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Recommended Citation

Sabzwari, S. R. (2017). Health literacy in Pakistan: Exploring new ways of addressing an old challenge. *Journal of Pakistan Medical Association*, 67(12), 1901-1904.

Available at: https://ecommons.aku.edu/pakistan_fhs_mc_fam_med/213

Health literacy in Pakistan: Exploring new ways of addressing an old challenge

Saniya Raghil Sabzwari

Abstract

Pakistan continues to struggle with low health literacy that often results in late presentation of disease, poor adherence to treatment and meagre understanding of wellness and disease prevention. In a country burdened by diseases of the developing and the developed world, with poor healthcare infrastructure and low literacy levels improving healthcare literacy could have major influence on health and wellness of our masses. Utilising our rapidly expanding mobile technology and media for dissemination of health information is a viable solution. Public service announcements for media and health information apps for mobile technology can be developed by the government, health sector and media partnership. A systematic, multi-level targeted approach to health literacy would allow health seekers the opportunity to understand and comprehend disease prevention, symptomatology and treatment.

Keywords: Health literacy, Healthcare systems, Public service announcements.

Introduction

The practice of medicine with all its rapid advances fails to have impact if the population it serves struggles with basic concepts of health and understanding of illness.

In this article a brief overview of factors influencing health in a developing country, Pakistan, are discussed with a view to providing a framework that targets health literacy in the communities as a bottom-up approach to improving health and wellness.

Health Literacy

According to the World Health Organisation (WHO), health literacy encompasses the ability to access healthcare, communicate and understand issues arising in health-related encounters. This definition of health literacy includes having skills that enable patients to improve disease management, focus on health promotion and, most importantly, provide a sense of empowerment and enablement to healthcare recipients.¹

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Present State of Healthcare in Pakistan

Health and healthcare systems in Pakistan are complex and bogged down by multiple issues. There is a vast spectrum of both communicable and non-communicable diseases. High rates of infant and maternal mortality are coupled with a heavy burden of non-communicable illnesses like diabetes, hypertension and heart disease.^{2,3}

Moreover, public health systems in Pakistan are archaic with rundown infrastructure. Many health providers still function in traditional all-knowing roles, at times making uninformed decisions for their patients.

Furthermore, health-seeking behaviour adds to the complexity of disease and its management. Anecdotal evidence shows that it is common for physicians to encounter patients that stop taking their antihypertensive medicines as soon as their blood pressures come down.

Patients at times present with advanced stage tumours, ignoring initial symptoms.⁴ Acute life-threatening illnesses present late as knowledge of key symptomatology is poor.⁵

Of even greater concern are those with mental illness who continue through life limited, bound by ignorance and stigma, at times creating disruption not only in their own lives but also their families.

Literacy and Health awareness

As health literacy is strongly dependent on education,⁶ the Pakistani population is further disadvantaged. According to the Pakistan Bureau of Statistics, one-third of the population has primary level education and only 20% attain middle school education with women lagging behind men.⁷ A 2012 United Nations Educational, Scientific and Cultural Organization (UNESCO) report on education ranked Pakistan 113 out of 120 in the Education development index, highlighting the state of education in our country.⁸

A recent study looking at health literacy reported more than half the participants had a lack of understanding of disease, physician instructions, drug safety and effectiveness.⁹

Thus a patient with meagre finances, at risk of a myriad of health issues with limited access to quality healthcare and almost non-existent health literacy is at an enormous disadvantage.¹⁰

Though comprehensive solutions are required to transform health and healthcare in Pakistan, a game-changing step could be enhancing public awareness of health and wellness. Masses, if empowered with basic knowledge of health, may strive to overcome common barriers to healthcare when they understand the significance of key symptoms/signs of illness.

Though programmes like school health and community outreach have helped, more efforts to improve health education for the masses are required.¹¹

Viable Solutions for Improving Health Literacy

Whereas a massive overhauling of the educational system goes beyond the role of the medical community, simple innovative solutions are now available to transform the face of those seeking healthcare.

Tapping into the massive surge of technology, telecommunication and social media in Pakistan seems to be the obvious answer to this. Over the last decade, Pakistani media is believed to have made the viewer more politically savvy, socially aware and democratically inclined.¹² According to the Pakistan Advertiser's Society

2009 report,¹³ there are more than 70 local television channels in national and regional languages. In 2005, more than 30 frequency modulation (FM) radio channels were present. In addition, Pakistan Electronic Media Regulatory Authority (PEMRA) also issued FM licenses to public universities¹⁴ and some of those have used this medium effectively for public access. According to a Gallup survey, cable television viewership in 2013 had reached 85% and 50% of population in urban and rural areas respectively.¹⁵

The Pakistan Telecommunication Authority (PTA) reported a rise of cellular teledensity (the number of connections per 100 persons in the area) to 70% in January 2017 from 39% in 2007.¹⁶

The rapid rise in mobile phone usage depicts a global transition of adopting cellular technology as a major means of communication even in developing countries.

