

Time to Act: System mapping and Investing on health literacy from school to elderly, ensuring sustainable health for all

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Abstract



The Shanghai Declaration of 2016 recognizes health literacy as one of the key health promotion pillars for achieving the Sustainable Development Goal (SDG) targets.



Low health literacy has been linked to less self-management, lower health status, riskier health behavior, less healthy options, higher expenses, and inappropriate use of health services as reported in many research literatures around the globe.



European countries have evidence that enhancing health literacy could empower citizens through the development of personal and collective knowledge and skills, and the creation of responsive settings, healthy policies and enabling healthy environments.



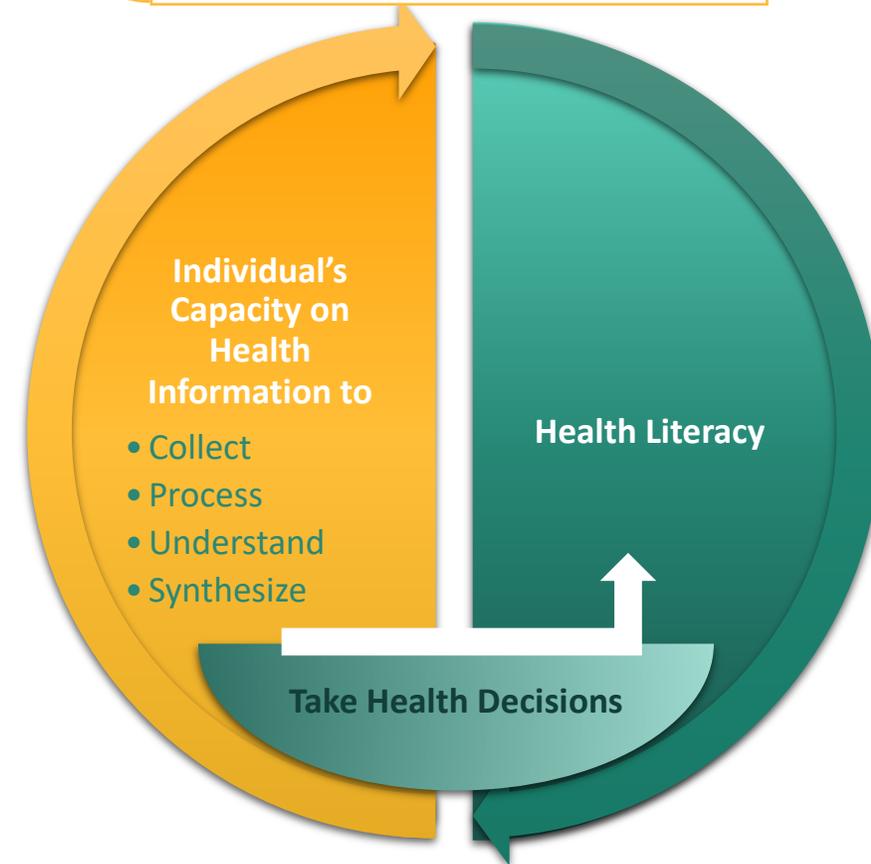
Indian National Health Policy and Niti Ayog has also emphasized on assessment and development of Population Health Literacy.



Using a health literacy approach to policy making a people-centered effective public health plans and program can be channelized.

Indian National Health Policy 2017

“Swasth Nagrik Abhiyan”



Health literacy is individual's capacity to collect, process, understand and synthesize health information and take health decision based on its ability.

Methods

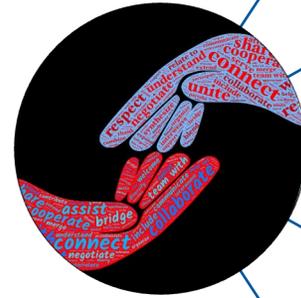
For developing Health Literacy
do we need extra
resources?

NO!

What we need?

Change in approach.

