Promoting literacy in health: a reflection on health management

Promovendo o letramento em saúde: uma reflexão na gestão da saúde

ABSTRACT

Objective: to reflect on health literacy, focusing on health management that stimulates people’s quality of life and strengthens the SUS. Method: this reflects Zarcadoolas’s concept of health literacy in health management as a causal model. Result: a theoretical model for health literacy has emerged with four main dimensions: fundamental, scientific, civic, and cultural. In this context, health literacy plays a fundamental role in managing the health system, thus strengthening citizens’ social control over public policies and the government’s role in health promotion. Conclusion: promoting literacy is not limited to understanding medical information but involves applying it effectively to promote health, emphasizing an informed and comprehensive approach in today’s society.

Descriptors: Health Literacy; Nursing; Quality of life.

INTRODUCTION

National and international studies have made progress in exploring the skills contributing to accessing and understanding health care. Health literacy is crucial for people to participate actively in public health issues. This skill is advancing worldwide and is widely valued for its relevance in promoting well-being\(^1\) and can be measured using various tools\(^2,3\). It is important to note that to raise health literacy levels, it is necessary to improve the understanding and application of health information in a clear and accessible way.

The term “literacy” has its roots in the words “letra” - *littera* (Latin) - and “cy” - meaning quality, condition, or state. From there, the word “literacy” corresponds to the condition of being literate\(^4\).

Regarding the phenomenon of literacy, this term is an adaptation into Portuguese of the English word “literacy”, which, according to dictionaries, is defined as “the condition of being literate” and the incorporation of the term into the Portuguese language in Brazil, pointed out in 1986\(^4\) with the origin of the word “literacy” going back to the Latin word “littera”, which means “letter”, followed by the suffix “cy”, whi-

Health literacy is conceived as the "result of the process of teaching and learning the social practices of reading and writing" or as "the state or condition reached by a social group or individual after appropriating writing and its social practices", as indicated by Soares(6-9).

Health literacy goes beyond simply being able to read medical information. It involves understanding complex health concepts, evaluating information from diverse sources, and applying this knowledge to make health decisions. It also includes the ability to communicate effectively with health professionals and actively participate in decisions related to their health.

Improving the understanding and application of health information in a clear and accessible way not only raises the level of understanding of health but also plays an essential role in promoting a healthier and better-informed society. Transparency and ease of access are crucial to empowering individuals to make informed and objective decisions about their health and quality of life(9).

"Health literacy represents the knowledge and personal competencies accumulated through daily activities, social interactions, and generations. Personal knowledge and skills are mediated by organizational structures and the availability of resources, which enable people to access, understand, evaluate and use information and services to promote and maintain good health and well-being for themselves and those around them(9).

Peres, Rodrigues, and Silva(9) emphasize the crucial topic of health literacy. Low literacy levels are associated with poor health outcomes, both individually and collectively. The authors also stress that health literacy should not be confused with health or limited to a functional perspective. It goes beyond formal education and the simple act of reading and writing according to the norms of the language.

In this context, Peres, Rodrigues, and Silva(9) present the models Don Nutbeam and Christiana Zarcadoolas developed in the early 2000s. These models introduce an expanded view of health literacy, marking a change from previous research, which focused on the functional skills of reading, writing, and interpreting texts, using standardized tests for measurement. In the new models, health literacy is conceived as a multidimensional phenomenon encompassing not only functional skills but also beliefs, values, identities, and various types of knowledge.

In Brazil, the current scenario in the field of health literacy is initial and needs more specific guidelines for its integration into the programs and policies of the Unified Health System (SUS). Promoting health literacy through policies can improve interaction between health professionals and patients and stimulate continuous learning. Therefore, a stronger commitment on the part of those responsible for management is essential to ensure the effective incorporation of government.

To overcome some of the paradigms and epistemological challenges associated with conceptions of health, health literacy is presented as a new direction in health promotion. This approach responds to the demands linked to quality of life, adopting a healthy lifestyle, and preventing disease while playing a crucial role in maintaining physical, mental, and social well-being, as proposed by the World Health Organization(10). Peres, Rodrigues, and Silva(9) highlight the importance of understanding and applying health information to promote public well-being, emphasizing the need for an informed and integrated approach to public health.

