



Accelerating health literacy

An inspirational guide for organisations and governments

December 2023

Table of Contents

01	Foreword	3
02	Executive summary	4
03	Introduction	7
04	Organisation	9
05	Products and services	15
06	Community	21
07	Ecosystem	26
08	Governmental impact	28
09	What's next	33
10	Appendix (I, II, III)	35
11	References	40
12	Contacts	41



Prof. dr. Stephan Van den Broucke
President of the Board of HealthNest

“To create a healthier society, we should assist people in understanding their health, making the right choices for their health, and recognising how lifestyles can affect well-being. Health literacy is a key step towards preventive healthcare and health promotion for all.”

Foreword

In a world overflowing with ever-evolving health information, health literacy has become a valuable skill for people to find their way in the healthcare system and to manage and promote their health. Since health literacy became a part of the Belgian health agenda 10 years ago, important steps have been undertaken to better address health literacy in the Belgian population. A study by KCE from 2019 outlines actions for policy makers on health literacy promotion. These actions include measuring health literacy, integrating it in healthcare, education, and social care settings, and promoting training of healthcare professionals. While some of the actions are already being addressed, there is still a lot of work to do. Everyone, from organisations to individuals to policy makers, can play a part.

In this document, we embark on a journey to explore the critical dimensions of health literacy within organisations, but also within a broader community and ecosystem. We first examine how organisations, regardless of their expertise and the domain in which they operate, can play a pivotal role in addressing (low) health literacy through well-designed initiatives. Subsequently, we advocate for policy makers to take concrete actions to address health literacy and conclude with an actionable guide forward.

I encourage organisations and policy makers to recognise the transformative potential of health literacy initiatives. Health literacy is not just a theoretical concept but a tangible force for change that can enhance the quality of healthcare, reduce health disparities, and ultimately improve the health outcomes in the population.

I am confident that the insights and recommendations contained within this whitepaper will serve as a valuable resource for organisations across various sectors. We have composed this document with the hope that it inspires a collective commitment among organisations and policy makers to foster not only a healthier but also a more informed and inclusive society where every individual has the knowledge and confidence to make informed choices about their health.

Executive summary

In this whitepaper, we explore the pressing matter of health literacy. On the one hand, we provide a comprehensive framework for organisations to implement initiatives with the purpose of addressing health literacy. And on the other hand, we specifically turn to policy makers in Belgium and discuss their potential roles. Health literacy is not merely a patient concern but a social imperative. In an age of complex healthcare systems and information overload, organisations as well as policy makers must actively engage in strategies that address health literacy, reduce disparities, and foster better community well-being.

This whitepaper is powered by HealthNest, a coalition of professionals and organisations that is committed to improving the way health literacy is accounted for in Belgium. It builds further on the output of HealthNest's conference organised in June 2023, which focused on capacity building and impactful partnerships. This topic, in turn, stems from their comprehensive health literacy impact map centred around five levers:

- **FOSTERING HEALTH LITERATE ORGANISATIONS**
Organisations know how to offer information in a health literacy friendly way
- **PROFESSIONAL WORKFORCE DEVELOPMENT**
(Health) professionals acknowledge the importance of health literacy and can act on it
- **INTEGRATED HEALTH INFORMATION (& WAY FINDING)**
Citizens know how and where to find health information related to their own (multi-issue) situation and have easy and affordable access
- **HEALTH INFORMATION OFFERING**
Availability of health information that is both evidence-based and tailored
- **FOSTERING CRITICAL APPRAISAL (CITIZENS)**
Citizens can make well-informed choices based on personally relevant information

In the first four chapters, we address organisations of all kinds where our findings and suggestions are structured by their scope: targeting the own organisation (1), embedding measures in products and services (2), taking action within the community (3), and ultimately within the broader ecosystem (4). All chapters contain tangible real-world examples. Next, we specifically address governing bodies and the role they play in facilitating health literacy across Belgium and its regions. And finally, we conclude with a practical recap of what's next for both organisations and policy makers.

1. Organisation

At the core of addressing health literacy lies the commitment of the organisation. To succeed, organisations would benefit from:

- Building health literacy into the business strategy
- Striving for active involvement from all employees
- Going “on the record” with commitments to health literacy
- Measuring impact



Executive summary



2. Products and services

To address health literacy for the general population, organisations should undertake steps within their product and service lines to promote health literacy to a broader audience. This can be done by:

- Integrating health literacy within existing (core) products and services
- Integrating health literacy within support services
- Presenting products and services in line with health literacy best practices
- Tailoring messaging to different audiences



3. Community

Organisations can play a pivotal role in addressing health literacy within their communities by:

- Investing in health literacy initiatives
- Collaborating to reach a broader audience
- Collaborating to bring deep expertise to a specific community



4. Ecosystem

Collaboration across the healthcare and broader organisation ecosystem is essential. Organisations can reach these overarching ecosystems by:

- Leading by example for their industry
- Prioritising research and data sharing
- Launching global initiatives
- Making philanthropic contributions
- Advocating and influencing policy



5. Governmental impact

Policy makers play a pivotal role in shaping the health literacy landscape. By setting specific health objectives and priorities, organisations and governments can focus their efforts on improving healthcare access, education, and awareness, which can lead to a better-informed and healthier population. Health literacy for the Belgian population can be addressed by a combination of actions:

- Establishing a governance model
- Developing a health literacy plan
- Nurturing health literacy initiatives
- Measuring impact

Executive summary

INITIATE CHANGE

BRING AMBITIONS TO LIFE

SHAPE THE FUTURE

ORGANISATIONS

Set your health literacy goals

- **Find inspiration**, either from the examples given in this paper or within your own organisation and day-to-day experiences, on how to make an impact on the four different levels discussed in this paper
- **Select** possible roles and/or initiatives that may be relevant for your organisation
- **Set ambitions** and chart a high-level path to success

Make health literacy tangible

- **Spread the word** on health literacy ambitions throughout the organisation
- **Pilot small-scale initiatives**, possibly driven by a handful of enthusiasts and/or experts
- **Monitor success** and derive lessons learned

Scale health literacy sustainably

- **Design the organisation** to sustain a health literacy-oriented vision
- **Leverage change management** to help incorporate the necessary people, processes, and tools
- **Scale up** successful health literacy initiatives

POLICY MAKERS

Provide a health literacy framework

- **Prioritise health literacy** across federal, regional and local levels and deepen health literacy expertise
- **Foster collaboration** across federal government and federated entities aiming for a consistent and straightforward health literacy framework
- **Develop a health literacy plan** for Belgium leveraging the concepts of capacity mapping and capacity building

Boost health literacy initiatives

- **Boost organisational and individual competencies** by amplifying existing initiatives and collaborations
- **Raise health literacy awareness** among organisations, individuals and healthcare providers
- **Centralise and standardise** health literacy resources and support

Strive for evidence-based policy making

- When designing future policies, **strive towards a holistic view on health, health equity, and health literacy** through continued alignment across distributed responsibilities
- **Rely on data** (e.g., health literacy index and impact measurements) **to define future-proof health literacy objectives**



Introduction

Health literacy is defined as people's knowledge, motivation and competencies to access, understand, appraise, and apply health information to make judgments and take decisions in everyday life concerning healthcare, disease prevention and health promotion to maintain or improve quality of life during the life course.¹ It positively shapes health outcomes, health skills, and the uptake of preventive measures. Health literacy is therefore one of the drivers of health, empowering people to obtain and maintain good health and a satisfying quality of life.

In an increasingly interconnected world, health literacy is pivotal to navigating health information. Yet 35% of Belgians find it difficult to obtain, understand and use information related to their health, and 10% feel they lack the skills to properly apprehend health related matters.²

The healthcare system, responsible for restoring and maintaining our health, is becoming increasingly complex due to the continuous advancements in medical science and technology, the integration of new care delivery models including telemedicine, complex insurance policies, etc. Health claims in (social) media messages are widely available, yet often false and unverified. More than ever, the critical evaluation of information can make the difference between good and poor health.

