

Nurturing the Intervention Strategies to Improve Health Literacy in Malaysia

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Abstract

Health literacy measures the ability of an individual to acquire, comprehend, and make use of health information in their day-to-day lives. Numerous studies have demonstrated that having a comprehensive knowledge of health leads to improvements in both one's health status and one's quality of life. Through the implementation of various health literacy intervention strategies, the government has been a significant contributor to the advancement of health literacy. However, the state of the population will determine whether certain intervention strategies are suitable and appropriate for use with those populations. As a result, the purpose of this research is to determine whether there is a general agreement among professionals regarding the strategies that can be used to improve health literacy levels among Malaysian citizens. The Nominal Group Technique (NGT) was applied to collect the thoughts of professionals. Eight professionals with expertise in mitigation strategies have conferred and compiled a list of the options that are appropriate for the Malaysian community. The findings of the NGT have demonstrated that all the mitigation strategies listed are appropriate for the people of Malaysia, and a new list of mitigation strategies arranged in descending order of priority has been compiled because of these findings. The finding is helpful for policymakers and health organizations in implementing the health literacy intervention and, ultimately, in increasing people's understanding of the health information that is provided.

Keywords: Health Literacy, Intervention, NGT, SDG3

Introduction

Health literacy refers to an individual's capacity to acquire, comprehend, assess, and use information and services related to their health to decide and make choices concerning their health (Sorenson et al., 2015). If more people are educated about their health, they will have better health outcomes and a higher quality of life (Batterham et al., 2016). Most of the research on health literacy has been carried out around the world including in Asian countries (Rajah et al., 2019; Duong et al., 2017), with the purpose of measuring the level of health literacy among the public. In a similar vein, the creation of health literacy interventions is an important strategy that may be taken to promote health literacy.

The United States Department of Health and Human Services, and other agencies in the US have promoted health literacy as a priority in their research. They conducted a few intervention programs such as The Plain Writing Act (Marquez & Ladd, 2019) the National Action Plan to improve health literacy (Vamos et al., 2020), and Healthy People 2020 (Santana et al., 2021) are among the federal programs that place an emphasis on health literacy. These programs are some of the actions taken by the government to promote and increase the health literacy skills of individuals and organizations.

There are some shreds of evidence to suggest that interventions targeted to address low health literacy improve adherence to treatment and increase health-related knowledge, and comprehension (Miller, 2016; Yeh et al., 2018). However, more evidence is required to substantiate the findings and determine which treatments will have the greatest positive impact.

Some interventions that make use of written and printed materials that are designed to be easy to read and understand and informative increase health-related knowledge among children and adults more so than traditional materials (Bélanger et al., 2014). Campbell et al (2019) suggest that health education should be instilled in an individual from their childhood. It is reported that it may affect their long-term health outcome. Hahn & Truman (2015) also claimed that the educational program appears to increase health literacy among them. Literacy programs for individuals either of any age provided in community settings has the potential to improve participants' access to and ability to utilize pertinent health information. In a similar vein, more comprehensive health intervention programs that are designed specifically for older adults and that consider participants' varying levels of health literacy have the potential to improve participants' knowledge and their ability to locate pertinent health information.

Patients' comprehension and appropriate utilization of health care appear to be improved by health literacy interventions that combine multiple approaches (for example, written and visual materials that are easy to read and understand, video tutorials, health literacy training for physicians, and in-person patient assessments) (Miller, 2016). It would suggest that interventions that employ multimedia techniques, place a focus on interpersonal interactions, or prioritize face-to-face contact enhance improved communication between patients and providers. Increasing one's understanding of diseases such as Covid, HIV, cancer and many more can be accomplished using health literacy programs that make use of technology or the internet (also known as eHealth interventions) and web-based intervention such as web-based therapy.

The Objective of the Research

The objective of this study is

- to find out what experts' consensus on the mitigation approaches to increase health literacy levels among citizens in Malaysia.

Methodology

This study uses a Nominal Group Technique (NGT) method as the main strategy. Eight specialists were consulted for this study. The NGT session was done face-to-face in a focus group discussion (FGD). Researchers went to experts and ask them to generate ideas and

solutions regarding the issues. At the end of the session, the researcher used the NGT method to execute a specific computation to collect data relevant to the aims of the study.

There are two methods used in this study. In the first phase, researchers highlight the literature to establish mitigation approaches or ways to increase health literacy among citizens. Then in phase two (2), the synthesizing of the findings is used. Based on the previous literature, there are nine conclusions found on how to attain health literacy. When determining whether this approach is appropriate for fostering health literacy, the researcher often consults with specialists in the field. In the second stage, the analysis was conducted using the NGT method. Researchers gathered for a round of voting and a round of brainstorming. During this time, the thoughts of all the specialists are considered and rated. Session results were tallied using the NGT-PLUS program. The results of the investigation are discussed in the final portion of the paper.