The discussion around health literacy for patient safety in primary care has been a focus of recent studies in Brazil. Authors such as Cavalcanti et al.(11) have addressed the complex intersection between health literacy and patient safety in this specific context. These studies emphasize the importance of understanding how the level of health literacy can directly influence the safety and quality of care offered in Primary Health Care. They also highlight the scarcity of comprehensive reviews covering health literacy, patient safety and primary care in a broad and integrated way.

Identifying these gaps in the literature points to the urgent need for interdisciplinary and comprehensive studies that contribute to developing policies and interventions aimed at improving health literacy in primary care in the Brazilian context(12).

**Health Literacy and Health Management**

Effective management of the health system requires a population with good health literacy. This includes scheduling appointments, following treatments, and understanding public health policies. Lack of health literacy can lead to barriers to accessing healthcare and higher costs. The deficit in health literacy amplifies existing barriers in managing chronic diseases, exa-
cerberating the disparity in access to adequate care. The inability to interpret health information effectively can lead to inadequate self-care and treatment decisions, resulting in a cycle of poor health and worsening chronic conditions. In addition, this health literacy gap can undermine public health interventions’ efforts since disseminating information and promoting healthy behaviors may not effectively reach segments of the population with low functional health literacy.

In the current global scenario, health literacy has emerged as a crucial point in managing health systems. Given the aforementioned impacts, managers must invest in strategies that not only improve the accessibility and comprehensibility of health information but also address the social and structural disparities that perpetuate the lack of health literacy.

In addition, health management faces an increase in the system’s operating costs, impacting the promotion of preventive health, which can lead to late diagnosis, an increase in morbidity and mortality rates, and a strain on the health system’s resources. The issue of health literacy is a challenge that ranges from inappropriate use of services to reduced adherence to treatment, health system spending, and health system efficiency. As such, it not only represents a multifaceted difficulty for health management but also generates impacts ranging from disparities in access to healthcare to potential risks for patient safety, contributing to a higher incidence of hospitalizations.

The World Health Organization (WHO), as quoted by the Directorate-General for Health (DGS) in 2019, establishes Health Literacy as “the extent to which people can acquire, assimilate and understand key health information in order to use health services appropriately and make informed decisions about their health”. It is essential to highlight that Health Literacy plays a fundamental role not only in health promotion and disease prevention but also in optimizing the effectiveness and efficiency of health systems. However, it is imperative to intensify investments in the education of nurses, as emphasized by the World Health Organization in its guidelines for the global strategy to strengthen the Nursing and Midwifery professions. These investments must be in line with the pursuit of the Sustainable Development Goals and aligned with national health priorities and global development plans for both professions. More specifically, there must be a continued focus on undergraduate education, as well as on preparing and improving nurses to play a key role in health promotion, with an emphasis on Health Literacy (HL), which is a Social Determinant of Health (SDH) with global reach.

Health literacy (HL) is vital at individual and community levels. Individually, it refers to people’s ability to access, understand, and apply health information effectively to make decisions about their health. In a more collective context, community literacy involves the whole community in carrying out these actions. This not only reflects the ability of health organizations to be responsive to users’ needs, but also promotes disease prevention and the provision of effective health care.

In addition, the level of community health literacy can indicate health organizations’ capacity to respond to users’ needs, which are influenced by the Social Determinants of Health such as education, income, work, housing, and access to health care. This link is intrinsically linked to the social and organizational context in which health decisions are made and implemented. Sciences such as education, linguistics, psycholinguistics, psychology, and sociology, for example, carry out their own analyses of literacy. For example, sciences such as education, linguistics, psycholinguistics, psychology, and sociology analyze literacy. In the field of health, we have the expressions “Health Literacy” and “Health Literacy”.

Promoting health literacy is key to ensuring people have the knowledge and skills to make informed decisions about their health and well-being. Health literacy is not just about understanding complex medical information; it also involves navigating the healthcare system, understanding the costs associated with healthcare, and communicating effectively with healthcare professionals.