HealthNest is a coalition of professionals and organisations that since 2013 is committed to addressing health literacy in Belgium. It searches, accompanies, and promotes Belgian projects in the field of health literacy, thereby increasing awareness around them and helping them realise a significant impact on the Belgian health landscape. To achieve this, HealthNest has developed an **impact map organised around five levers**:

1. FOSTERING HEALTH LITERATE ORGANISATIONS

Organisations know how to offer information in a health literacy friendly way

2. PROFESSIONAL WORKFORCE DEVELOPMENT

(Health) professionals acknowledge the importance of health literacy and can act on it

3. INTEGRATED HEALTH INFORMATION (& WAY FINDING)

Citizens know how and where to find health information related to their own (multi-issue) situation and have easy and affordable access

4. HEALTH INFORMATION OFFERING

Availability of health information that is both evidence-based and tailored

5. FOSTERING CRITICAL APPRAISAL (CITIZENS)

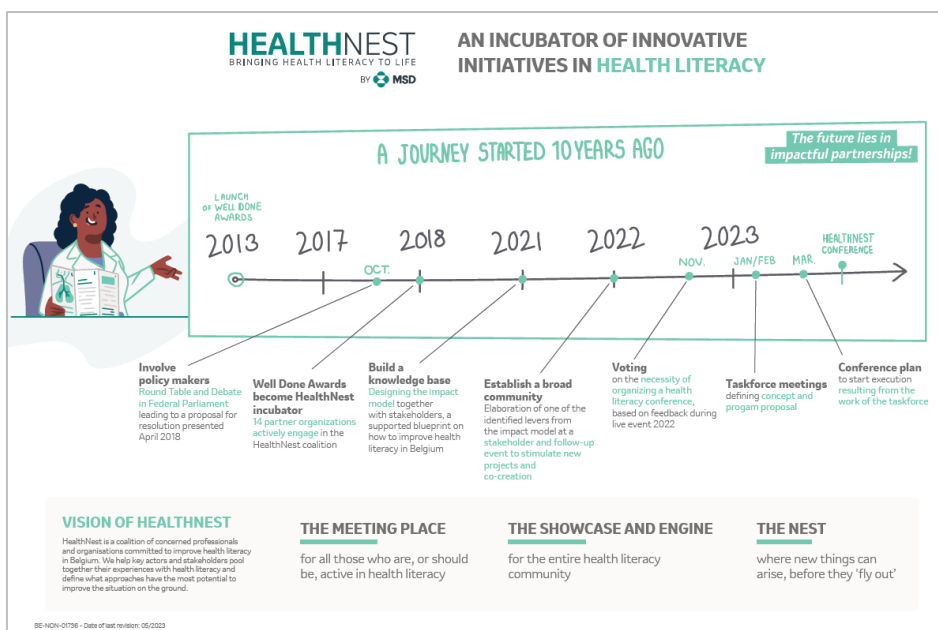
Citizens can make well-informed choices based on personally relevant information



Introduction

In 2022, HealthNest held its first co-reflection event on the theme “Health literacy in Belgium: from ideas to action”. The aim of the event was to co-create sustainable change by sharing experiences, ideas, and initiatives to enable a crucial transformation of our healthcare system. The outcome of the event was a list of 15 key initiatives to promote health literacy in Belgium in the near future.

In June 2023, HealthNest organised the first Belgian health literacy conference to zoom in on a second theme “capacity building and impactful partnerships”. The conference brought together more than 100 people from over 40 organisations.



Several organisational initiatives were presented at the conference in the form of keynote sessions, interactive breakout sessions, and networking moments. This whitepaper builds further on the output of the conference by providing inspiration and levers for people that choose to accelerate the ways to address health literacy in their own organisation. The whitepaper is structured around four domains on which organisations can take action to meaningfully advance health literacy³:

1. Organisation
2. Products and services
3. Community
4. Ecosystem

Each chapter contains real-world examples related to different actions as well as suggestions for key performance indicators (KPIs) to measure impact. An additional chapter is dedicated to governmental influence and, to conclude, the document offers practical guidance on the road ahead for organisations and how they can be supported by governments and policy makers.



Organisation

This chapter refers to how an organisation addresses health literacy among their members: how can organisations offer information in line with health literacy principles to make an impact and demonstrate commitment? The subject of health is increasingly recognised as a pivotal component of well-being and productivity. When looking at their own teams, organisations are identifying real needs and barriers to health, such as mental health struggles or difficulties to maintain a healthy lifestyle (e.g., healthy sleeping and eating habits).

Organisations can undertake several actions to embed health literacy:



1. Build health literacy into the business strategy



2. Strive for active involvement from all employees



3. Go “on the record” with commitments to health literacy



4. Measure impact

1. Build health literacy into the business strategy

Health literacy and broader, health equity, should be part of your organisation’s activities. Initiatives to advance health literacy should not be separate or siloed. Integrating process and outcome metrics that account for health literacy into your business objectives and organisational KPIs can accelerate adoption.

The current state of your organisation’s culture and capabilities are the starting point to design your strategy. Knowing that current state will help you to define your ambition and translate that ambition into a strategic roadmap.





Organisation

1.1 Defining current state by performing a health literacy assessment

Typically, diverse employee groups encompass varying levels of health literacy and educational preferences. An effective way of understanding the specific challenges of your workforce (current state) is to perform a health literacy assessment.

Assessing health literacy poses several challenges due to the complex and multifaceted nature of this concept:

- Health literacy encompasses a broad range of skills and abilities, including reading, understanding, numeracy, communication, and critical thinking, making it difficult to create a one-size-fits-all assessment tool.
- Cultural and linguistic diversity exists among populations.
- Health literacy assessments often rely on self-reporting, which can be influenced by social desirability bias. Shame may exist about limited health literacy. Therefore, assessments should be carried out with sufficient attention to privacy and ethics.
- The rapidly evolving nature of healthcare and information technology means that assessments must be regularly updated to remain relevant and reflective of the contemporary health landscape.

However, substantial work has been done in this field and to date, health literacy has been measured using a variety of tools and surveys designed to assess an individual's ability to access, understand, evaluate, and apply health-related information. Several assessments have been carefully developed and, in some cases, have been performed periodically. The Health Literacy Survey Europe (HLS-EU) study⁴ as well as the European Health Literacy Survey (HLS) by the Action Network on Measuring Population and Organisational Health Literacy (M-POHL)⁵ are examples of consensually agreed-upon tools to measure health literacy at a population level. In Belgium, the tools have been used by Sciensano for their periodical Health Interview Survey (HIS)⁶ among the Belgian population.

An organisation could benefit from existing tools and resources, but could also decide to develop its own assessment, for example to understand if employees know where to find health related policies and documentation and/or display knowledge of what is described in these documents. Next to identifying gaps in health literacy, the results of the assessment can serve as inspiration or input to develop a (long-term) strategic roadmap and can be translated into practical initiatives such as the development of educational materials or training sessions to increase responsibility and involvement from all employees.

In addition to assessments of individuals, specific models of health literate (healthcare) organisations have been developed to guide and assess organisations. We present three of these models, each slightly differing in focus and intent:





Organisation

- The Institute of Medicine (IOM) developed the Ten Attributes of Health Literate Healthcare Organisations⁷, listed below. These attributes cover metrics for both the organisation itself but also for its products and services, which will be discussed in the next chapter. Although the Ten Attributes have been designed for healthcare organisations, many of the attributes can serve as inspiration for organisations in general.
- Another well-known model is the Vienna Concept of Health-Literate Hospitals and Healthcare Organisations (V-HLO)⁸. This model adopts the settings approach to health promotion, aiming to apply health literacy in and beyond healthcare organisations. It specifically focuses on the health literacy of patients, healthcare providers, organisations and the overall population.
- Lastly, the Organisational Health Literacy Responsiveness (Org-HLR) framework⁹ considers organisational health literacy (OHL) as a response of healthcare organisations to the needs of the community and asserts that systemic change is required to address low health literacy.



TEN ATTRIBUTES

A health literate healthcare organisation⁷:

1. *Has leadership that makes health literacy integral to its mission, structure, and operations.*
2. *Integrates health literacy into planning, evaluation measures, patient safety, and quality improvement.*
3. *Prepares the workforce to be health literate and monitors progress.*
4. *Includes populations served in the design, implementation, and evaluation of health information and services.*
5. *Meets the needs of populations with a range of health literacy skills while avoiding stigmatisation.*
6. *Uses health literacy strategies in interpersonal communications and confirms understanding at all points of contact.*
7. *Provides easy access to health information and services and navigation assistance.*
8. *Designs and distributes print, audiovisual, and social media content that is easy to understand and act on.*
9. *Addresses health literacy in high-risk situations, including care transitions and communications about medicines.*
10. *Communicates clearly what health plans cover and what individuals will have to pay for services.*



Organisation

2. Strive for active involvement from all employees

Health literacy is everyone's responsibility and should be embedded in all organisational functions to set new industry norms for improving health and to ensure accountability. Increasing involvement starts by increasing awareness. By providing internal resources for health literacy, organisations can simultaneously cultivate a more informed and empowered workforce and accelerate their efforts to address health literacy.

There are several ways to increase awareness and involvement. Moreover, organisations can collaborate with existing initiatives and centres of expertise, to offer great learning opportunities for their employees.



2.1 Appoint a health literacy expert

The role of a health literacy expert is to create awareness about health literacy, teach strategies and share stories about the importance of health literacy. Appointing a health literacy expert, e.g., in the care manager team or in the committee on prevention and protection at work, will help you to realise your (health literacy) ambitions and monitor outcomes.

