators, and sponsors** for the event. These are trusted individuals from different audience sectors mentioned above who share similar goals. They can help you with event funding, planning, promotion, and may also be able to provide welcoming or closing remarks or give a presentation.
- **Align content** with the goals and objectives of the event. Identify speakers who are content experts or have practical knowledge about the key topics being discussed. For example, if the goal of the event is to increase health literacy awareness among policymakers, leaders, and the media, one speaker should give an introductory health literacy talk. Other speakers might include those who can discuss how health literacy can be integrated into policies and practices within different organizations, using real world examples.
- **Think local.** A national keynote speaker may help draw in crowds and help with promotion of the event, however, don't underestimate the power of inviting local speakers. Local speakers can talk about strengths, challenges, and overcoming challenges specific to the community, and may add more credibility to the messages being delivered.
- **Continuing education (CE).** Partner with a college or licensing or accreditation board to offer continuing education credits to attendees. This will help with promotion of the event and encourage attendance. It also has the added benefit of bringing health literacy awareness to licensing and accreditation boards, as health literacy is not specifically part of C.E. requirements but might apply to communications or elective requirements.
- **Engage participants.** Consider the types of learner activities at the health literacy event. Will presentations alone be engaging enough for participants? Consider other options:
 - **Panel discussions** with a question and answer session can help participants think about an issue from different perspectives.
 - **Break-out groups** can foster networking opportunities and allow either within sector or multi-sector problem-solving based on a situation proposed, or question asked. Leaders and policymakers could be invited to different break-out groups to hear stakeholders discuss challenges and solutions to addressing health literacy.

- **Training** for health professionals might be one of the goals of the event. Interactive presentations and break-out group discussions or skill-building activities can serve this role. Focused tasks such as practicing the teach-back technique or writing in plain language can easily be embedded into the event.
- **Create participant packets.** These packets should include the agenda, speaker biosketches, presenter slides, key informational handouts, and resources for more information. Printed packets can be distributed during in-person events with nametags, speaker, or organizational ribbons, and promotional items. Electronic packets can be distributed in an email or accessed from a website.
- **Inclusivity.** Be mindful of participant special needs and other aspects that foster event inclusivity.
 - Always ask participants about any special needs or accommodations required in the registration form.
 - When housing in-person events make sure the event venue is bus accessible, has handicap parking, and the building will accommodate the use of a wheelchair and/or service animal (i.e., hallways, in between tables and chairs, and bathrooms).
 - Always ask participants about their preferred gender pronoun (he/him, she/her, they/them, Per/per, Ve/ver, Ze/xem, or Ze/zie) in the registration form. Name tags generated from the registration forms should also include gender pronouns.
 - When housing in-person events, consider having “Reserved” table(s) towards the stage or near the speaker(s) and entry/exit of the room for ASL interpreters, people with hearing, vision, or mobility impairments. The reserved tables are not meant to segregate people with special needs but assist with navigating a wheelchair or service animal through entry/exit points and accessing vision and audio. Make sure the tables have full view of the speakers and presenting screen.
 - If offering food and beverages at in-person events, you should ask participants if they have allergies or special dietary needs in the registration form. These needs should be communicated with the catering service.
 - Contract with an American Sign Language (ASL) interpreting service for any type of event (in person or virtual), especially if participants have a hearing impairment. ASL interpreting services are also important to include in recorded events so that the event is accessible for future viewings.
 - Video clips shown during presentations should have captioning when possible. The audio in videos is not always clear or well-articulated. Having captioning also helps ASL interpreters.
- **Greeter, Helper, Facilitator, and Notetaker.** Be sure to designate at least one staff member or volunteer at in-person events for the following roles:

- **Greeter:** This individual will greet participants as they come in, help them sign-in at the registration table, hand out participant packets, and point out the bathrooms and main event room. Pictures and names of speakers, ASL interpreters, and VIP guests should be given to this individual to help in their role.
- **Helper:** This individual will be the point person to help answer questions participants may have about the venue and assistance with issues that might arise, such as A/V or technology glitches, managing microphone time, checking on accessibility concerns or dietary needs.
- **Facilitator:** This individual will help introduce speakers, lay out ground rules for the event and expectations, and help lead panel or group discussions.
- **Notetaker:** This individual will record key concepts and quotes from speakers and panel and group discussions. Concepts and quotes can be used in real-time social media posts, post event reports and summaries, and is critical in situations where there will be no video recordings.
- **Media presence:** Decide whether including media at the event will be beneficial. Media can help promote the event and key messages, but they may distract some attendees from fully participating during in-person events.
- **Photography:**
 - Hiring a professional photographer for the health literacy event can capture key moments and highlight speakers for use in social media and post-event evaluation and reporting.
 - A budget-friendly option is designating staff or volunteers to take photos. Android and apple phones have improved over time, and many can now take quality, high resolution digital photos.
 - Make sure you get a signed photo release and conflict of interest disclosure forms from all your speakers.
 - Post signage at the event and make an announcement at the beginning of the event alerting participants about the presence of a photographer and/or videographer. Participants should notify the photographer and/or videographer and host if they would not like to be photographed or recorded. See [Attachment B](#) for an example sign.
- **Develop key messages:** Plan 3-5 key takeaway messages. Be sure to mention them during the opening and closing remarks. Repeating these messages and aligning them with information presented by speakers, panelists, and discussed during group activities will help drive home these messages with participants and hopefully become part of their long-term memory. See [Attachment C](#) for some example messages.
- **Marketing and promotion:**
 - Develop a theme for the health literacy event. Consider colors, images, branding, and other design elements to include in electronic and paper communication

materials. Communications and graphic design personnel or contractors should be involved in this process. There are also budget-friendly templates and graphic design options online (e.g., Canva, Figma, PicMonkey®, and VistaCreate).

- Create an event flyer that includes the name of the event, date, time, and location, a registration link, contact information for the organizer, and any relevant social media tags.
- The following are places to advertise the event:
 - Flyers posted to bulletin boards or placed strategically in high traffic areas.
 - Newsletter, email, or list-serve announcements.
 - Website and/or blog posts.
 - Social media.
- Develop a social media #hashtag for the event. That way you can track social media engagement in the event evaluation.
- **Health Literacy Awareness Month Ribbons**
 - Shown on the front cover.
 - The blue (health) and green (literacy) ribbons were developed by Dr. Genelle Lamont and used during the Minnesota Health Literacy Best Practices Conference (2018 and 2019), hosted by the [Minnesota Health Literacy Partnership](#) and the [Minnesota Department of Health](#).
 - Ribbons can be distributed to event participants, worn by speakers, and shared with policymakers and leaders.
 - Organizations can purchase ribbons from the following vendors:
 - [The Ribbon Factory](#)
 - Grosgrain bi-color awareness ribbon in emerald green and royal blue.
 - Reference previous design purchased in 2019 under the business name: Minnesota Department of Health.
 - [Custom Pins Now](#)
 - One inch diecast hard enamel pin with cutout in silver metal, reflex, Blue C, and 346 C.
 - Reference #80708 Health Literacy Awareness.

Evaluation and follow-up

- Sending out an Event Participation Survey, a day or two after the event can help you understand what went well and what needs improvement for planning future health literacy events. Training needs may also be assessed in the survey. See [Attachment D](#) for an example survey.
- If a #hashtag was used at the event, social media reach and impressions can be measured as part of the evaluation.
- Consider developing an **Event Summary Report** that pairs photographs with key concepts, messages, and quotes from the event. Ideally, this report should mention recommendations or action steps to advance health literacy in the state, or other jurisdictions. These recommendations should come from experts and key stakeholders, individuals within the host organization, and/or feedback from the evaluation survey. The Report can be posted to a website and shared through social media, as well as emailing a link to event participants.