One reflection on how to promote health literacy in health management involves Access to Information. This can include the creation of clear and accessible educational materials and the use of technologies to make information available online.

In this sense, promoting health literacy in health management is essential to empower people to make informed decisions about their health. This benefits individuals and contributes to more effective and efficient health systems, reducing the burden on health professionals and system resources. Health literacy should be seen as an investment in the general well-being of society. As explained above, the construction of HL is strongly linked to communication. A direct re-
Their relationship can also be identified between the perspective of HL and health education and communication. Health education is the result of combinations of learning experiences, with the use of different technologies and tools, experienced by health service users to strengthen their knowledge and attitudes in the context of health policy, thus strongly intervening in the creation of health literacy. Thus, the apprehension of knowledge and its appropriation as an essential element for each citizen to reflect on their health and the determinants and conditioning factors for their quality of life must also consider the subjective dimension of the social being. Therefore, LS emphasizes the importance of effective communication and health education strategies in achieving a better quality of life and positive results for the population’s health.

In this context, health management plays a key role in promoting effective communication in health. It focuses on the organization, coordination and implementation of communication strategies that seek to achieve various objectives related to health policy. It also ratifies the perception that it is necessary to identify the various meanings, experiences, conceptions and discourses established between individuals and life in society\(^\text{(20)}\). Based on this understanding, translating the term “health literacy” as “health literacy” broadens the scope to include not only the understanding of health information but also people’s ability to transform it into effective care actions. This makes it possible, among other dimensions, to analyze the attitudes that people can adopt after acquiring health information\(^\text{(21)}\).

The advanced models of health literacy are more complex approaches that emerged in the 2000s in Europe as a mere interpretation of health information, therefore highlighting the importance of keeping up to date with the evolution of health education practices\(^\text{(21)}\). Recognizing the complexity of health literacy and its multiple dimensions is key to developing more effective health education approaches and improving people’s ability to make informed and meaningful decisions about their health\(^\text{(22)}\).

This manuscript aims to reflect on health literacy, focusing on health management that stimulates people’s quality of life and strengthens the health system. Health Literacy is of undeniable importance on a global scale, empowering communities in situations of vulnerability, promoting an increase in their health and quality of life, and reducing health disparities\(^\text{(23)}\), especially in the health area. In addition, it contributes to achieving the current goals of developing human resources and knowledge and promoting innovation and research\(^\text{(24)}\). Therefore, it is crucial to incorporate the principles of LS into the training of nurses, whether in university education or professional development programs, to enable them to apply evidence-based innovation in health promotion. This approach is in line with the Strategic Guidelines for Strengthening Nursing and Midwifery Services (2016-2020)\(^\text{(25)}\) and, especially in Brazil, with the Policy for Strengthening Permanent Health Education Practices\(^\text{(26)}\) in the Unified Health System.

It is important to note that, when reviewing the literature available on the Scientific Electronic Library Online (SciELO) and Google Scholar, no educational initiatives were found in the Brazilian context aimed at developing nurses’ competencies in relation to HL, including digital HL. Since 2009, SL has been the subject of academic studies, with its vitality and visibility constantly growing, thanks to the intellectual impulse led by the Brazilian Health Literacy Network (REBRALS).

**METHOD**

This is a reflection on the concept of Health Literacy in health management, supported by the goals of Nursing Now. The main reference used was the causal model of Health Literacy\(^\text{(27)}\), articles, and books. Zarcadoolas, Pleasant, and Greer\(^\text{(27)}\), in an article published in 2005, conceptualized health literacy as a set of skills and competencies that people develop to search for, understand, evaluate, and apply health-related information and concepts. This enables them to make informed choices, reduce health risks and improve their quality of life. In addition, the authors proposed a theoretical model for building HL, which is based on four main dimensions:

- **Fundamental HL**: Involves skills related to reading, speaking, writing and interpreting numbers, including numeracy.
- **Scientific HL**: Refers to levels of competence related to science and technology, encompassing the understanding of fundamental scientific concepts, the ability to understand technological complexity, the understanding of technology, the understanding of scientific uncertainty, and the awareness that rapid changes in science can occur.
- **Civic HL**: This deals with the skills that enable citizens to become aware of public issues and participate in the decision-making process. This includes media literacy skills, knowledge about civic and governmental processes, as
well as the awareness that individual health decisions can affect public health.