2.2 Develop educational materials

The development of educational materials and databases, including references to existing resources like the Mensura blog¹⁰, provides a solid foundation for an organisation to enhance their members' health literacy. By developing materials with targeted messaging for a diverse team, organisations can empower members to make informed health decisions. For instance, materials in multiple languages cater to a linguistically diverse workforce and may





Organisation

cover health topics (e.g., mental health, nutrition, ...) that are particularly relevant to various age groups or cultural backgrounds. The materials can take different formats ranging from physical posters, infographics, and brochures to online resource databases, learning modules, and interactive apps. It is important that the format and messaging resonates with your members' learning abilities, which can also be questioned in the previously mentioned health literacy assessment.

2.3 Invest in training of the workforce

An informed workforce is a vital resource in ensuring that employee well-being and health literacy are addressed at all levels. When managers and employees are equipped with the skills to communicate health information effectively, they become conduits for promoting informed decision-making. Training should be offered at all levels, whether this be manager training, the establishment of health literacy experts within the organisation or the integration of health literacy education in onboarding.



DEEP DIVE: Proactive mental health training can benefit the workplace by:



1. *Teaching healthy work habits*

2. *Reducing stigma*

3. *Explaining employee rights*

4. *Flexibility options*

Team leaders in particular should be able to model their own mental health practices to the team. Open conversations about the individual needs of team members and their mental health should become widespread practice. More and more large organisations offer specific mental health support for their employees by offering free access to 1:1 therapy and coaching sessions. However, appropriate prioritising, budgeting and proactive communication about these initiatives are key for achieving positive impact throughout the organisation.



Organisation

3. Go “on the record” with commitments to health literacy

Ensure your workforce knows the organisation’s commitments and initiatives on health literacy. Integrating health literacy into existing corporate initiatives and creating new initiatives makes health information an integral part of the organisational culture. Organisations can leverage various communication channels and language to disseminate health information to cater to different learning styles.

Some examples of initiatives and communication include:

- Dedicate a tab or page to all health-related content in an existing app for organisation-wide communication
- Consider health next to other impactful topics like mobility or sustainability as one of the recurring themes for inspirational sessions, possibly supported by guest speakers
- Include health and health literacy initiatives in volunteering and community reach-out days
- Organise team building activities around understanding mental health and improving mental health within the team
- Offer a first aid training within the training portfolio
- At municipality or city level, strive for a health literate municipality/city, possibly through a certificate programme¹¹, that could be tracked



4. Measure impact

Measurement is the only way to know if outcomes are improving or worsening. Within an organisation, several KPIs* can be analysed:

- Health literacy assessment scores
- Engagement in health education and health literacy initiatives
- Use of organisational health resources
- Rate of health-related questions directed to HR, etc.
- Engagement in health-related activities (organisation provided vaccination campaigns, wellness check-ups)
- Employee well-being scores

**More detailed KPI descriptions can be found in Appendix III*





Products and services

As organisations implement strategies to address health literacy within their own environment, there is an opportunity to extend these principles seamlessly to their audience through their products and/or services.

Although products and services highly differ across organisations, there are some common questions that organisations can ask:



- *How can we integrate health literacy within our existing (core) products and/or services?*
- *How can we integrate health literacy in our supporting services?*
- *How can we offer our products and/or services in a health literate friendly way?*
- *How can we tailor our messaging to our audience?*

Addressing health literacy through products and/or services is not just beneficial for the organisation but also a means to contribute to people empowerment and improved societal health outcomes. When people are equipped with comprehensive health information, they are better positioned to adopt healthier lifestyles and have a concrete understanding of the intricacies of their own health and health decisions.

Organisations may consider some of the following actions to address health literacy within their products and/or services:





Products and services

1 Integrate health literacy within existing (core) products and services

Integrating health literacy into existing products and services has the benefit of reaching a large audience while uplifting individual health literacy at the same time. For example:

- Integrating health literacy in educational programmes at schools or educational institutions
- Developing digital health apps
- Traditional and social media providers can highlight health literacy initiatives to their audiences (see example below)

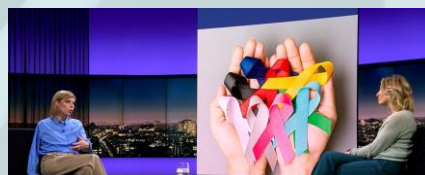


Example: Reporting on initiatives like Klare kijk op Kanker



Freya Rowaert has been living with cancer for over 20 years. In order to support others with cancer, she launched the information platform, Klare kijk op Kanker (Clear view on Cancer). With the platform, she aims to guide patients through the oncology journey and to provide answers to questions that every cancer patient faces.

As she provides patients and those around them with clear information, Freya makes the topic of cancer accessible to discussion. And through sharing her own experiences she also provides moral support. Television/radio/podcast providers and news sites already reported on Freya's story and initiative. But any organisation with a (social) media platform could leverage their presence and their communication channels to give a voice to people like Freya who are making an impact.





Products and services



DEEP DIVE Considerations concerning digital health apps

In addition to education and communication, another way to reach large audiences can be through the development of health-related apps which track health metrics and offer educational content relevant to those metrics. Apps can easily provide suggestions and guidelines for people to improve their understanding of products and the impact on health.

Personalised health apps can provide key insights on their own health behaviours and how their decisions contribute to their overall health status. However, when using or working with health apps there are considerations to keep in mind:

- **Digital health literacy:** Many individuals struggle to cope with the overwhelming availability of health information on the web and social networks, particularly (but not only) older persons, who are often facing a higher need for care. Overreliance on digital health tools, including apps, could exacerbate existing inequalities and create a deeper divide in healthcare access and understanding.
- **Correctness and completeness of information:** The large amount of health-related apps raises concerns about the correctness and completeness of their content. Many apps offer little more than a digital representation of information already accessible through traditional means. In addition, excessive tracking of health metrics like heart rate can lead to unnecessary anxiety and concern.
- **Intentions matter:** The intentions of those behind the digital health apps may not always prioritise patient well-being and digital health literacy.

There is a growing awareness that not all aspects of the digital health landscape are unequivocally positive. To address the considerations above, a balanced approach is necessary, recognising the potential benefits of health apps while remaining mindful of their limitations and potential consequences.



Products and services

2. Integrate health literacy within support services

Providing professional health support (e.g., guidance, information) to people, whether through chat support or through individualised consultations, can help them in gaining a more holistic understanding of their health, their diagnoses, and the use of products in aiding their overall health. Integrating health support within an organisation's communication and support services improves the overall experience of the audience.



Example: MLOZ addressing polypharmacy related issues

onafhankelijke
ziekenfondsen

mutualités
libres

The Mutualités Libres / Onafhankelijke Ziekenfondsen (MLOZ) groups three health insurance funds in Belgium.

Polypharmacy or polymedicine refers to the treatment of multiple conditions by using multiple drugs. Polypharmacy is most common in older populations and comes with an increased risk for medication errors, lower adherence, drug–drug interactions, adverse events, related hospitalisation and reduced quality of life.¹²

According to the 2021 study by MLOZ on polypharmacy, 4 in 10 people over 75 years old in Belgium are taking at least 5 medicines per day on a long-

term basis. They also found that often multiple doctors and pharmacists are involved in prescribing and dispensing medication to the same patient. Sometimes these drugs are not recommended for the elderly.

Therefore, MLOZ launched a sensitisation campaign including:

- Education of patients and their caretakers through a folder on polypharmacy: Q&A based, easy to comprehend, available online and reviewed by the national pharmacist associations APB and OPHACO
- Identification of elderly with polypharmacy and contacting them by email and phone: the outreach was highly appreciated with an acceptance rate of 70% of proactive telephone contact



Products and services

3. Present products and services in line with best practices for health literacy

Developing materials or tools that are easy to understand and/or interactive can increase interest of people to actively engage with their health and health products. These tools should be easy to use and help people to understand how to use your product safely and effectively, e.g., an indication of the nutritional value on food packaging or a volume-limiting feature on headphones. Full user guides and tutorials can be useful for more complex products, such as medical devices or technology-enabled wearable health tools.



Example: Picto Pharma

With **Picto Pharma**, Pharmacy.brussels created a visual aid to overcome language barriers between pharmacists and patients. Based on different pictograms, a medication plan can be created, and the patient can be informed in a comprehensive way on when and how to use their medication. **Picto Pharma** received the “well done award” of MSD in 2017.

4. Tailor messaging to different audiences

Different audiences might have different health literacy strengths and limitations. Organisations should invest in making health information and resources available and accessible to people in line with their level of health literacy.



An excellent way to ensure that information is accessible to people according to their health literacy strengths and limitations is to include representatives of target audiences during the planning and development stages of new project, products, services, materials, etc.





Products and services

Example: Patient panel at regional hospital Heilig Hart Tienen

rz **tienen**

The regional hospital Heilig Hart Tienen has initiated a patient panel consisting of 15 carefully selected people, acting as the voice of the patient. In the panel, patients share their needs, but are also asked to give their advice, thoughts and concerns on certain topics to co-create care with the hospital management:

- Requirements for the new hospital building
- Accessibility of care
- Information sharing with patients in the emergency care area

With the input from the panellists, the hospital can better tailor communication and messaging to all patients. Topics are specifically designed and presented in a simple and comprehensive way, allowing panellists to understand the information and interact effectively with the hospital management.