Despite low literacy, more than one-third of Pakistani people use a cell phone to send text messages. A Pew Research Centre report cited that using cellular technology has a positive influence on literacy in developing countries.¹⁷ Utilisation of these vastly accessed telecommunication and television networks in Pakistan would be the most practical way of disseminating basic health information. Sporadic efforts using public service announcements (PSAs) for issues like

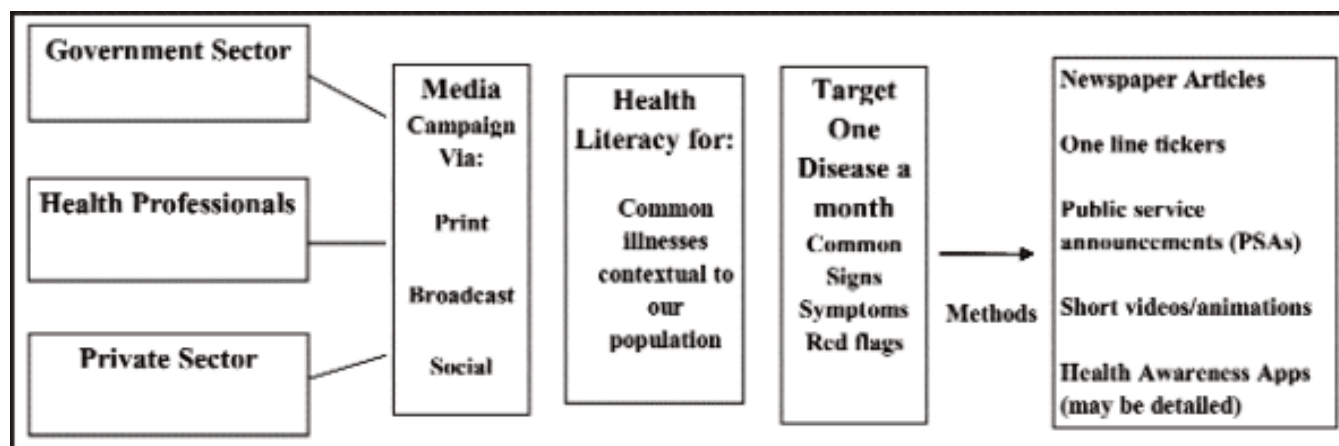


Figure-1: Partnership strategy.

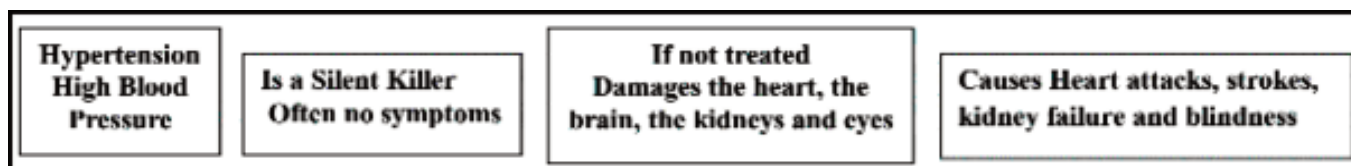


Figure-2: Targeting a single disease.

smoking have been made. Consistent, targeted and comprehensive efforts are required, however, to bring about change in health awareness (Figure-1).

Focussed and strategic partnerships between the health community and media seem to be the need of the hour. This would enable the media to be more socially accountable, the health community to have a more informed patient, and the public would benefit by a better understanding of common illnesses.

Success stories of such media-led health awareness campaigns exist.¹⁸ Medical associations have also developed disease-specific PSAs to improve health literacy. As an example, the American Diabetes Association has developed PSAs in different languages that can either be accessed directly or utilised by media companies for public dissemination.

Culturally contextual PSAs can be developed in local dialects and broadcasted through various media like print, sound and visual, including social media.

Pakistan is also a burgeoning force in app development. According to a Cable News Network (CNN) report, young Pakistanis have already developed high-quality apps that have gained international attention.¹⁹

The role of the government is also critical in harnessing such programmes. Government-led health programmes need to evolve to include not only health infrastructure, resources and delivery, but also comprehensive health literacy of its citizens. Examples of such government-led initiatives are present.

According to WHO, the National Health Literacy Project in China developed in 2008 helped increase health literacy from 6.5% to 9.8% in six years.²⁰

The US Department of Human and Health Services developed a National Action Plan to improve health literacy, keeping social, ethnic and cultural factors in line with national health issues.²¹

The government in addition could set up tax incentives for media and private-sector entities that participate in improving health literacy.

The idea is to target one disease, one symptom at a time and use various strategies to reach out to the public. This can be accomplished by one-line tickers on television with images, one-line text messages via cell phones or through print media (Figure-2).

One company/organisation could adopt and champion one illness and improve health literacy for its prevention,

detection, complications and self-care strategies to improve awareness of various stages of a disease e.g. diabetes.

In addition to personal and community health, environmental factors responsible for disease and ill-health should also be addressed through this strategy.

