

Health Literacy: Definition, Types, and Strategies to Improve

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Abstract

Health literacy is the skill to comprehend health information and knowledge. There are three types of health literacy, which is functional health literacy (FHL), interactive health literacy (IHL), and critical health literacy (CHL). Levels of health literacy can determine a person's health status. Low health literacy is associated with poor health outcomes and inefficient utilization of medical resources. Maintaining adequate health literacy is crucial in making better public health. Both medical personnel and patients need several interventions to maintain good levels of health literacy. Various strategies have been implemented in the community to improve levels of health literacy. Finding the main cause of low health literacy in the community has to be done before executing health literacy improvement plans to make it effective.

Keywords: health; literacy; community; improve

1. Introduction

Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. Health is dynamic and can be influenced by a range of factors, which include the level of health literacy. Health literacy is defined as the ability to understand and apply health information and knowledge (Liu et al., 2020). It involves not only the ability to read and comprehend medical instructions but also to critically evaluate health information, navigate healthcare systems, and actively engage in healthcare decision-making. The level of health literacy can determine a person's health status. People with adequate health literacy have the ability can solve health problems, adapt to the changes within the healthcare system, and function properly as healthcare customers (Speros, 2004). Adequate health literacy is also necessary for an individual to understand various types of medication prescriptions and apply preventive health measures. In contrast, low health literacy can lead to misunderstandings, increased risk of medical errors, and diminished health outcomes. Low health literacy is often associated with poor health outcomes and inefficient utilization of medical resources (Brady, 2009).

2. Types of Health Literacy

2.1. Functional Health Literacy

Functional health literacy (FHL) refers to an individual's ability to understand and use health-related information to make informed decisions and carry out everyday tasks related to their health. FHL is the result of conventional health education which communicates factual information about health risks and how to use the healthcare system (Nutbeam, 2000). Among the other three types of health literacy, FHL is known as the most measurable since it is the most basic (Tejero et al., 2022). In adults, FHL is measured using the Test of Functional Health Literacy in Adults (Kim et al., 2020). In 2005, a more advanced scoring system, the Newest Vital Sign or NVS, was invented by Barry Weiss and his colleagues under the Pfizer Clear Health Communication Initiative (Tejero et al., 2022). FHL involves more than just reading and comprehension; it encompasses the practical skills to navigate the healthcare system, understand prescription instructions, interpret health messages, and engage in health-promoting behaviors. Adequate FHL is crucial in maintaining high effectiveness in medication since low FHL is strongly related to difficulties in self-care, such as non-adherence in taking medication or failing to understand various medication prescriptions, especially in older adults (Martins et al., 2017). A low FHL rate is also the cause of poorer health-related choices and actions, lower service uptake, suboptimal health status, and increased morbidity and mortality (Tejero et al., 2022).

2.2. Interactive Health Literacy

Interactive health literacy (IHL) refers to an individual's ability to actively engage with health information, healthcare providers, and health-related technologies. It refers to the results of health education which has evolved over the last 20 years. The approach of IHL is centered on nurturing personal skills and the capacity to act independently on health knowledge. Communication skills, shared decision-making, technology use, navigating healthcare systems, participation in health promotion, digital literacy, and community engagement are the essential elements in implementing IHL. Implementation of interactive health literacy can be seen in school health education programs (Nutbeam, 2000). An example can be seen in the implementation of IHL in reducing the susceptibility of smoking among adolescent adolescents at school (Sudo and Kuroda, 2015).

2.3. Critical Health Literacy

Critical health literacy (CHL) goes beyond basic functional health literacy and involves analyzing and critically evaluating health information. It emphasizes the development of cognitive skills to support to investigate the organizational possibilities of actions supporting social, economic, and environmental determinants of health (Nutbeam, 2000). This form of literacy enables people to understand the broader social, economic, and political determinants of health and encourages them to actively engage in decision-making processes that influence their well-being. Although maintaining CHL in the community is crucial, CHL used to frequently make no mention of its existence in social and political activity at the population level in 2013. CHL hardly ever succeeds in any interventions or emphasis that says it is working toward the goal of improving health literacy (Sykes et al., 2013). A casual learning atmosphere, an assisted problem-solving process, information evaluation, familiarization with health services and systems, and social support are the key processes to building CHL in the community (Sykes and Wills, 2018).

3. Strategies to Improve Health Literacy

A combination of individual efforts, community activities, and healthcare system interventions are needed to improve health literacy. The first step in improving the treatment of patients with inadequate health literacy is for providers to enhance their communication skills. The plan calls for enhancing patient understanding of health issues and patient-provider communication. Limiting the amount of information given at each visit, slowing down, avoiding the use of medical jargon, looking for outpatient education materials at the appropriate reading level, using pictures to explain key concepts, using the "show-me" or "teach-back" method to confirm patient understanding, and encouraging patients to ask questions are all ways to improve patient comprehension (Kountz, 2009). Interactive training intervention in improving health literacy is also suggested to make patients able to define health literacy, outline the consequences of low health literacy, describe four essential tactics for promoting clear communication (using simple language in written and verbal communication, limiting information, using a limited number of forms, and using teach back to check for understanding), and put these tactics into practice (Gibson et al., 2022). Digital health literacy is also used as a method of improving health literacy. One example is the use of Augmented Reality (AR) to improve health literacy about the use of antihypertensive medications in people with type-2 Diabetes Mellitus (T2DM) (Ahmadvand et al., 2018).

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