5. Measure impact

Organisations can also monitor the impact of integrating health literacy in their products and services by looking at one or more of below KPIs*:

- User engagement with educational content
- Feedback ratings for product use
- Completion rates of health modules
- Usage rates of interactive health tools
- Rate of support interactions
- Awareness of product health features
- Product and service referral rates

**More detailed KPI descriptions can be found in Appendix III*





Community

An organisation's community is composed of individuals, organisations, and groups that impact and are impacted by the organisation, including organisations that offer similar services or products, but also vendors, audiences and investors. Businesses do not operate in isolation, so health literacy should be achievable throughout their communities.

Communities can be found at different levels. A particular industry (e.g., mobility, healthcare, media and technology, education, etc.) can be seen as a community, where public and private organisations as well as individuals all play their part. In other communities, stakeholders may be part of a community because they address the, often multi-faceted, challenges for the same population (e.g., youth, elderly, parents, students, etc.). Additionally, there are geographic, economic (e.g., ports, airports, etc.) and cultural communities or communities that are simply built around a shared interest (e.g., sports, art, etc.).

In this section, we highlight the ways to impact health literacy within your community:



1. Invest in health literacy initiatives

A possible way to make an impact in a community is to invest in existing initiatives in that community. Often, great work is already being done but smaller initiatives do not always have the means to reach large target audiences.

In order to select effective initiatives and partnerships to invest and/or engage in, it is important to establish clear health literacy and health equity values. Ideally, these values translate into well-defined objectives on the value you want to bring and the communities or audiences you want to reach. When a strong framework is in place, candidate initiatives can be assessed based on straightforward criteria fitting with the values and objectives of your organisation.





Community

Example: Learning network on Organisational health literacy by the King Baudouin Foundation



The King Baudouin Foundation (KBF) states that difficulties with the healthcare system encountered by patients can only be understood in the organisational context of healthcare. Therefore, KBF is investing in improving organisational health literacy. More specifically, a learning network was created in which 18 organisations participate and exchange knowledge and experience. The learning network aims to look into **five key challenges**:

1. Permanently embed health literacy in the mission, structure and operation of the organisation
2. Build health literate relationships between health and wellness professionals and users
3. Develop health literacy language, action and perceptions
4. Co-create with users throughout the care pathway
5. Learn and evaluate together across organisational boundaries

Organisations in the KBF learning network:

- *I Care asbl*
- *MM Le Noyer*
- *Médecins du Monde Belgique*
- *Cap Santé asbl*
- *Bras dessus Bras dessous*
- *MM MediCi*
- *AIGS*
- *MM Walhéroise*
- *Oscare vzw*
- *Logo Midden-West-Vlaanderen vzw*
- *OCMW Vorselaar*
- *Vzw Huisartsen Midden West-Vlaanderen*
- *Verbond van Socialistische Mutualiteiten*
- *Eerstelijnszone Dender vzw*
- *Dienst Regie Gezondheid en Zorg Stad Gent*
- *Wijkgezondheidscentrum De Ridderbuurt vzw*
- *De Katrol Oostende vzw*
- *Eerstelijnszone Mechelen-Katelijne*





Community

2. Collaborate to reach a broad audience

In order to bring value to a broader community, collaborations between different parties, each bringing a unique set of expertise, are required to develop, build and distribute a sustainable solution. Based on a shared vision and aligned goals on promoting organisational health literacy, collaborators can implement initiatives that both address health literacy and cultivate a sense of shared purpose.



Example: Community health workers

In early 2021, the Council of Ministers gave its approval for the launch of the community health workers project in Belgium. The mission of community health workers is to make care more accessible. The health insurance funds helped shape the project. More specifically, the community health workers have the task of guiding people in socially vulnerable situations to primary healthcare and making them familiar with it. They contact and visit people to inform them about health and care. Together, the health insurance funds currently employ about 50 community health workers helping the most vulnerable people on their way to, for example, a GP, pharmacy, dentist, psychologist, etc. An additional benefit is that these people are very well placed to notice structural problems or inequalities in access, allowing these barriers to be exposed and tackled.





Community

Example: Sensoa – Zanzu

Sensoa is the Flemish expertise centre for sexual health. In 2016, they launched Zanzu, a website about sexual health in 14 different languages, which was developed in collaboration with The German Federal Centre of Health Education (BZgA).



Sexual health is not an easy topic to discuss.

When healthcare providers and patients don't speak the same language, that challenge becomes even greater. Therefore, Zanzu is a great help to break taboos and remove the language barrier while respecting cultural diversity. The site is greatly appreciated by general practitioners as well as people who recently moved to Belgium (or Germany) and do not (yet) speak Dutch, French or German very well. In order to ensure its quality, all information related to the body and sexuality on Zanzu is reviewed by sexologists and doctors. The explanations are objective, easy to understand, and supported by clear drawings. Furthermore, in order to allow optimal doctor-patient conversation, two languages can be shown side by side and the information can be read aloud by the site. Outside the doctor's office, Zanzu can be accessed from anywhere to educate oneself in private.

For the future, Sensoa envisions further internationalisation and modernisation of the platform. The latter objective mainly requires up to date content which evolves together with its audience and system security in line with recent technologies and regulations.

From the Zanzu example, we derived six best practices for organisations considering the development of (online) sources of information:

1. **Prioritise easily accessible websites and materials** aiding in doctor-patient communication (specifically in case of sensitive topics: avoiding the need for downloads and/or subscriptions)
2. **Ensure correctness as well as objectivity** of information across different languages
3. **Communicate and distribute trusted tools and sources**, possibly through healthcare providers and official (national) instances
4. **Collaborate with other organisations** to address unmet needs, achieve common goals and avoid redundancy
5. **Build an agile source of information**, using recent technologies and allowing regular updates to avoid complex and eventually outdated systems
6. **Adhere to strict cybersecurity and privacy regulations**



Community

3. Collaborate to bring deep expertise to a specific community

Sometimes, the purpose of a collaboration is not necessarily to reach more people but rather to bring a deep expertise and/or a unique angle to the lived experiences of specific communities. Various national and international patient societies play an important role in addressing the needs of specific groups of patients and their families and caregivers. However, any organisation has the capability to launch a collaborative initiative in order to take a deep-dive into selected topics together with subject-matter experts.



Example: Ontboezemingen Podcast by the Breast Clinic Lier

The hospital Heilig Hart-ziekenhuis Lier launched a podcast created with and for (former) breast cancer patients. Under the title **Ontboezemingen (Outpourings)**,

radio host Ann Reymen talks with six women who have been diagnosed with breast cancer in the (sometimes recent) past. Podcasting is an increasingly accessible and popular channel for broad audiences and is perfect to give a forum to health and health literacy related topics as well as to create community. Cancer is a complex disease and patients need to navigate a complex health system. But on top of this, the processing of the diagnosis and the journey that follows is extremely hard and often lonely. The latter sometimes gets overlooked when focusing on dissemination of information and education only. Therefore, Ontboezemingen focuses on the experiential aspects surrounding breast cancer and chooses a subjective approach, addressing how people are coping as they go through it.



4. Measure impact

Key performance indicators*:

- Workshop/initiative attendance
- Resource utilisation
- Health behaviour changes
- Rate of accessibility and inclusivity
- Number of collaborative partnerships on health literacy
- Media engagement with health communication
- Local health policies

**More detailed KPI descriptions can be found in Appendix III*





Ecosystem

In today's interconnected world, organisations are able to have an impact on health literacy within their wider environments. By forming partnerships and utilising resources effectively, organisations can benefit not only communities and industries but society at large. When organisations strategically align their initiatives with the broader ecosystem, they can even play a pivotal role in shaping the future of health literacy.



1. Lead by example for your industry

Organisations can take a leading role within and beyond their industries by setting an example of how health literacy can be integrated into products, services, and communications. By showcasing best practices and lessons learned, they can inspire others to undertake similar initiatives, fostering a collective commitment to health literacy, health education, and empowerment.



2. Prioritise research and data sharing

Another way organisations can have an impact on health and health literacy at an ecosystem level would be through a commitment to research, data analysis, and knowledge sharing. When organisations share data and collaborate across borders, they create a collective pool of knowledge (e.g., on well-being and life-style, health outcomes, demographics, access to health, etc.) and can bring valuable insights to inform policies and practices worldwide. This collaborative approach not only accelerates the advancement of medical and healthcare knowledge but also promotes a deeper understanding of health literacy challenges and solutions on a global scale.



3. Launch global health initiatives

If an organisation has an international reach, health initiatives can extend to global communities, addressing health disparities and raising awareness about health issues that transcend geographical borders.