Collaborate and Activate
to deliver
Health Literacy
Interventions



Village Health Sanitation & Nutrition Committee

Education Providers

Primary Health Care Providers

Healthcare Industry

Indian Industries



Apply health literacy interventions



identify effective health literacy interventions



Follow up with partners for feedback & check health literacy levels

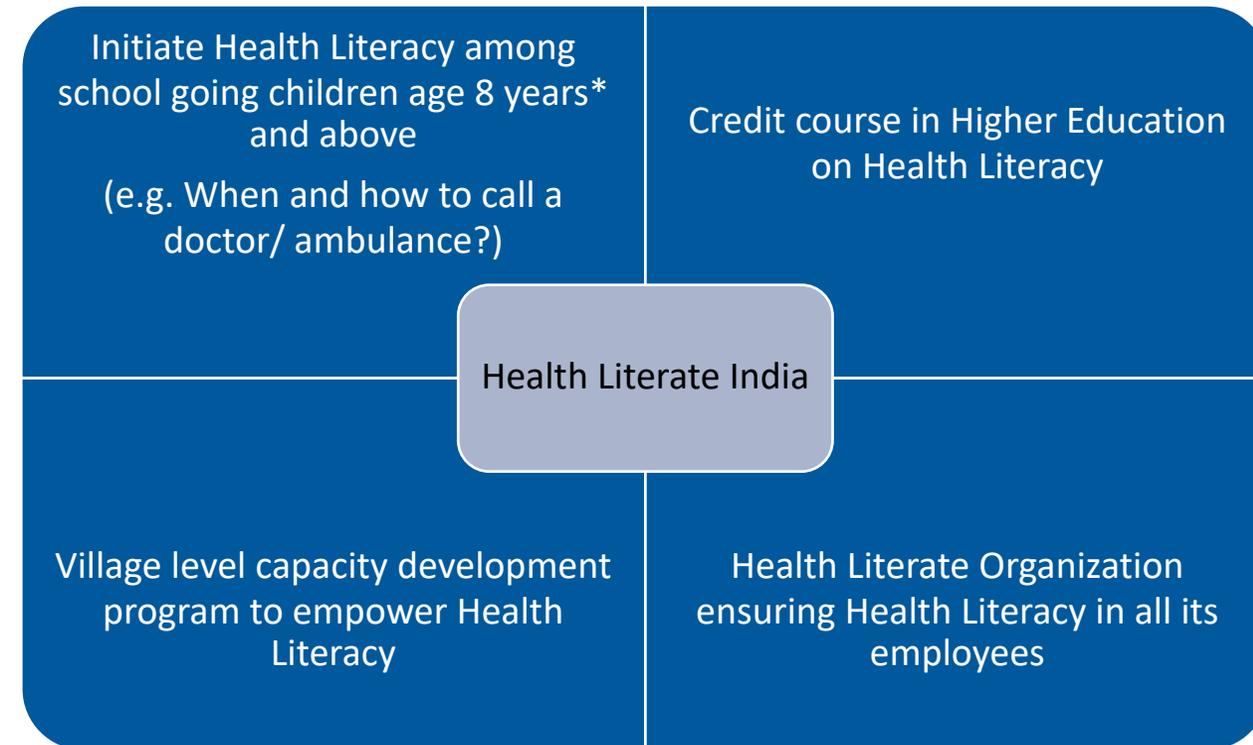


Activate channels of health communication with partners

Figure 1. Implementation frame to achieve effective Health Literacy

Activate channels of health communication with partners

- **Print booklets (Manipal Health Literacy Unit Initiated)**
 - What to ask a doctor
 - What to eat (local food choice)
 - What are different medical terminologies'
 - What are my medical rights
 - What are my health responsibilities
- **Print e-bulletin**
- **Start YouTube / Social Media Channel**
(Partner with hospitals)
- **Radio talks (Q/A)**
(Alternate and allopathy medical doctors)
- **Digital Health Literacy App**
 - Manipal Health Literacy Unit Initiated



*Age 8 years and above is selected as they compete in Olympiad and are able to read and write basics in at least one language.

