Webinar Topic: Health literacy as a determinant of healthy living and active living in Canadian immigrant youth

Bio:

**Dr. Solina Richter** is Professor in the Faculty of Nursing and the Academic Director of the Global Nursing Office, University of Alberta.

Her research program focuses on the social determinants of health, and more specifically research on homelessness to inform public policies and frontline practices that protect and promote health of the low socioeconomic and homeless populations. It further focusses on building capacity for partnerships and collaboration to address global health. Current projects relate to homelessness in rural areas in Alberta, youth that is at risk of becoming homeless, homeless mother and experiences of health care workers delivery care to homeless women in Edmonton and a study in Ghana, Africa that focus on a better understanding of maternal health, how people within or across cultures share the same understandings of health, what it means to be healthy, and practices for maintaining health.

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Key Messages:

- A study was conducted to identify the specific health literacy needs of immigrant and refugee youth and their families related to healthy eating and active living activities. This presentation focuses on the data that was collected on the immigrant/refugee children.
- The study was done in Alberta. It used a mixed methodological approach using a case study design. We recruited youth who attended both school-driven and community-based leadership and healthy living programs.
- What did we find? The following themes arose:
  - **Cultural Literacy** (ability to recognize and use collective beliefs, customs, world views and social identity in order to interpret and act on health information” (Zarcadoolas, 2005, p. 196).
    - Isolation from their particular religious group made specific religious practices challenging.
    - Youth identified engagement in community activities and festivals as healthy ways of living and connecting with the broader community.
  - **Civic Literacy** (“ability that enables citizens to become aware of public issues and become involved in the decisions-making process (Zarcadoolas, 2005, p. 196).
    - Youth identified the school, media, friends and social services and public sources of information on healthy living and eating practices.
    - Peer influences were identified as both negative and positive.
    - Social support networks were important in disseminating information to facilitate active living.
- Critical Literacy (advanced cognitive skills which together with social skills, can be applied to critically analyzed information and to use this information to exert greater control over one’s live (Nutbeam, 2000, pp. 264).
  - Youth critically reflected on the aspects that were different and which effected their eating habits and active living. The following were reported:
    - Lack of having transport; a car was representative of an easier life.
    - Cold weather as a barrier to outdoor sports.
    - Connecting over-crowding, overpopulation and pollution with ill health.
    - Importance of hygiene and previous lack thereof in refugee camps.
    - Family was seen both as a source of health information and target for sharing of new health information acquired at school.

- Communicative/ interactive literacy (one’s capacity to function in a social context)
  - Youth were found to rely on their friends to support them to access different activities
  - Being in contact with immigrants from their country of origin was helpful.
  - Youth identified the active living school-based projects as very helpful to access various activities

- Functional literacy (having the reading and writing skills necessary to function in everyday life. Also includes science literacy, media literacy, computer literacy)
  - There was a lack of linguistic understanding that contributed to social isolation.
  - There was also a lack of ability to understand food labels, which contributed to challenges finding food that is cultural acceptable to consume.

- Recommendations
  o Efforts to reduce language and cultural barriers are essential to improve health literacy.
  o Providing professional translation in the school environment is important – especially when parents participate in activities.
  o Teacher involvement, especially gym teachers, are important in fostering inclusive active living environments.
  o Increase points of access to recreational facilities, sport organizations and PHC services in immigrant settlement and support agencies.
  o Make services youth-focused and youth/family centered.
  o Encourage schools to offer alternative recreational activities that align with the capabilities and interests of newcomer populations.
  o Expand programs – school based programming can provide a safe and secure environment for newcomer youth, it can also explore critical issues related to health literacy and active living.