Ecosystem



4. Make philanthropic contributions

Organisations can allocate their resources and funding to support local health programmes conducted by non-profit organisations. Additionally, they can highlight these initiatives in stakeholder meetings to raise awareness and help bolster community-based efforts to improve health education.



5. Advocate and influence policy

Organisations can advocate for policies that prioritise health initiatives and equitable access to health resources by engaging with policy makers. They can contribute to the creation and input of policies that support an environment in which individuals can make informed decisions and subsequently improve positive health outcomes.



6. Measure impact

Key performance indicators*:

- Cross-industry collaboration
- Standardisation of health communication
- Health equity index
- Policy impact of health initiatives
- Digital health solutions
- Changes in interdisciplinary research
- Health literacy integration in educational systems

**More detailed KPI descriptions can be found in Appendix III*



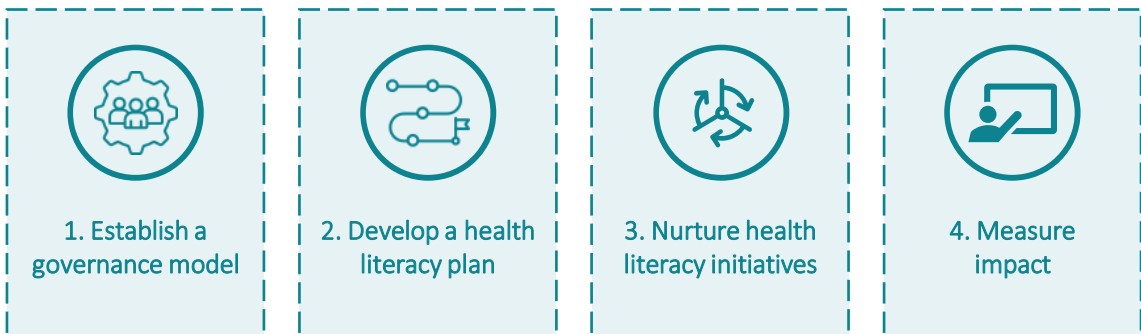
Governmental impact

Policy makers play a pivotal role in shaping the health literacy landscape within their ecosystems.

To set health objectives, Belgium's Council of Ministers has approved a preliminary draft law to form a committee for health objectives within RIZIV-INAMI. This committee has the mandate to submit proposals on health objectives for the next legislative term. The health objectives should contribute to the improvement of the health status of Belgians, reducing the existing health gap, and create a healthier environment. In order to implement these health objectives, a "health in all policies" and "whole of government approach" is necessary.

Creating health objectives is a crucial step to address health literacy and thereby reduce the existing health gap. By setting specific health goals and priorities, organisations and governments can focus their efforts on improving healthcare access, education, and awareness, which can lead to a better-informed and healthier population.

To address health literacy for the Belgian population, a combination of actions should be considered:



1. Establish a governance model

In Belgium, healthcare is a shared responsibility between the federal government and the federated entities:

- Federal responsibilities mainly include public health, social security and reimbursement.
- The federated entities (regions and communities) cover health promotion and disease prevention, the organisation of primary care, social services and community care.
- The communities are also responsible for education, which holds significant importance when taking on health literacy.





Governmental impact

1.1 Set up an interministerial protocol agreement

In an interministerial protocol agreement to address health literacy, the different governing bodies can agree on a general course of action and high-level responsibilities. Given the varied contexts of health literacy objectives in combination with the particular distribution of responsibilities between federal authorities and federated entities, this protocol agreement could help to avoid redundancy and promote efficient modes of operation.

1.2 Set up a working group



A working group that focuses on health literacy allows to convene various stakeholders, including experts from the health sector and other areas such as healthcare providers, health insurance companies, subject-matter experts, and the pharmaceutical industry. The purpose of this group is to foster cooperation in the development of a national strategy, oversee and assess its execution, pinpoint potential obstacles and challenges, and, if necessary, draft recommendations for solutions and modifications to attain the health objective.¹³



2. Develop a health literacy plan rooted in capacity building

2.1 Perform capacity mapping and capacity building

To effectively confront the issue of limited health literacy, it is key that the public health system and relevant stakeholders possess the necessary capacity. Capacity building serves as the process through which individuals and organisations acquire, enhance, and maintain the competencies required to perform their roles successfully.¹⁴





Governmental impact

DEEP DIVE CAPACITY BUILDING¹⁴

For capacity building in general, it is important to build on existing capacities of the system. Therefore, capacity mapping should be performed by analysing which capacities already exist in a public health system or country, how well they are developed, which instances take up these capacities, and how well they link together as a system. Conceptual frameworks describing the core dimensions of public health capacity can serve as a basis for identifying and addressing health literacy challenges.

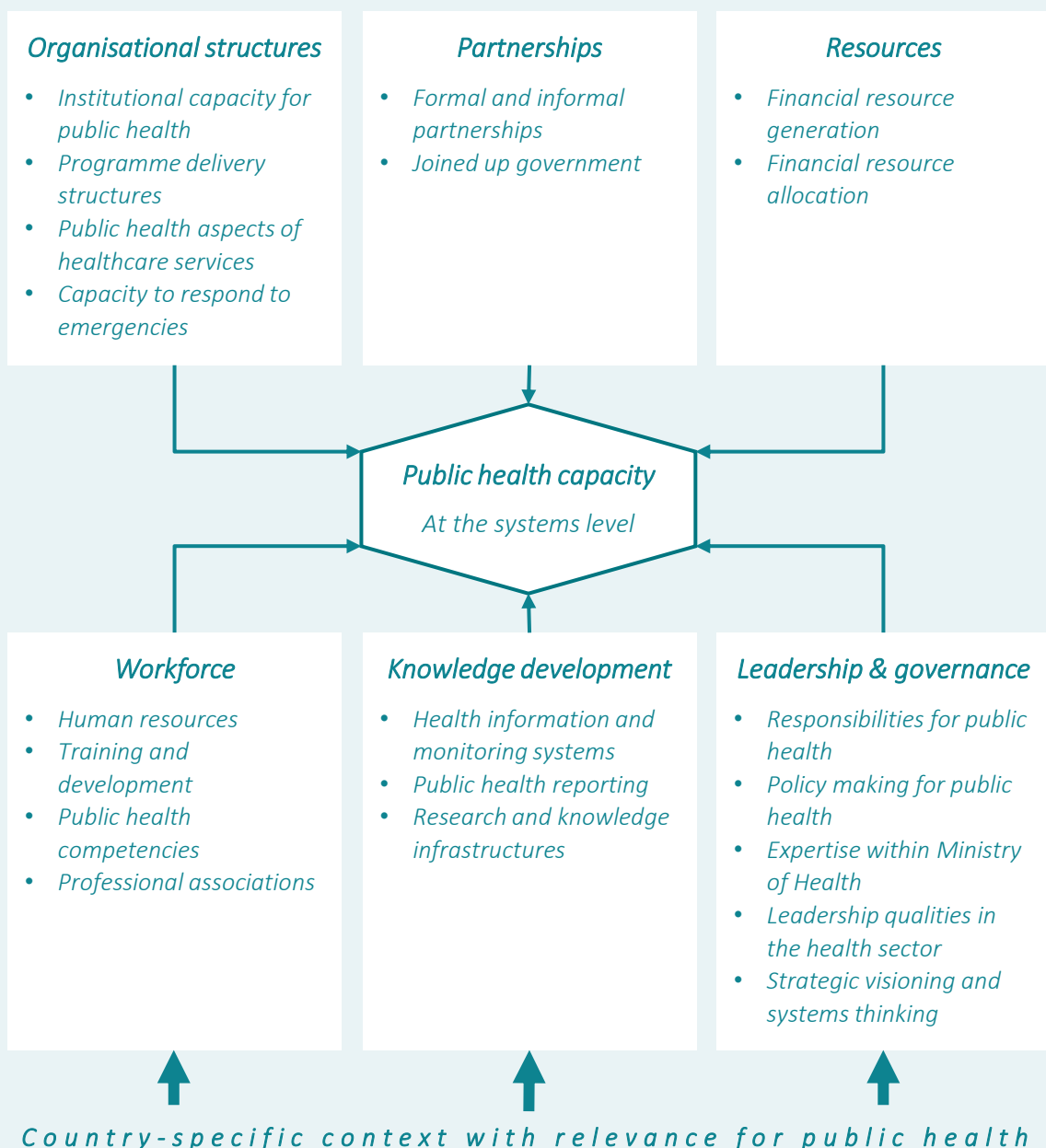


Figure: Conceptual framework for public health capacities¹⁴

Source: Reproduced from Aluttis et al (2014)



Governmental impact

2.2 Write a health literacy plan

Develop a comprehensive health literacy plan for citizens, organisations and healthcare providers, paying special attention to the needs of groups with limited health literacy. Ideally, this plan also formulates a health literacy objective that the committee for health objectives within RIZIV-INAMI can consider for the next legislative term.¹³

Multiple approaches for the development of a health literacy plan are still possible for Belgium (see deep dive). Regardless of the selected approach, it will be important to consider the concepts of capacity mapping and capacity building, as described in 2.1, to effectively address health literacy.