Figure 2. Literate to Health Literate

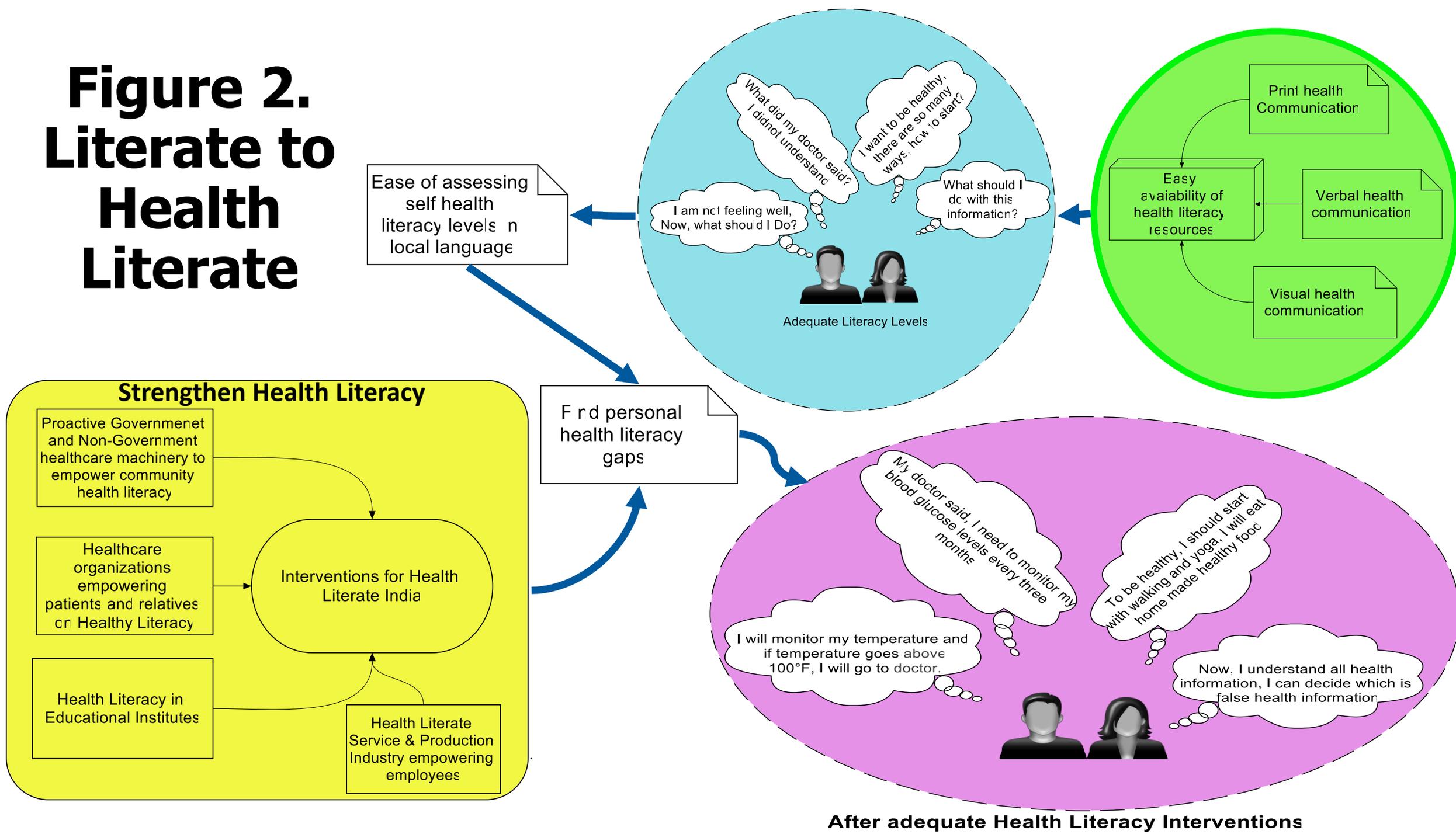


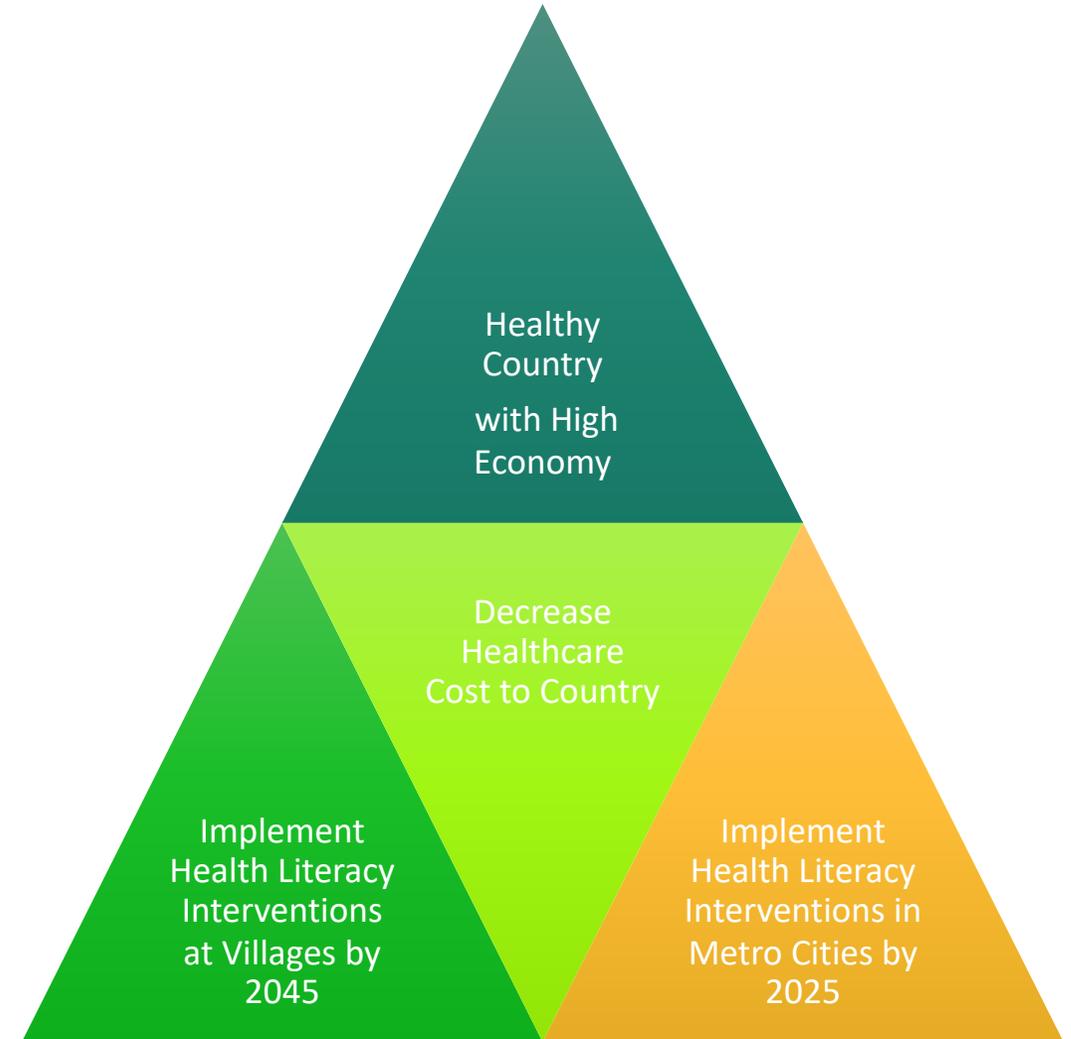
Figure 3. Impact of Health Literacy Implementation Program in Country

Primary Impact

1. Decrease in outpatient load in neighboring tertiary care hospitals
2. Increase in targeted group practicing healthy lifestyle
3. Targeted group's assessment shows health literate

Secondary Impact

1. Reduced number of sick leaves by the employees
2. Improvement in various health indicators
3. Reduction in sickness episodes due to avoidable causes
4. Economic growth



Conclusion

- System Analysis to achieve SDG 3: Good health and well being can be routed through development of *Population Health Literacy*.
- Health Literacy Interventions targeted approach has capacity to bring down the per person spending on healthcare.
- Health Literacy Interventions can bring down the additional load on healthcare delivery system.

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