Attachment A

State Health Literacy Proclamation Template

WHEREAS: Health literacy is defined as the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others (personal health literacy); and the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others (organizational health literacy).¹

WHEREAS: The American Medical Association (2007) estimates that 9 in 10 Americans lack sufficient health literacy skills necessary to prevent and manage disease and chronic conditions and effectively seek and obtain healthcare.² Additionally, based on the National Quartiles, [*insert percentage range from 2003 National Assessment of Adult Literacy, e.g., 12-63%*] of [*insert state residents, e.g., Minnesotans*].³ Addressing overwhelming health literacy needs can reduce health care costs^{3,4} and improve the accessibility, quality, safety, and patient satisfaction of healthcare, and improve the health and quality of life for millions of [*insert state residents, e.g., Minnesotans*].⁵

WHEREAS: Inadequate health literacy affects all segments of the population even people with higher education and strong literacy skills. Age, racial/ethnic, economic, and cultural and linguistic disparities exist in levels of ability to access, understand, and use health information.²

WHEREAS: The burden of not systematically addressing health literacy costs the U.S. healthcare system \$438-\$938 billion a year.⁴ Inadequate health literacy has been associated with: 1) Reduced ability to understand labels and health messages; 2) Limited ability to follow medication instructions; 3) Lower likelihood of accessing or receiving preventive care; 4) More hospitalizations; 5) Greater use of emergency departments; 6) Worse overall health status; 7) Higher mortality in the elderly; 8) Shorter life expectancy; 9) Worse physical and mental health;⁶ and 10) Low satisfaction with health care,⁷ all of which are avoidable.

WHEREAS: U.S. K-12 Public Schools do not routinely teach health literacy skills.⁸ And U.S. Schools of Medicine, Dentistry, Pharmacy, Nursing, Public Health, Social Work, and Allied Healthcare do not routinely teach health literacy interventions, such as the use of plain language and teach-back.⁹

WHEREAS: The U.S. Department of Health and Human Services includes health literacy in one of its overarching Healthy People 2030 goals: “Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all.”¹ Health literacy addresses health equity by providing health information to all that is accessible, understandable, and actionable, regardless of race/ethnicity, creed, language, culture, income, sexual orientation, gender identity, age, or ability.¹⁰

WHEREAS: *Insert statement about the establishment of the state’s health literacy organization, if applicable, or other supporting organizations and community affiliations, and how organization(s) have led or support state health literacy efforts, e.g., to help health care systems and providers develop and use health literacy patient education materials.*

WHEREAS: Health Literacy Month is celebrated throughout the United States and World every year since 1999 on October 1-31.¹¹

NOW, THEREFORE, I [*Insert Governor’s Name*], Governor of [*Insert State*], do hereby proclaim the month of October as: **Health Literacy Month**

References for Proclamation

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11. Health Literacy Month. Building Awareness through Action. Institute for Health Care Advancement. <https://www.healthliteracymonth.org/home>

Attachment B

Example Event Photo/Video Participant Notice

Insert Name of Health Literacy Event

There will be a photographer and videographer taking photos/videos throughout the Event to capture and document the events of the day.

If at any time you do not wish to be photographed/videotaped, you can move out of the view of the camera or make the photo/videographer aware that you don't want to be part of the photo or video.

We appreciate your participation in today's event and encourage you to have a comfortable and engaging experience.

Attachment C

Example Key Messages

- Inadequate health literacy affects all segments of the population even people with higher education and strong literacy skills.
- Unequal access to clear health information creates health disparities and results in unnecessary emergency room visits and hospitalizations, worse health outcomes, and death.
- The burden of not systematically addressing health literacy costs the U.S. healthcare system \$438-\$937 billion a year.
- We can all do our part to address health literacy:
 - Integrate health literacy into K-12 public school health education curricula.
 - Develop a standardized health literacy curricula for graduate and professional schools (i.e., Schools of Medicine, Nursing, Pharmacy, Dentistry, Allied Health, Veterinary, Public Health, and Social Work).
 - Develop health literacy organizational standards and staff training for organizations that receive federal and state funding, i.e., federal, state, tribal, local and territorial health and human services agencies, and clinical and hospital systems, including federally qualified health centers.
 - Integrate health literacy into adult literacy programs and programs for second language learners.
 - Support data collection, public health surveillance, and research for health literacy, including bringing back the National Assessment of Adult Literacy to track national and state health literacy rates.
 - Add health literacy as a separate activity requirement for all federal and state funding opportunities and cooperative agreements for health and human services projects and programs.

