

# Summary

## Background

Health literacy (HL) encompasses the knowledge, motivations and skills of people to find, understand, judge and apply relevant health information in everyday life in order to make decisions in the areas of health promotion, prevention and disease management that maintain or improve their health and quality of life. It is an expression of the interplay between individual abilities and skills and the demands people face in these areas.

Following the results of the first Austrian Health Literacy Survey in 2011, which showed a clear need for action compared to other European countries, there have been numerous positive developments in Austria with the aim of sustainably improving the health literacy of Austrians. At the same time, however, the demands on the population in terms of health literacy have increased significantly, e.g. due to increasing digitalisation.

For the planning and evaluation of health policy measures to promote health literacy, reliable data are needed which can be used as a basis for assessing the development of health literacy both at the population level and for subgroups of the population, and for developing intervention concepts.

## Methods

The Austrian Health Literacy Survey (HLS<sub>19</sub>-AT) is part of the international Health Literacy Survey (HLS<sub>19</sub>), a project of the WHO Action Network on Measuring Population and Organizational Health Literacy (M-POHL). The aim of the HLS<sub>19</sub> survey is to generate baseline data for a periodically recurring European survey, considering new challenges of HL in the form of specific domains of HL. For the representative Austrian survey, around 3,000 people aged 18 and over were interviewed by telephone in 2020. In addition to general health literacy, special areas of health literacy (digital health literacy, navigation skills in the health system, communicative health literacy in the context of medical doctors' consultations and health literacy regarding vaccination decisions) were also surveyed. The Austrian Health Literacy Survey was commissioned and financed by the Austrian Federal Health Agency and the Austrian Social Insurance.

## Results

### *Sources of health information*

The Austrian population obtains information on medical and health-related topics primarily from digital sources (internet and social media) and from medical doctors and other health professionals.

### *General health literacy*

In terms of general health literacy, the Austrian Health Literacy Survey 2020 largely confirms the results of the first Austrian health literacy survey (HLS-EU 2011), both in terms of particularly difficult health literacy tasks and areas as well as in terms of population groups with greater difficulties in dealing with health information.

An approximate comparison between HLS<sub>19</sub>-AT and HLS-EU suggests a slight increase in general health literacy for Austria. This concerns the handling of information on health promotion as well as the judgement and use of health information.

Challenges exist for health information in the media, for information on therapies and treatments, and information on dealing with mental health problems, as well as for judging and applying health information and information on prevention.

### *Specific areas of health literacy*

In the specific areas of HL, the greatest challenges are in navigational competence (orientation in the health system) and in digital health literacy. They are rated significantly lower than general health literacy. Also rated lower is the vaccination-related health literacy.

Comparatively high is the communicative HL in the context of medical doctors' consultations. However, challenges exist in this area, especially in terms of patient participation in the consultations (sufficient conversation time, understandable language, collecting personal views, active listening, and participation in decision-making).

### *Population groups with lower health literacy*

Across all health literacy domains, people with low formal education (no more than compulsory schooling) and people in financially precarious situations have lower health literacy. Furthermore, dealing with health information seems to be difficult especially for middle-aged people (between 30 and 59 years).

### *Health literacy and chronic diseases*

People with chronic conditions and health problems who have difficulties in coping with these health challenges have lower HL in all HL domains than people without chronic conditions or people with chronic conditions who cope well.

### *Consequences of low health literacy*

The HL of the Austrian population is associated to their health, their health behaviour as well as to the use of the health system: People with a lower general HL

- » show less favourable physical activity and dietary behaviour and a higher BMI,
- » perceive their health situation worse and are more frequently affected by chronic diseases and health-related limitations in everyday life,
- » cope poorly with chronic illnesses,
- » make greater use of the health care system (e.g. general practitioners, specialists, outpatient treatment and emergency services) and
- » spend more days on sick leave.

Low communicative competence in the context of medical doctors' consultations is also associated with poorer self-assessed health of the patients. Difficulties in dealing with chronic diseases correspond with a lower navigational competence. And a low digital health literacy increases the use of general practitioners. Regarding vaccinations, a lower vaccination-related health literacy corresponds to a higher proportion of individuals and families who have not been vaccinated within the last five years.

### **Further steps**

Based on HLS<sub>19</sub>-AT results, recommendations for improving health literacy in the Austrian population will be developed by the Health Literacy Measurement Working Group of the Austrian Alliance for Health Literacy together with the Working Group on Public Health of the continuous Austrian healthcare reform process, to be published in addition to the national report at the end of 2021. In addition, a summary of the Austrian survey results in international comparison will be prepared, which is expected to be made available in the first half of 2022.

### **Keywords**

general health literacy, digital health literacy, communicative health literacy, navigation literacy, vaccination health literacy