- Cultural HL: Refers to the ability to recognize and use collective beliefs, customs and worldviews, as well as social identity, to interpret and act on health-related information\(^{27}\).
- This broad conceptual framework contributes to a deeper understanding of health literacy and its importance in health-related decision-making.

**RESULTS**

In this context, health literacy plays a fundamental role in managing the health system, thus strengthening citizens’ social control over public policies and the role of the state in promoting health. This helps improve the quality of care, promote active patient participation, and ensure that the nursing team is well-prepared. It highlights the relevance of the concept of health literacy and its central role in public health practices and processes, especially at the intersection of information, communication and health\(^{9}\). In addition, it highlights the fundamental role played in forming representations related to health in contemporary society\(^{28}\).

In this way, it highlights the importance of establishing supportive and participatory relationships and transforming management models in the health area. These actions can potentially add value to the human experience, promoting the democratization of working relationships and recognizing the importance of humanized health professionals in promoting and caring for people. Health literacy is the degree to which individuals can collect, process and understand the basic information and services needed to make decisions. Relevant topics for researchers/health professionals/public policymakers. Its interdisciplinary, relational, and interactive nature suggests a holistic and collaborative approach to promoting health literacy and improving the well-being of the population\(^{29}\).

**DISCUSSION**

Considering the concept of health literacy as defined by Sorensen\(^{30}\) and recognizing the importance of communication in the process of understanding health education actions, as highlighted by Marques and Lemos\(^{31}\), show that health literacy, with a focus on health management, is extremely important, as it involves people’s ability to understand and use health-related information effectively. In this context, it plays a fundamental role in transmitting essential information about the care to be provided to patients. However, this process often needs to be improved, which can compromise the proper execution of the necessary procedures by this target audience.

Health professionals play a crucial role as a source of information and training for patients and their families, as pointed out by various sources\(^{32}\). This implies that they must have the confidence to identify and interact more effectively in different contexts related to health literacy. In this sense, health literacy is intrinsically linked to the personal and educational training of health professionals, and it is logical that the development of the health literacy of these professionals in training should be monitored over time\(^{33}\). It is necessary to reflect on the inclusion of health literacy principles in these professionals’ curricula and training programs.

If health literacy applies to both individuals and health systems, everyone must have the necessary skills and competencies to locate and use information, whether as users, health professionals or health systems\(^{31}\). Improving health literacy, regardless of the context, can contribute to informed decision-making by all those involved, more efficient navigation in the health system, the reduction of health inequalities, the promotion of prevention and well-being, safety and the reduction of health risks, as well as the provision of quality healthcare and a better quality of life\(^{31}\).

The ability of nurses to communicate effectively, educate patients, promote adherence to treatment and ensure patient safety is intrinsically linked to health literacy. It is therefore essential to address these issues in order to promote effective health literacy in healthcare management.

**CONCLUSION**

Promoting health literacy is fundamental to individual and collective well-being. It empowers people to make informed health decisions, improves access to health services and contributes to a healthier and more informed population. Health management also benefits, with more effective systems and potentially reduced costs, when the population is informed and empowered. Therefore, investing in promoting health literacy should be a priority for health systems and public policies worldwide.

Finally, the importance of improving health literacy is highlighted to strengthen the role of nurses and other health professionals on the importance of health literacy and the change. 
in educational approach to promote health in a more comprehensive and integral way. This emphasizes collaboration and a holistic vision as fundamental to providing adequate healthcare. In this way, this reflection will make it possible to improve the quality of care, promote patients’ active participation in their health and ensure that the nursing team is able to meet the needs of patients with different levels of health literacy.

REFERENCES


CONFLICT OF INTERESTS
The authors have declared that there is no conflict of interests.

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