Reviewer's report

Title: Distribution of health literacy strengths and weaknesses across socio-demographic groups: a cross-sectional survey using the Health Literacy Questionnaire (HLQ)

Version: 4
Date: 13 June 2015
Reviewer: Katherine Speirs

Reviewer's report:

This paper is well-written and provides an important contribution to the literature by using a measure of health literacy that assesses more than just an individual’s literacy or numeracy which is a limitation of many existing measures of health literacy. Additional comments are below in the categories requested by the journal.

Discretionary Revisions

1. I think the authors should soften their language in some places. They seem to be overstating their findings in statements such as “We found striking differences in health literacy scores for participants born in countries other than Australia and those for whom English was not their first language. Both these groups scored much lower than their counterparts on scales focused on relationships with healthcare providers.” As the authors acknowledge we don’t really know what a meaningful differences are for the HLQ scales.

2. I don’t think Figure 1 is necessary. The HLQ scales can be included in the text.

Minor Essential Revisions

3. There is a typo on line 141. Remove “by calculating”

4. Line 265: add “of” after “Both”. Both of these groups…

5. Table 3: The header above items 1-5 should read Range 1 (lowest) – 4 (highest) and you can remove the note “# Range 1 (lowest) – 4 (highest)”.

6. Line 247 – 248, the sentence, “Particular groups with the lowest health literacy are those born overseas, those not speaking English at home, and those with low education” is confusing. It’s not clear who the authors are comparing these groups to in order to determine that they had the lowest health literacy.

Major Compulsory Revisions

7. It wasn’t clear if the authors’ intention was to collect a sample of older adults. If it was, explain why this sample was of interest for addressing this question. If it wasn’t, this should be listed as a limitation.

8. Line 111-112 the authors state that “staff from each organisation collected data from a representative sample of clients within their target group.” Can the
authors say more about how the organizations determined if they had a representative sample? Also, is there any information about individuals who were approached to participate and declined? How many declined to participate and do they differ in important ways from those who agreed to participate?

9. Do the authors have any information about the length of time that participants who were born in another country had been in Australia? As one of their main findings was differences based on COB it would be helpful to know if these findings change based on the length of time in Australia.

10. Other interesting interactions that can be explored would include looking at education and language spoken at home as well as number of chronic conditions and COB and language spoken at home.

11. For some of the HLQ scales (e.g. feel understood and supported by HCP, ability to find good health information, and understand health information), characteristics of the health care provider may be as important as characteristics of the individual. For example if a HCP offers health information and services in a range of languages, then an individual who does not speak English as a first language may be just as likely to have a high score on the “understand health information” scale as someone who does speak English as a first language. As the authors know which HCPs their participants use is it possible to add information about the HCPs (e.g. language spoken by HCP, languages HCP offers materials in, average length of time patients spend with their HCP)? This information could be used as control variables or moderators to explore how individual and HCP characteristics interact to influence an individual’s health literacy.

Level of interest: An article of importance in its field

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.