

A Health Literacy Fable for Tomorrow: Help the World Be Healthy with Health Literacy

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There once was a town in the heart of America where health seemed to come naturally for everyone. The town lay in the midst of a checkerboard of organic and wholesome farms. Fresh fruit and vegetables were plentiful and affordable. Within the town itself, recreational opportunities were free and varied: Children, adults, and senior citizens were often seen exercising with broad smiles on their faces.

Along the roads, local cooks prepared and sold wholesome foods and created livable incomes. People often walked to work and worked with little stress or conflict with their colleagues or their competitors. Education was free and highly valued.

Ever-present to those who listened, within the clean air was a strong sense of a desire—an expected and shared need among all people—to move their bodies regularly, always eat healthy food, moderate their sweets and treats, and love each other and themselves at all times. There was an almost touchable reality that everyone could live a happy and healthy life. Each person was encouraged to explore the world without limit or fear of stigma.

People gathered frequently in public and private to discuss the events of the day and collectively make decisions about the town's future. Individual choices and differences were always respected, while group cohesion and shared benefit were equally valued.

In short, this town in the heart of America was a healthy and happy community where every failure was embraced as a learning opportunity, where all families that broke apart were seen as a renewed resource for the community, where each sadness was universally viewed as an opportunity for renewed happiness, and where health was truly embraced as a resource for living a happy and full life and never seen as simply the absence of a disease.

One day, for unknown reasons, the sun rose to meet a newly cloudy and grey sky. The light that broke through now revealed a disorganized, gloomy, and unhappy community.

The demand for doctors and nurses began to rise. People—young and old alike—now feared illness as a guaranteed outcome of living. The specter of early death began to cloud decisions. Fear became a deciding factor so that those who used to enjoy exercise now feared injury. Those who used to walk to buy fresh produce now stocked up on cans of food preserved by chemicals. Those who used to enjoy cooking a fresh family meal together now reheated processed foods of unknown origin alone during their few minutes between multiple part-time jobs.

Hospitals suddenly became full, emergency rooms became overcrowded medical homes, and the cost of providing care to only the sick became an unbearable burden on the entire community. Those with less were often denied care, while those with more created havens that isolated them from the community's new reality.

Given the increased demands for care and to save time, health professionals developed a way of speaking that was unique to their profession, but no one else understood them. What was once health care now became sick care. The jargon and medical terminology protected health

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workers from spending time with the patients they barely knew or had enough time to diagnose, let alone treat. Some people became fearful of medicine and the health system, refusing to seek care until it was too late.

Parks became unsafe. Streets were left unclean. Parts of town began to lack access to fresh fruits and vegetables. Children began to not know where food came from other than the grocery store. Chronic diseases like diabetes, asthma, and heart disease that were once widely prevented and rare became commonplace and accepted as normal. The community's debt continued to grow from the costs of treating entirely preventable diseases.

Trying to save money, schools were closed or consolidated. Higher education became a privilege for a few, not a right for everyone. Children who could not read and write well became adults who could not read or write well.

This town that once focused on preventing illness and promoting healthy lifestyles now operated from fear instead of from love. The poor became disenfranchised, slowly retreating into lifestyles that lacked fresh food and exercise but were abundant in depression and stress. The rich spent their resources on forgetting. Academics often concluded the poor and sick were to blame for their problems because they did not comply with the orders from health care professionals delivered in a language that they did not understand.

This town is fictional, but I believe the description truly reflects the reality of too many communities around the world today. What changed was that health literacy disappeared. People lost their abilities to find, understand, evaluate, communicate, and use information to make informed decisions about their life. People became short-term pleasure seekers versus long-term lovers of life. Health systems became overburdened, caring for ill and injured people who did not have the abilities to care for themselves.

I suggest that that dismal future, though all too real for too many people in the world today, is not inevitable. We can all work together to create a brighter and healthier tomorrow.

I believe that we should embrace our own health, embrace our family's health, embrace our community's health, and actively work every day to prevent disease in our lives. I have found that, indeed, health literacy can create a path to a happy, healthy future in which good health is not only a human right but also well within everyone's reach.