

About the Information and Support for Health Actions Questionnaire (ISHA-Q)

The Information and Support for Health Actions Questionnaire (ISHA-Q) identifies specific health literacy strengths and limitations of people and communities. It was designed for cultures in which decision-making about health is often a communal activity.

The Information and Support for Health Actions

Questionnaire (ISHA-Q) was developed to measure health literacy in low- and middle-income settings, and cultures where decision-making about health often occurs as a collective activity of family or peer groups. The ISHA-Q includes supplementary scales for people with chronic illnesses, people with a physical disability, people who are blind and people who are deaf.

The ISHA-Q is a multi-dimensional tool that offers providers, organisations and governments the capacity to identify and understand the health literacy strengths and limitations of individuals and populations. These data allow development and selection of fit-for-purpose response strategies that optimise opportunities to improve equity in health outcomes and access.



Information and Support
for Health Actions
Questionnaire

Psychometric properties of the ISHA-Q

Modern and rigorous psychometric tests have shown the ISHA-Q to be a robust measure of the identified core and supplementary scales. It has excellent psychometric properties, construct validity and reliability across a wide variety of groups, and when administered on paper, orally or by sign language. It is shown to provide unbiased mean estimates of group differences.

Structure and administration of the ISHA-Q

The ISHA-Q has fourteen core scales, and ten supplementary scales that can be used depending on the relevance to the respondent and the purpose of administration. The ISHA-Q can be either self-administered or orally administered.

Completion time depends on the format, the skills and approach of the respondent, and the number of scales used. It usually takes between 8 and 20 minutes for someone to complete the core scales on paper. When orally administered by telephone or in person, the core scales take between 15 and 35 minutes to complete.

Scoring the ISHA-Q

The ISHA-Q provides separate scores for each scale. Each score provides insight into the strengths and limitations of the respondent, but the scores are most powerful when viewed together to show the health literacy profile of the respondent.

Average scale scores for groups of respondents (along with standard deviations) provide useful insights into the health literacy strengths and limitations of populations. An Excel spreadsheet and SPSS syntax is available to assist calculation of scale scores. The simplest way to present the results of the ISHA-Q is to report the means (and standard deviations) for each scale in a bar graph.

Effect sizes can be used to describe the difference in mean scale scores before and after an intervention, or of different groups. Effect sizes provide an indication of how large the difference is. Cohen's *d* effect size is the difference between two means divided by the average of their standard deviations. A small effect size is between >0.2 and <0.5 ; and medium effect size is between >0.5 and <0.8 ; and an effect size >0.8 is large. Effect sizes are usually presented in tables.

Cluster analysis or latent profile analysis is recommended to identify groups of individuals that have similar health literacy profiles. This approach to examining ISHA-Q data reveals sub-groups of people who have particular strengths that can be built upon, or sub-groups with limitations, which services might need to provide support to improve. Statistical software and some statistics training is required to undertake this sort of analysis and interpret the results.

Languages available

The ISHA-Q is available in several languages. Visit the Ophelia.net.au website for an up-to-date list of available translations. A strict protocol is followed for each translation to help ensure each version of the ISHA-Q is linguistically, culturally and psychometrically robust. The translation protocol used to translate the HLQ is available from Ophelia.net.au.

Accessing the ISHA-Q

Visit the Ophelia.net.au website to register for a license to use the ISHA-Q.

The fourteen core scales of the Information and Support for Health Actions Questionnaire (ISHA-Q)

- Supports and abilities scales (37 questions)
- Barriers scale (4 questions)
- Health actions scales (19 questions)



The ten supplementary scales of the Information and Support for Health Actions Questionnaire (ISHA-Q)

Needs of people who are deaf

(13 questions)

- D1. Health service accessibility and helpfulness (for deaf people)
- D2. Equipment (to assist in communication for health care)
- D3. Use of interpreters

Needs of people who are blind

(13 questions)

- B1. Health service accessibility and helpfulness (for blind people)
- B2. Equipment (to assist in care of own health)
- B3. Accessing information in formats suitable for blind people

Needs of people with physical disability

(9 questions)

- PD1. Health service accessibility and helpfulness (for people with a physical disability)
- PD2. Equipment (to assist in care of own health)

Needs of people with chronic illness

(8 questions)

- CI1. Sharing information with others with the same condition
- CI2. Self-monitoring

Suggested citation

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