Attachment D

Health Literacy Event Sample Evaluation Survey

Participant information

1. Which of the following best describes your job/position. *Please, select one.*
 - Public health professional
 - Healthcare provider
 - Oral health provider
 - Healthcare administrator
 - Mental health provider
 - Educator
 - Consultant
 - Librarian
 - Pharmacist
 - Social worker
 - Policymaker
 - Other (please specify): _____

2. Which of the following best describes your industry/occupation. *Please, select one.*
 - Advocacy or non-profit organization
 - Foundation or philanthropic organization
 - State, county, or city government
 - Healthcare system
 - Higher education
 - Insurance provider
 - Licensing board
 - Trade association
 - Consulting agency
 - Other (please specify): _____

3. How did you hear about this event?
 - Social media (i.e., Facebook, Twitter, Instagram, GovDelivery)
 - Health Literacy Coalition list-serve/email
 - Other (please specify): _____

Event feedback

4. Please list **1 to 3 things** you learned at this event.

5. What will you **do differently** as a result of this event?

6. What health literacy state/phase is your organization currently in? *Select all that apply.*
 - Not on my organization's radar.
 - Minimal awareness only.
 - Plain language and health literacy is incorporated into patient education materials.
 - Organization has a health literacy policy.
 - Supports other health literacy projects. Please specify: _____

7. Please share what activities you or your organization are doing to address each of the goals of the National Action Plan to Improve Health Literacy.
 - Goal 1: Develop and disseminate health and safety information that is accurate, accessible, and actionable.
 - Goal 2: Promote changes in the health care delivery system that improve health information, communication, informed decision making, and access to health services.
 - Goal 3. Incorporate accurate, standards-based, and developmentally appropriate health and science information and curricula in child care and education through the university level.
 - Goal 4. Support and expand local efforts to provide adult education, English language instruction, and culturally and linguistically appropriate health information services in the community.
 - Goal 5. Build partnerships, develop guidance, and change policies.
 - Goal 6. Increase basic research, and the development, implementation, and evaluation of practices, and interventions to improve health literacy.
 - Goal 7. Increase the dissemination and use of evidence-based health literacy practices and interventions.

8. May we contact you to learn more about what you are doing?

No

Yes

Please provide your contact information:

First Name: _____

Last Name: _____

Organization: _____

Phone number: _____

Email address: _____

9. What can the [*insert organizers names*] do to support your health literacy activities and efforts?

Participant satisfaction

10. How likely are you **to attend** another health literacy event?

Very unlikely

Somewhat unlikely

Somewhat likely

Very likely

11. How likely are you **to recommend** another health literacy event to your colleagues?

Very unlikely

Somewhat unlikely

Somewhat likely

Very likely

12. What did you like **best** about the health literacy event?

13. What did you like **least** about the health literacy event?

14. Do you have **any suggestions** for how we can improve?

15. Is there anything else you'd like to tell us?

About the authors

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regular guest faculty for health literacy at NEOMED-CSU Partnership and CWRU. She has chaired the Healthy Cleveland's Health Literacy Committee since 2017 and is immediate past president and co-founder of Ohio Health Literacy Partners, a statewide, non-profit collaborative whose mission is to empower all Ohioans to make informed health choices. She also chairs the National Council to Improve Patient Safety through Health Literacy. Ms. Komondor can be reached at: Karen.Komondor@stvincentcharity.com

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