

The relationship between health literacy and quality of life among frequent users of health care services: a cross-sectional study.

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Abstract

BACKGROUND:

Although health literacy and quality of life are important concepts in health care, the link between them is unclear, especially for a population of frequent users of health care services with chronic diseases. Low health literacy is a common problem that has been linked to several negative health outcomes. Quality of life is an important health outcome in patient-centered care. Frequent users of health care services are a vulnerable population that deserves attention due to high costs and negative outcomes such as lower quality of life and higher mortality. The objective of this study was to examine the relationship between health literacy and the physical and mental components of quality of life among frequent users of health care services with chronic diseases.

METHODS:

This study presents the cross-sectional analysis of data collected through the V1SAGES project, a randomized controlled trial on the effectiveness of a case management intervention in primary care in Quebec, Canada. Participants (n = 247) were frequent users of health care services presenting at least one chronic condition. Health literacy was measured by the Newest Vital Sign (NVS), and the physical and mental components of quality of life were evaluated by the Short Form Health Survey Version 2 (SF-12v2). The association between health literacy (independent variable) and the physical and mental components of quality of life was examined using biserial correlation.

RESULTS:

No association was found between health literacy and quality of life (physical component: $r = 0.108$, $p = 0.11$; mental component: $r = 0.147$, $p = 0.15$).

CONCLUSION:

This study suggests that there is no relationship between health literacy and the physical and mental components of quality of life among frequent users of health care services.

TRIAL REGISTRATION:

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KEYWORDS:

Chronic disease; Frequent users; Health literacy; Primary care; Quality of life