Reviewer’s report

Title: How the stigma of low literacy can impair patient-professional interactions and affect health: insights from a qualitative investigation

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Reviewer: Michael Gionfriddo

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In this manuscript, the authors are interested in exploring the relationship between low literacy and health and the perspectives of persons with low literacy on health care and health. They also considered how health services might be designed so that they are more supportive of people with low literacy, with the goal of improving health outcomes. The question is broad, but necessarily so, since there is little evidence in this area and this study is qualitative and exploratory in nature. I feel that this study adds important data to the field. Health literacy is an important component to consider in the design and delivery of health services. This study highlighted the experiences of persons with low literacy with the healthcare system and health in general. This information can now be taken into account when clinicians deal with patients and when systems and researchers design and implement health services.

The nature of the question requires a qualitative approach and the authors utilized interviews and focus groups in order to explore the perspectives of people with low literacy on health and healthcare. The methods are generally well described.

The authors of this manuscript clearly state their limitations, including the issue that their sample included those patients who were receiving assistance to improve their literacy. While these patients may be “hidden” such that their low literacy levels are not outwardly apparent, they may be different in their attitudes or experiences from those persons who are unable or unwilling to receive assistance at improving their literacy.

The writing in this manuscript is clear with minimal grammatical or typographical errors.

Discretionary Revisions

1. I would have liked a brief description on how and when basic demographic information (stage of literacy education, health problems, healthcare experiences) was collected or measured. Was racial information collected? Do the authors think this affects the association between literacy and health or the provision of health services?

2. The authors mention that the participants had low literacy, but, was this group homogeneous (i.e. did all participants have the same set of literacy difficulties?)

3. Could the authors also provide a brief description of the population of Dundee
(mostly Anglo-Saxon, working class etc.)?

4. Perhaps it would be beneficial to include a copy of the interview guide and provide a little more information on how the topic guide was constructed: was it based on the literature, previous work or researcher experience, etc.

5. I would have liked a brief explanation as to why the authors chose framework analysis as opposed to others methods of analysis (e.g. Grounded Theory, Phenomenology, etc.).

6. Did the authors use any conceptual models or theoretical frameworks to guide their understanding of the connection between health literacy and health or utilization of health care services?

7. This manuscript does not completely adhere to the consolidated criteria for reporting qualitative studies (COREQ) guidelines. I would recommend that the authors consider the COREQ guidelines when reporting their study. Reviewing the RATS guidelines may also be helpful (see: http://www.biomedcentral.com/authors/rats)

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests