

# State health department Web sites inaccessible to many, study finds

**Considering the significant amount of data, medical information, and services now offered online by state-run health departments, many websites are written well above the comprehension level of the average American and are inaccessible to people with disabilities and non-English speakers, concludes a new report by Brown University researchers Darrell M. West and Edward Alan Miller published in the Journal of Health Care for the Poor and Underserved.**

"Inaccessible websites hurt the underprivileged and make it difficult to justify the investment in technology that has taken place in state governments around the country," the authors state. "Unless these concerns are addressed, public e-health will remain the domain of highly educated and affluent individuals who speak English and do not suffer from physical impairments."

West and Miller examined the accessibility, privacy, and security of public websites maintained by the 50 state governments in the United States in the last two to five years. Using content analysis, they focused on readability levels, disability access, non-English accessibility, and the presence of privacy and security statements.

They determined that text on the majority of sites employs a reading level too difficult to comprehend for most users. Though half of Americans read at an eighth-grade level, only 20 percent of state health department web sites were written at that level in 2005, the authors found. The analysis concludes that 62 percent of the sites were written at the 12th grade level in the same year.

West and Miller also found the majority of state health websites are not accessible to physically impaired individuals. In 2005, 58 percent of the state sites did not meet the minimum accessibility standards recommended by disability advocates, including the ability to generate text in a format for Braille displays or speech synthesizers, procedures for using Text Telephones (TTY) or Telecommunications Devices for the Deaf (TDD), and specialized software to help individuals with mobility impairments navigate complex databases and documents, through such means as voice commands or eye movements.

Another potential barrier to using these websites is language accessibility, according to the study. In 2000, only 10 percent of state health sites provided any kind of non-English materials. The level of English translations rose to 32 percent in 2003 and to 44 percent in 2004, but dropped to 34 percent in 2005. The authors say the web designers are making progress at narrowing the access gap, but "still have a long way to go before equal access is obtained."

"Unless websites are configured in such a way that all Americans can share in the benefits of new technology, the advantages of the Internet in terms of information and service availability will be denied to those unable to take advantage of conventional online resources," the authors write.

The study also examined the increase in privacy and security policies among state sites. In 2000, only 8 percent of health departments had an online privacy policy and only 4 percent had a security policy. However, by 2005, those numbers grew to 86 percent for privacy policies and 62 percent for security policies. West and Miller believe the growth reflects the implementation of the Title II of the Health Insurance Portability Act (HIPA).

Additionally, West and Miller say that "it matters where one lives" when determining access to e-health. Investigating regional disparities in accessibility, the authors found the South was best in terms of having state health websites that were readable (23 percent of its sites at the 8th grade reading level or less), while

Western states were the worst at 15 percent. Southern states were also the most likely to provide disability access to websites, while the West was the least likely. In terms of privacy and security, Midwestern states came out on top with 100 percent of websites featuring privacy policies and 71 percent with security policies. The Southern states were least likely to have privacy policies (77 percent) and security policies (46 percent).

Source: Brown University

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