Nominal Group Technique (NGT)

The NGT method has been introduced and used by scholars (McMillan et al., 2016; Sondergaard et al., 2018) to ascertain the consensus of a group on a particular issue. Delbecq et al (1975) proposed the concept of "social planning scenarios" as a "participation technique for social planning" that would combine exploratory research, public participation, the use of interdisciplinary experts, and the evaluation of proposed plans (Kennedy & Clinton, 2015). Empirical social science research is just one of many group settings that have benefited from this method since its establishment. It seems to be more commonly used in many fields of studies in social science research on health (Locke et al., 2015), education (Foth et al., 2016), and economics (Rogowski et al., 2015).

This technique is useful for pinpointing problems, locating potential remedies, and organizing competing priorities. It is useful to gather information from outsiders who are experts on the issue. This strategy can disseminate power and avoid bias as one person dominates the conversation. NGT typically entails the following four stages:

- i. Brainstorming. It entails individuals working in isolation to come up with written answers to a stimulus question in silence.
- ii. a round robin. This method is used as everyone contributes one suggestion to a huge flip chart that is then recorded, and so on. In this forum, we are not at liberty to discuss the ideas. The finished forms are displayed for all to see by being taped to the wall. The facilitator will keep calling on volunteers until the group has generated enough suggestions.
- iii. Discussion. The group discusses each concept on the list to establish a common understanding.
- iv. Vote. After participants have ranked their preferred ideas, they vote on the flipchart and discuss the results (optional). True outcomes and dedication are encouraged through anonymous voting according to the following guidelines.

The NGT provides a lasting record of the group's procedure and results by writing down all suggestions and approved changes on flipchart pages. By displaying these documents, groups may pick up right where they left off, and members who couldn't make it can get caught up on what they missed (Fox, 1989; Mustapha et al.2022).

Sampling

This sampling procedure in this study is following (Mustapha et al., 2022). They used eight experts to identify the issues. This quantity of experts is considered appropriate as it takes the average number of experts mentioned by (Van & Delbecq, 1974; Holmes, 2012; Borhan et al., 2022).

Finding

This research reveals that experts agree on a set of preventative measures and rank them in order of their potential usefulness in raising Malaysians' level of health literacy. Table 1 displays the results. The findings validate the feasibility of implementing all of the mitigation strategies proposed by experts to boost health literacy. When this figure is greater than 70%, it can be inferred that the mitigations are appropriate (Deslandes, et al., 2010; Dobbie et al., 2004; Mustapha et al., 2022). Table 2 illustrates the comparison of the ranking of the mitigations provided by experts. There are differences in a list of mitigations dependent on rank. Many experts agreed that awareness and advertisement are the most acceptable mitigation that needs to be done to increase health literacy while adding a syllabus in primary school is the least suitable mitigation.

Table 1
NGT Voting Result

Items / Elements	Vo ter 1	Vo ter 2	Vo ter 3	Vo ter 4	Vo ter 5	Vo ter 6	Vo ter 7	Vo ter 8	Total item score	Perc entage	Rank Priori ty	Voter Conse nsus
Awareness campaign on social media	5	5	5	5	5	5	5	5	40	100	1	Suitable
Improve health infrastructure	5	4	5	5	5	4	5	4	37	92.5	3	Suitable
Add in syllabus in primary school	4	5	4	4	3	3	5	4	32	80	5	Suitable
Public talks and seminars	4	5	5	5	5	5	5	5	39	97.5	2	Suitable
Home visits from professionals	3	3	4	5	4	5	5	5	34	85	4	Suitable
Advertisements	5	5	5	5	5	5	5	5	40	100	1	Suitable
Community works/outreach	4	4	4	5	5	5	5	5	37	92.5	3	Suitable
Enforcement of health policy	5	4	4	4	4	4	4	5	34	85	4	Suitable
Push-SMS alert	5	4	4	5	4	5	5	5	37	92.5	3	Suitable

Table 2

Vote Rank

Items / Elements	New Rank	Previous Rank
Awareness campaign on social media	1	1
Advertisements	1	6
Public talks and seminars	2	4
Improve health infrastructure	3	2
Community works/outreach	3	7
Push-SMS alert	3	9
Home visits from professionals	4	5
Enforcement of health policy	4	8
Add in syllabus in primary school	5	3

Conclusion and Future Directions

In conclusion, the intervention strategies that have been outlined in this study have the potential to be utilized to address the issue of low health literacy levels among the population of Malaysia. Literacy in the field of medicine is a standard that can help individuals lead healthier lives and enjoy a higher quality of life. When one's knowledge of health is used, one is in the best position to make decisions regarding getting better care and taking precautionary measures.

Researchers may want to place a greater emphasis in future studies on monitoring the effectiveness of intervention strategies among populations that are difficult to reach or vulnerable to a particular area of study. Because of the breadth of the investigation, the opinions of the specialists may vary.

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