Evaluation of an Oral Health Literacy Reading Recognition Instrument

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Several instruments are now available for measuring medical health literacy, but none exist for dentistry. Objectives: To develop and pilot test an oral health literacy instrument. Methods: Based on a reading recognition test used in medicine called the Rapid Estimate of Adult Literacy in Medicine (REALM), we developed the Rapid Estimate of Adult Literacy in Dentistry (REALD). Parents of pediatric dental patients were recruited from the UNC School of Dentistry and asked to read aloud both REALM and REALD. REALD scores had a possible range of 0 (low literacy) – 99 (high literacy); REALM scores ranged from 0-66. Outcome measures included self-perceived oral health status of the parent and child, and oral health quality of life rating of the parent using the short form Oral Health Impact Profile (OHIP-14). To determine construct validity, we tested correlations between REALM and REALD; REALM and dental outcomes; and REALD and dental outcomes. Additionally, we used OLS regression models to further examine the relationship between REALD and dental outcomes. We determined internal reliability using Cronbach's α. Sociodemographic data were collected for use as control variables. Results: 102 parent–child dyads were interviewed (64% white, 36% minority; 88% female). The mean REALD score was 83 (SD±12.3; range 36-99); the mean REALM score was 62.3 (SD±5.9; range 22-66). REALD was positively correlated with REALM (PCC=0.80; P<0.05). REALM was not related to dental outcomes. REALD was found to have good internal reliability (Cronbach's α=0.86). REALD was positively correlated with self-perceived oral health status of the parent in bivariate analyses only (P=0.05), and negatively correlated with parent's OHIP-14 score in multivariate analysis (P<0.05). Conclusion: The REALD instrument has promise for measuring oral health literacy because it demonstrated excellent reliability and is quick and easy to administer. Supported by a UNC Research Fellowship and NIDCR Grant #1K22DE14743

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