Conclusion

Major stakeholders like federal and provincial health ministries, public and private sector organisations should capitalise on these resources and opportunities to create meaningful impact in improving the health awareness and wellness of our population.

Disclaimer: None.

Conflict of Interest: None.

Funding Sources: None.

References

1. Health literacy and health behaviour. 7th Global Conference on Health Promotion: track themes 2009. [Online] [Cited 2016 Oct 20]. Available from: URL: <http://www.who.int/healthpromotion/conferences/7gchp/track2/en/>.
2. Infant Mortality rates Pakistan 2015. [Online] [Cited 2016 Nov 20]. Available from: URL: <http://data.worldbank.org/indicator/>.
3. Wasay M, Zaidi S, Khan M, Jooma R. Non communicable diseases in Pakistan: Burden, challenges and way forward for health care authorities. *J Pak Med Assoc* 2014; 64: 1218-9.
4. Talpur AA, Surahio AR, Ansari A, Ghumro AA. Late presentation of breast cancer: A Dilemma. *J Pak Med Assoc* 2011; 61: 662-6.
5. Khan MS, Jafary FH, Faruqi AM, Rasool SI, Hatcher J, Chaturvedi N, et al. High prevalence of lack of knowledge of symptoms of acute myocardial infarction in Pakistan and its contribution to delayed presentation to the hospital. *BMC Public Health*; 2007, 7: 284.
6. Davey J, Holden C, Smith B. The correlates of chronic disease-related health literacy and its components among men: a systematic review. *BMC Public Health* 2015; 15: 589.
7. Pakistan Bureau of Statistics. Government of Pakistan 1998 Census. [Online] 2017 [Cited 2016 Oct 20]. Available from: URL: <http://www.pbs.gov.pk/population-tables>.
8. Education for All. Global Monitoring Report. Fact Sheet Oct 2012. [Online] [Cited 2017 Feb 20]. Available from: URL: http://en.unesco.org/gem-report/sites/gem-report/files/EDUCATION_IN_PAKISTAN__A_FACT_SHEET.pdf
9. Saleem F, Hashmi FK, Atif N, Bukhari N, Ahsan M, Saeed H, et al. A Cross Sectional Assessment of Health Literacy among Cardiovascular Patients in Karachi, Pakistan. *Health Econ Outcome Res Open Access* 2015; 1:1
10. Zain-ul-Abideen, Sabir S A, Hassan F. Improving health literacy in Pakistan - "a new oil in old lanterns" *J Pak Med Assoc* 2013; 63: 539.
11. Health education: theoretical concepts, effective strategies and core competencies. World Health Organization 2012. [Online] [Cited 2016 Nov 20]. Available from: URL: http://applications.emro.who.int/dsaf/EMRPUB_2012_EN_1362.pdf.
12. Yusuf H. How much is enough? Media access in Pakistan.

- Published. [Online] 2013 [Cited 2016 Oct 20]. Available from: URL: <http://www.dawn.com/news/1028494>.
13. Television in Pakistan - an Overview. Pakistan Advertiser's Society. [online] [Cited 2016 Oct. 20]. Available from: URL: <http://www.pas.org.pk/television-in-pakistan-an-overview/>.
 14. Naz AA. FM Radio Revolution in Pakistan. *Global Media Journal* 2008; 1
 15. Cable TV viewership in Pakistan has reached 64%: Gallup. [Online] 2013 [Cited 2016 Oct 20]. Available from: URL: <http://www.tv.com.pk/news/cable-tv-viewership-in-pakistan-has-reached-64-gallup-195.html>.
 16. Pakistan Telecommunication Authority. Telecom Indicators. [Online] [Cited 2017 Feb 20]. Available from: URL: <http://www.pta.gov.pk/index>. Last Updated (Wednesday, 22 February 2017).
 17. Communications Technology in Emerging and Developing Nations. Pew Research Center. [online] [Cited 2017 Feb 20] Available from: URL:<http://www.pewglobal.org/2015/03/19/1-communications-technology-in-emerging-and-developing-nations/>.
 18. Georgiadis M. Motivating Behavior Change: A Content Analysis of Public Service Announcements From the Let's Move! Campaign. *Elon Journal of Undergraduate Research in Communications* 2013; 4: 1-3
 19. Mohsin S, CNN and Saifi S. Pakistan's tech talents find app success. [Online] [Cited 2016 Nov 20]. Available from: URL: <http://edition.cnn.com/2013/09/18/world/asia/pakistani-apps/>.
 20. WHO: The Role of Governments in promoting health literacy. [Online] [Cited 2016 Nov 20] Available from: URL: <http://www.who.int/healthpromotion/conferences/9gchp/health-literacy-government-role/en/>.
 21. National Action Plan to Improve Health Literacy. US department of Human and health Services. [Online] [Cited 2016 Nov 20]. Available from: URL: https://health.gov/communication/hlactionplan/pdf/Health_Literacy_Action_Plan.pdf.
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