DEEP DIVE The development of a health literacy plan²

As detailed in KCE REPORT 322, countries are taking different approaches to developing a health literacy plan. Each approach, whether bottom-up or top-down, has its strengths and challenges, and the choice depends on the specific context and priorities of the country. We will briefly go over the three paths discussed in the KCE report.

Conceptual approach - This approach focuses on establishing a clear framework and theoretical foundation for understanding and improving health literacy. Governing bodies take the lead in defining the core concepts and principles of health literacy, creating a common language for stakeholders to work from. One such example is Austria, which set ambitious health targets that aligned with the WHO's recommendations. While these targets would be ideal to achieve high health literacy rates, the targets serve more as declarations of intent with limited implementation power. In Belgium, interest has been shown within the federal government for creating a similar policy, but health literacy has not yet been embedded in any official legislation.

Pragmatic approach - The pragmatic approach emphasises practical, actionable strategies to enhance health literacy at the ground level. Governing bodies play a hands-on role by implementing policies and regulations that promote accessible health information, clear communication in healthcare settings, and patient-centred care. Scotland, for example, first targeted their healthcare sector in order to improve health literacy and later expanded their scope to cover additional sectors with significant social impact. In Belgium, the current reformation of the hospital landscape could be used to introduce health literacy into the functioning of the new institutions. In addition, there are new opportunities for primary care by the Vlaams Instituut voor de Eerstelijns (VIVEL) and the Plateforme de Première Ligne Wallonne (PPLW).

"No plan" approach - The "no-plan" approach recognises that the health literacy landscape can be advanced through programmes and activities without necessarily having an overarching policy. In this approach, governing bodies can delegate initiatives on health literacy to civil society like it is the case in the Netherlands and Ireland.

Currently, Belgium has dynamic civil actors and centres of excellence for health literacy instead of federal legislation. The KCE report specifically mentions two ongoing initiatives, the Daniel De Coninck Fund for primary care and HealthNest, which address a national level and could eventually advance policymaking.



Governmental impact

3. Nurture health literacy initiatives

3.1 Raise awareness for health literacy

Bring the importance of health literacy to the attention of organisations, individuals and healthcare providers through targeted training, exchange of good practices and actions.¹³

3.2 Centralise resources

The establishment of a centralised platform would allow to make comprehensive but practical tools accessible to various stakeholders within the ecosystem, including healthcare providers, organisations and individuals. As proven in Scotland with the Health Literacy Place¹⁵, a website supporting Scotland's health literacy action plan (Making it Easier), a centralised hub can help to streamline efforts and enhance collaboration in addressing health literacy.

3.3 Adapt to your audience

Design health literacy actions based on the needs of individuals and groups with health literacy gaps. Tailor communication strategies to the skills and abilities of these individuals and groups, provide health information in multiple languages, adapt messaging to cultural differences and explore the possibility of providing learning opportunities visually and interactively.¹³

3.4 Build competencies

Place emphasis on more than just the transfer of knowledge, also work on enhancing essential skills such as communication, critical thinking, motivational and social support, as well as coaching.¹³



4. Measure impact

Design a health literacy index to map the health literacy of the Belgian population with a particular focus on vulnerable groups.¹³

Key performance indicators*:

- Compliance with policy integration
- Education curriculum integration
- Health communication accessibility
- Healthcare utilisation patterns
- Integration of health literacy in government services

**More detailed KPI descriptions can be found in Appendix III*





What's next

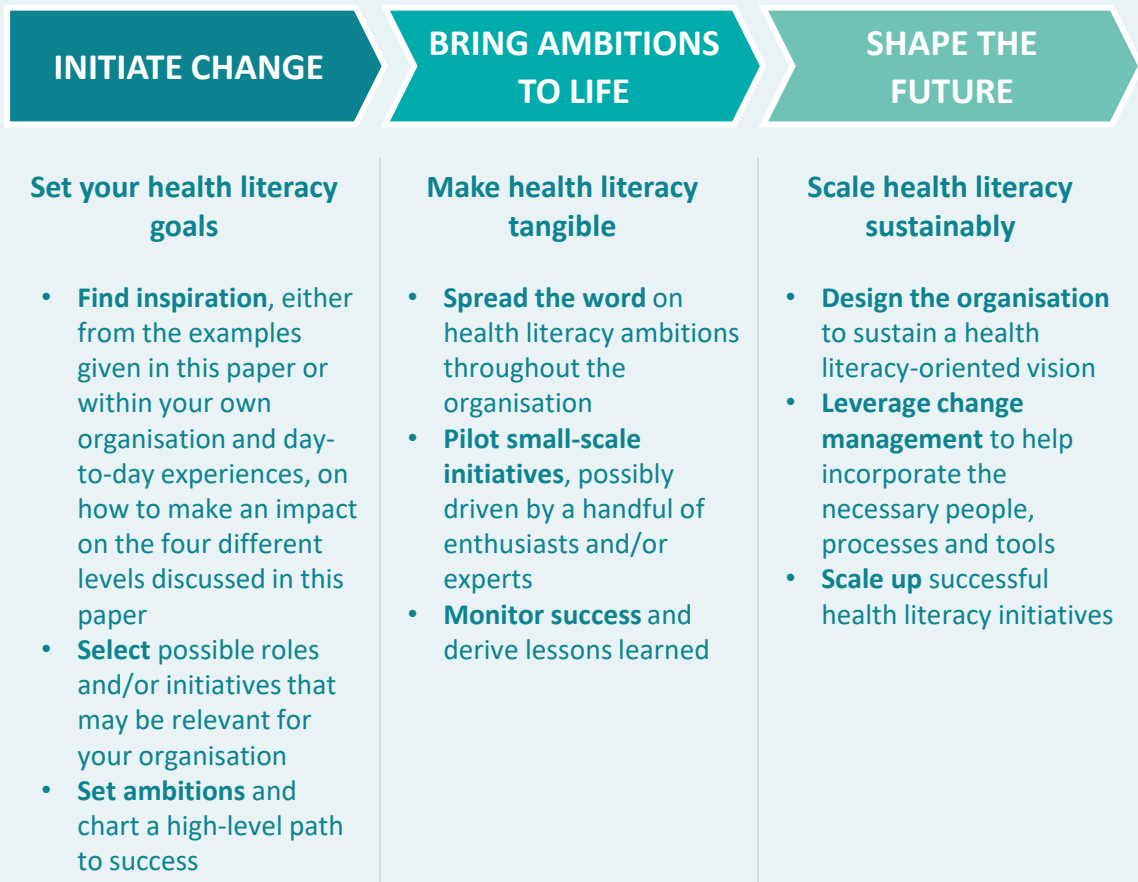
At the start of this whitepaper, we highlighted the importance of health literacy as a critical aspect of improving public health outcomes and empowering individuals to make informed choices about their health and well-being.

Then, we addressed how organisations can act now and play a role on four different levels: in their own organisation, through their own products and services, in their own community and through the ecosystem to which they belong. While it is indeed key for organisations and individuals to act on the short term, ideally, those actions also fit within a larger plan of improving health literacy on a local, regional and global scale supported by governments and policy makers.

In this concluding chapter our aim is (1) to help organisations to initiate change, bring ambitions to life and shape the future, and (2) to describe how governments and policy makers can support this process.

1. Getting started with your organisation

How can you get started within your organisation? In general, an organisational transformation follows a three-step approach¹⁶:

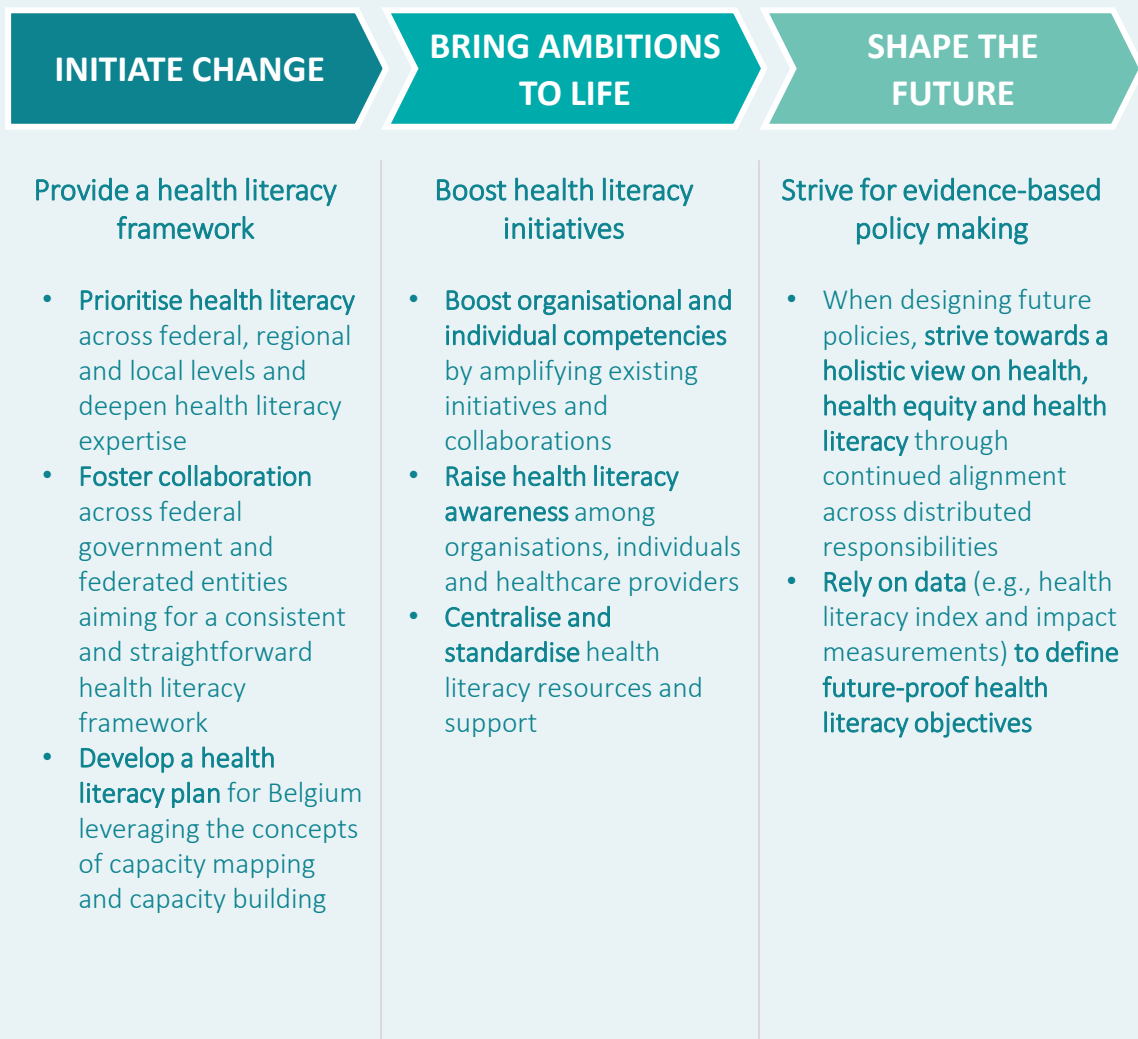




What's next

2. Accelerating health literacy as a policy maker

Where to begin as a policy maker? Since policy makers can support organisations and individuals along the different steps in their process, we follow the same three-step approach:



HealthNest is committed to continuing to support organisations on a short-term but also in the long run.





Appendix I – Methodology

Discussions on health literacy between various stakeholders during the HealthNest conference have been captured and are represented throughout this document. In addition, further information on health literacy was gathered by searching the scientific and grey literature and through interviews with key opinion leaders.

HealthNest conference

The HealthNest conference was held on 12 June 2023. During breakout sessions, inspiring examples of initiatives to address health literacy were presented and sparked constructive discussions between various experts, professionals and stakeholders. Ideas and examples from these discussions were documented and used as input for this paper.

Targeted literature review

A targeted literature review was performed through a search in PubMed, a leading database for life sciences and biomedical sciences literature, using the search terms ‘health literacy’ and ‘health literacy capacity building’. To further identify key publications, the webpages of organisations including the Council of Europe (COE)¹⁷, the European Federation of Pharmaceutical Industries and Associations (EFPIA)¹⁸, the U.S. Food and Drug Administration (FDA)¹⁹, and the World Health Organisation (WHO)²⁰ were searched using Google Advanced Search and the search term ‘health literacy’. Previous work from the Deloitte Health Equity Institutes and the Deloitte Center for Health Solutions on health equity and health literacy was consulted as well as the health literacy intervention framework developed by HealthNest and pharmaceutical company MSD.

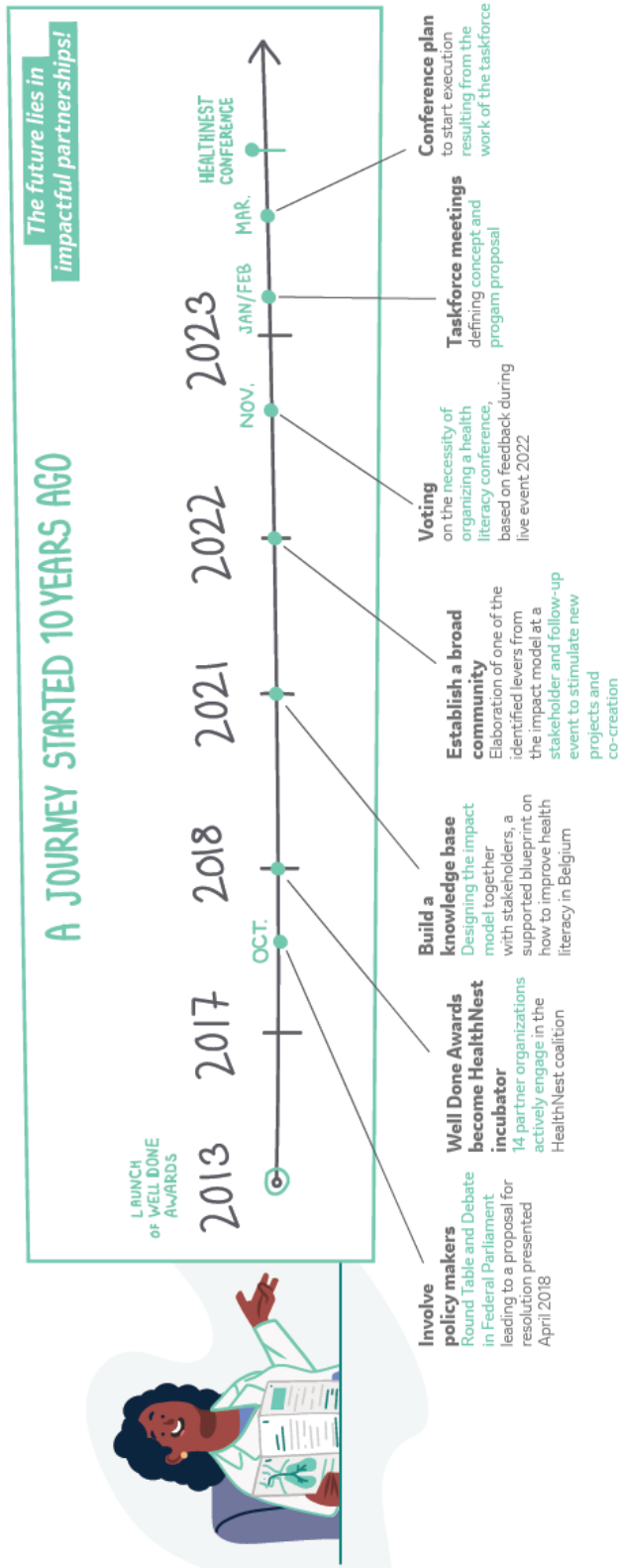
Key opinion leader interviews

To complement the literature review, a series of semi-structured interviews were held with Key Opinion Leaders (KOLs) from the life sciences and pharmaceutical industry, academia and patient organisations. The interviews were adapted based on new insights gained from previous interviews, as well as the interviewees’ field of expertise.



Appendix II – HealthNest

HEALTHNEST BRINGING HEALTH LITERACY TO LIFE BY MSD AN INCUBATOR OF INNOVATIVE INITIATIVES IN HEALTH LITERACY



VISION OF HEALTHNEST

HealthNest is a coalition of concerned professionals and organisations committed to improve health literacy in Belgium. We help key actors and stakeholders pool together their experiences with health literacy and define what approaches have the most potential to improve the situation on the ground.

