

Editorial

Health literacy and COVID-19

Abstract

In early 2020, the world experienced an unprecedented health crisis. When the pandemic of coronavirus was declared by the World Health Organization, it brought with it sudden and dramatic changes to everyday life. In the UK, the key message from the Government was to ‘Stay at home, protect the NHS, save lives’, sending out a clear warning that failing to stay at home would put other lives and the ability of the NHS to cope at risk. This editorial discusses COVID-19, how society responded and the vital role that health literacy plays in saving lives during a global health emergency.

Keywords: global health; health literacy; public health

As I write this editorial, I find myself along with the rest of the world living through some of the strangest and most unsettling times that have ever been known. On new year’s eve, as people celebrated the arrival of 2020, no one could possibly have predicted that within 3 months, societies all over the world would be in lockdown, allowed to leave their homes only for food and basic supplies, for exercise once only a day and to have no physical contact with anyone other than the people they lived with... for an undeclared and uncertain length of time.

It is a time that will go down in history as an unprecedented health crisis on a global scale. In early 2020, coronavirus, a previously unknown pneumonia-like virus for which at the time of writing, there is currently no vaccine or cure, was first detected in the city of Wuhan in China. It rapidly spread from country to country and continent to continent sparking civil unrest and leading the World Health Organisation to declare a global pandemic. Within less than two months, over 2 million cases had been confirmed worldwide, accompanied by a death toll that was

rising at an alarming rate. On Easter Sunday, the death toll sat at 113 885, and in his speech, Pope Francis called for global solidarity in the face of the pandemic. In the UK, the number of deaths was announced as having passed the 10 000 mark, and before the virus is defeated, it will have claimed tens of thousands more. The Prime Minister tweeted a video message thanking the NHS for saving his life, his first communication to the public since being discharged from intensive care after becoming critically ill with COVID-19 and saying, ‘it could have gone either way’. Outside of her normal Christmas day duties, the Queen addressed the nation for only the 5th time in her 68-year reign. Every household in the UK received a letter, signed by the Prime Minister with the request to ‘Stay at home, protect the NHS, save lives’, and 8 pm on Thursday evenings became a regular time for everyone at home to stand at their doorsteps and celebrate the bravery of NHS and social care frontline workers.

Although it is known that for those who contract the virus, survival rates are worse in the elderly and those with pre-existing health conditions, particularly respiratory and autoimmune diseases, it appears indiscriminate. Children and those who are fit, strong and healthy have also died from COVID-19. So, in these difficult and uncertain times, good health literacy has never been more crucial to survival. The World Health Organization defines health literacy as, ‘the personal characteristics and social resources needed for individuals and communities to access, understand, appraise and use information and services to make decisions about health’. Health literacy promotes and empowers people and communities to participate in their health care, it improves health and well-being, addresses health inequalities and builds individual and community resilience. Those with good health literacy are generally able to manage their health more effectively than those who do not. Health

literacy is a social determinant of health, and whilst poor health literacy is associated with poor education, poverty, unemployment and low socioeconomic status, even those with higher levels of education and income can have low health literacy when they are experiencing something new. Most people understand how to self-manage common illness and health conditions, but a person newly diagnosed for instance with a long term condition is likely to have low health literacy related to this until they have learned about the condition, how it specifically affects them, and how it is effectively managed on a day-to-day basis.

This point is particularly relevant in the midst of the coronavirus pandemic because coronavirus is new. Very new. The world is still trying to catch up. It is an unprecedented situation because scientists do not yet know enough about the virus. So, whilst they race to develop a vaccine, the world has been left pondering how to respond. In effect, it has quickly had to become health literate in the context of this new disease. Debates have taken place about the effectiveness of herd immunity versus social distancing and isolation measures, and countries have made decisions about how to act based on these approaches with most opting for the enforcement of draconian methods in efforts to slow the spread of the virus. In an attempt to gather as much information as possible about the virus into one resource, the WHO COVID-19 Database was launched on the 14th April and health librarians and information specialists have sprung into action. Indeed, the role of the health librarian could not be more relevant at this moment in time. Making sense of the information we have is vital in improving not only the scientific understanding of the virus but also the health literacy of citizens and ensuring the right public health messages are given.

Since the outbreak of coronavirus, social media and the Internet have exploded with information

and a significant proportion of it is inaccurate. Conflicting messages about the symptoms of COVID-19, how it is transmitted and the effectiveness of gloves and face masks have been central in 'fake news' stories. Aiming to counter this harmful information, the World Health Organisation has published a myth busters page with downloadable posters to bolster public health information. In the UK, the 'Stay at home, protect the NHS, save lives' public health slogan sends out a clear warning that failing to stay at home puts other lives and the ability of the NHS to cope at risk. Yet despite these strong and urgent messages to observe social distancing policy we have seen repeated pictures of people gathering together in large groups at weekends and bank holidays in popular tourist destinations. This is indicative of a health literacy deficient in the general population. Inaccurate information, myths about the disease and important health information that is not clear and simple to understand do not help this situation. Without good health literacy people are not able to effectively differentiate between fact and fiction and can allow unreliable information to influence their behaviours. This can be harmful not only to the individual but to society as a whole.

A health literate society is one that understands both the severity of the situation and how to protect itself and others, through simple actions. But it is also the responsibility of information providers to provide clear, simple information that can be understood. Collectively, the responsibility for health literacy is everyone's. The Government, health information providers, health professionals, the media and the general public all play a part and lives literally do depend on it.

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