HEALTH ENHANCEMENT FOR RURAL ELDERLY
(HERE)

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Purpose: To present a project which was focused on improving health literacy for older individuals in four small eastern Montana towns. The goal of the Health Enhancement for Rural Elderly (HERE) project was to: a) improve the health literacy skills of rural elderly, and b) build the health literacy capacity of a rural community to enable the elderly to make well-informed health-related decisions.

Rationale/Conceptual Basis/Background: Health literacy is fundamental to health care decision-making, and self-care management. It is estimated that 9 out of 10 adults have difficulty understanding and using everyday health information which is frequently linked to poor self-care management, low use of preventative services, poorer health outcomes unhealthy behaviors, and higher rates of hospitalizations. Those in small, rural, communities are further disadvantaged in improving their health literacy where health information, internet access, health care, and social services are limited.

Methods: HERE was designed to be community-based and located in the town’s senior centers. The following interventions were used: a) My Health Companion©, b) hands-on instruction on internet skills for seeking and processing web-based health information, and c) five health information webinars. Enhancing the health literacy infrastructure of the communities involved engaging key stakeholders, e.g., county extension agents, public health nurses, senior center staff, and local librarians, and equipping the senior centers with computers, printers, access to the internet, LCD projectors, screens, speaker phones, reference books, guidelines /toolkits, and providing training for informal caregivers.

Results: My Health Companion© is a structure for tracking and maintaining health information and enhancing health literacy. The personal health record was used by 68 individuals for one year. Participants completed the initial questionnaire, and had the opportunity to provide feedback. Forty one individuals attended the hands-on internet skills for seeking and processing web-based health information sessions. There were 162 participants in the webinar series with an evaluation completed immediately following each session. And a total of 18 persons received the 2 and ½ day “Powerful Tools for Caregivers” national training program with a post evaluation. Participants were certified as trainers to return to their home communities and conduct the program.

Implications for research, rural health and/or rural practice: Through the HERE project it was clear that there is a critical need to develop, promote, and improve access to electronic health information for elderly in small rural communities. While rural elderly are interested in improving their health literacy skills there is a wide range of levels of readiness in engaging rural elderly in various interventions to improve their health literacy. Community-based stakeholders are key to marketing, supporting, and implementing practices and interventions to improve health literacy of rural elderly.

Research supported by: The HERE Project was a joint venture between the College of Nursing and Extension Service, Montana State University and was funded by the United States Department of Agriculture and the National Network of Libraries of Medicine (NNLM), Pacific Northwest Region, University of Washington, Seattle, WA