THE MEETING PLACE

for all those who are, or should be, active in health literacy

THE SHOWCASE AND ENGINE

for the entire health literacy community

THE NEST

where new things can arise, before they 'fly out'



Appendix III – KPIs (1/3)

KPIs on an organisational level:

KPIs	Key performance indicator definitions
Health literacy assessment scores	<i>Regularly assess the health literacy levels of employees, possibly by using the standardised tools or assessments mentioned in this whitepaper.</i>
Engagement in health education and health literacy initiatives	<i>Monitor the number of employees participating in health-related workshops, seminars, and wellness programmes.</i>
Use of organisational health resources	<i>Measure the usage (website visitors, file downloads, platform or app users, ...) of health-related resources, such as digital platforms, educational materials, and tools provided by the organisation.</i>
Rate of health-related questions directed to HR, etc.	<i>Monitor the number of health-related queries directed to HR or organisational resources; a reduction of questions along with high use of resources may suggest that employees are finding answers through improved health literacy resources.</i>
Engagement in health-related activities (organisation provided vaccination campaigns, wellness check-ups)	<i>Track the percentage of employees engaging in preventive health activities, such as screenings, vaccinations, and wellness check-ups—higher overall engagement indicates the organisation is reaching larger audiences, which may indicate increased awareness around proactive health behaviours. Actual participation rates may be heavily dependent on various factors so interpretation should take a broader context of activities into account.</i>
Employee well-being scores	<i>Incorporate health-related indicators into overall employee well-being assessments—improvements can reflect the effectiveness of health literacy initiatives.</i>

KPIs for products and services:

KPIs	Key performance indicator definitions
User engagement with educational content	<i>Monitor the level of engagement with educational materials and resources provided alongside products and services.</i>
Feedback ratings for product use	<i>Analyse feedback, ratings, and reviews related to the health information provided with products and services.</i>
Completion rates of health modules	<i>Track the percentage of people who complete health related tutorials, modules, or guides offered with products.</i>
Usage rates of interactive health tools	<i>Measure the usage of interactive tools that help people understand product usage, benefits, and potential health implications.</i>
Rate of support interactions	<i>Assess how often people reach out to support services for health-related information.</i>
Awareness of product health features	<i>Survey people to determine their awareness of health-related features, benefits, and potential risks associated with products.</i>
Product and service referral rates	<i>Track the number of people who refer products or services to others based on the health information provided.</i>



Appendix III – KPIs (2/3)

KPIs on a community level:

KPIs	Key performance indicator definitions
Workshop/initiative attendance	Monitor attendance at health literacy workshops and educational events.
Resource utilisation	Track the usage of health literacy resources, such as printed materials, online content, and digital tools, within the community.
Health behaviour changes	Measure changes in health-related behaviours within the community, such as increased exercise, healthier eating habits, and improved medication adherence.
Rate of accessibility and inclusivity	Evaluate the accessibility and inclusivity of health literacy initiatives across diverse segments of the community, including different age groups, ethnicities, and socioeconomic backgrounds.
Number of collaborative partnerships on health literacy	Measure the number of partnerships established with local organisations, healthcare providers, and educational institutions to support health literacy initiatives.
Media engagement with health communication	Analyse media coverage, social media engagements, and community discussions related to health literacy initiatives.
Local health policies	Track any influence health literacy initiatives have on the creation or modification of local health policies.

KPIs on an ecosystem level

KPIs	Key performance indicator definitions
Cross-industry collaboration	Measure the number of collaborations and partnerships established between organisations from various industries to collectively address health literacy and equity issues.
Standardisation of health communication	Evaluate the extent to which health communication is standardised across different sectors, ensuring consistency and clarity in health messages conveyed to the public.
Health equity index	Develop an index to measure the degree of health equity achieved within the ecosystem, considering factors such as accessibility to healthcare, education, and social determinants of health.
Policy impact of health initiatives	Measure the influence of ecosystem-level health literacy efforts on the development and implementation of health-related policies at local, regional, and national levels.
Digital health solutions	Measure the adoption and utilisation of digital platforms and technologies that promote health literacy across different sectors, contributing to a seamless flow of accurate health information.
Changes in interdisciplinary research	Evaluate the number of interdisciplinary research projects and studies conducted to explore the relationship between health literacy, equity, and different aspects of the ecosystem.
Health literacy integration in educational systems	Assess the integration of health literacy principles into educational curricula across various levels, ensuring that future generations are equipped with essential health knowledge.



Appendix III – KPIs (3/3)

KPIs on a governance level:

KPIs	Key performance indicator definitions
Compliance with policy integration	<i>Measure the compliance of new legislation, new initiatives, and organisational initiatives to measure whether they are in compliance with policy integration.</i>
Education curriculum integration	<i>Evaluate the inclusion of health literacy topics within educational curricula at various levels, ensuring that students are equipped with essential health knowledge and decision-making skills.</i>
Health communication accessibility	<i>Assess the availability and accessibility of health information on digital platforms, ensuring that citizens can easily access accurate and relevant health resources online.</i>
Healthcare utilisation patterns	<i>Analyse changes in healthcare utilisation patterns, such as increased preventive care visits and decreased emergency room usage.</i>
Integration of health literacy in government services	<i>Measure the extent to which government services incorporate health literacy principles, ensuring that citizens receive clear and accurate health information when interacting with government entities.</i>



References

1. Sørensen, K., Van den Broucke, S., Fullam, J. et al. Health literacy and public health: A systematic review and integration of definitions and models. BMC Public Health 12, 80. 2012. Available at: <https://doi.org/10.1186/1471-2458-12-80>
2. Federaal Kenniscentrum voor de Gezondheidszorg. Health Literacy: what lessons can be learned from the experiences of other countries? 2019. Available at: Health literacy: what lessons can be learned from the experiences of other countries? (fgov.be)
3. Deloitte. Activating health equity - A moral imperative calling for business solutions. 2021. Available at: <https://www2.deloitte.com/us/en/insights/industry/health-care/developing-an-agenda-of-equity-in-health.html>
4. Maastricht University, the HLS-EU Consortium (later: Health Literacy Europe). HLS-EU project. 2009-2012. http://cpme.dyndns.org:591/adopted/2015/Info.2015-095.Final_report_Executive_summary_of_HLS-EU.pdf
5. M-POHL Action Network. https://m-pohl.net/mpohl_action_network
6. Sciensano. Health Interview Survey. <https://www.sciensano.be/en/projects/health-interview-survey>
7. Brach C., Keller D., Hernandez L.M., et al. Ten Attributes of Health Literate Health Care Organizations. National Academy of Medicine (2012) | Discussion Paper. Available at: <https://www.ahrq.gov/health-literacy/publications/ten-attributes.html>
8. Dietscher C., Lorenc J., Pelikan J. Das Selbstbewertungs-Instrument zum Wiener Konzept Gesundheitskompetenter Krankenbehandlungsorganisationen (WKGKKO-I). Ludwig Boltzmann Institut Health Promotion Research (LBIHPR). 2015.
9. Trezona A., Dodson S., Osborne R.H. Development of the organisational health literacy responsiveness (Org-HLR) framework in collaboration with health and social services professionals. BMC Health Serv Res. 2017. Available at: <https://doi.org/10.1186/s12913-017-2465-z>
10. Mensura. <https://www.mensura.be/en/blog>
11. The Institute for Healthcare Advancement (IHA). Health Literacy Specialist Certificate Program Available at: <https://www.healthliteracysolutions.org/learning-lab/certificate-program>
12. Onafhankelijke ziekenfondsen. Polymedicatie bij 75-plussers. 2021. Available at: Polymedicatie bij 75-plussers | MLOZ
13. De Caluwé, R. Voorstel van resolutie tot invoering van een actieplan om de gezondheidswijsheid van Belgen aanzienlijk te verbeteren. 2019 Belgische kamer van volksvertegenwoordigers DOC 55 0256/001
14. Van den Broucke, S. Capacity building for health literacy. (2019). International Handbook of Health Literacy (pp.705-720) 10.51952/9781447344520.ch045.
15. The Health Literacy Place. Available at: <https://www.healthliteracyplace.org.uk/>
16. Deloitte. Organization Transformation Enabling organizational performance. 2022. Available at: <https://www2.deloitte.com/be/en/pages/human-capital/solutions/organization-transformation.html>
17. Center of excellence. Health Literacy Policy Mobilisation and Capability Building. Available at: <https://www.coe.int/en/web/bioethics/health-literacy-policy-mobilisation-and-capacity-building>
18. EFPIA. It's time to power up health systems Available at: <https://www.efpia.eu/media/636465/its-time-to-power-up-health-systems.pdf>
19. U.S. Food and Drug Administration. Bridging the Gap to Address Health Literacy Needs Among Diverse Groups. Available at: <https://www.fda.gov/media/150102/download>
20. World Health Organization. Improving Health Literacy. Available at : <https://www.who.int/activities/improving-health-literacy>



Contacts

Deloitte

Anne Massij

Partner Monitor Deloitte
Healthcare Leader Belgium
amassij@deloitte.com

Tessa Van Montfort

Director Monitor Deloitte
Life Science & Healthcare strategy
tvanmontfort@deloitte.be

MSD

Danielle Derijcke

Patient Engagement Lead
danielle.derijcke@msd.com

An Cloet

External Affairs lead
an.cloet@msd.com

HealthNest

Prof. dr. Stephan Van de Broucke

President of the Board of HealthNest
stephan.vandenbroucke@uclouvain.be

Disclaimer This research study has been produced under a contract with MSD. Neither MSD nor any person acting on behalf of MSD (including the authors) may be held responsible for the use which may be made of the information contained therein. In particular, the information in this research study is provided “as is”, authors give no guarantee or warranty that the information is fit for any particular purpose other than the performance of the contract with MSD. The contractors/authors shall have no liability for damages of any kind including without limitation direct, special, indirect, or consequential damages that may result from the use of these materials subject to any liability which is mandatory due to applicable law.