

Accessing Health Information and Health Services

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Why (Health) Literacy Matters

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European health communication is rich and diverse in terms of international perspectives, scientific approaches and topics. The *ECREA Aarhus Best Papers* special issue showcases this diversity. It features the best papers presented at the health communication section of the ECREA conference, which took place in Aarhus in 2022. The papers were selected through a comprehensive evaluation procedure. The scholars who chaired the sessions during the conference were invited to nominate the best presentations; another scholar who attended all the sessions also rated the presentations. Based on these assessments, 10 presenters were invited to submit full-length articles. Those authors whose work had already been published were then excluded, which resulted in seven submitted papers. Following a double-blind peer review process, four manuscripts from several European countries were accepted for publication in this special issue.

The authors of the articles focus on different aspects of health communication and use a variety of research methods. Therefore, the special issue has no common theme. However, most of the papers underline – more or less explicitly – the importance of health communication and (health) literacy in accessing health services and information, as well as the role of different actors in this process, including official public health institutions, physicians and even peers. The Covid-19 pandemic highlighted the central role of health communication and health literacy in public health (Biasio et al., 2021; Fielding, 2020; Finset et al., 2020). If people's interest in health information was already a constant before the pandemic, Covid-19 promoted an unprecedented search for knowledge as people wanted to know more about the virus in order to adapt their behaviours. As this search grew, so did the difficulty in accessing reliable information. The World Health Organization soon declared that the world was facing an

infodemic, which represented a serious public health problem given the low levels of health literacy worldwide. Recognising that “infodemics are as serious as pandemics” (Mheidly & Fares, 2020, p. 417), several researchers argued that health literacy was an essential tool to slow the spread of SARS-CoV-2 (Abdel-Latif, 2020; Košir & Sørensen, 2020; Sentell et al., 2020; Spring, 2020). The articles in this special issue deal with various aspects of health communication and competence in accessing health services and information. For this reason, they complement each other.

The article by Paula Memenga and Elena Link explored “patients’ intentions to use a physician-provided digital health information service” through an online survey in Germany (N = 1,000). Physicians are usually perceived as trusted sources of health information, but they often lack time to devote to patients. Memenga and Link assessed patients’ intentions to use a digital service that would address this challenge; they found that e-health literacy showed a weak yet significant association with usage intentions (Memenga & Link, 2024). While several studies have shown a positive association between health literacy and health outcomes (Nutbeam & Lloyd, 2021), researchers have also acknowledged that health literacy is a very complex and dynamic concept (Santana et al., 2021) and that literacy levels evolve through the lifespan and are context and content specific (Sørensen, 2019). This study underscores the importance of e-health literacy in patients’ intentions to utilise physician-provided digital health-information services, and it sheds light on the multifaceted and changing role of health literacy in accessing and using healthcare resources.

The article by Gea Ducci, Alessandro Lovari and Nicola Righetti discussed “challenges in communicating public health data” by conducting a quantitative analysis of official Facebook accounts of 20 Italian regions during the Covid-19 pandemic. The authors focused on the first phase of the pandemic, from January to May 2020, and they analysed the frequency and content of Facebook posts (N = 1,527). Their results indicate a wide diversity in the way public-sector institutions communicate health information, specifically health data, which may promote disparities across the Italian population when it comes to information access. Even though the communication of large amounts of data is not new in health communication, the Covid-19 pandemic introduced some changes to this phenomenon, namely in the type of data. News media provided people with “real-time numbers on new cases and deaths, often also providing unauthorised medical advices, without waiting for confirmation” (Biasio et al., 2021, p. 1304), which poses challenges to public health officials, experts and organisations. The authors also acknowledged that communicating health-related data to lay people is difficult due to low literacy levels, including health literacy (Ducci et al., 2024). Moreover, while the use of large amounts of data usually implies predictability, the pandemic was characterised by great uncertainty, which also derived from a loss of trust in public officials (Nguyen, 2021). Given the media environment’s current characteristics, which promote an unprecedented spread of information disorders, and the way people engage with the news, some authors have called for a revision of the risk-communication guidance issued during public health crises (Ratzan et al., 2020).

The article by Carsten Stage, Amanda Karlsson and Loni Ledderer delved into the realm of “online patient work” and the utilisation of peer-led online communities to navigate and prevent discontinuity in healthcare. By conducting interviews with users from these online communities (N = 20), the authors aimed to unravel the strategies employed by patients with one or more chronic conditions to address discontinuity in care. Their article underscores not only the significance of informal care but also the pivotal role played by peers in health

communication. While it has been acknowledged that patients often encounter disruptions in care due to various factors (e.g., consultations with multiple healthcare providers, extended waiting times, appointment cancellations and inadequate care coordination), this paper suggests that engagement in peer-led online communities may also impact the experience of (dis)continuity of care. The results of this study show that peer-led online communities serve as platforms to enhance comprehension of chronic conditions, alleviate frustration, support individuals in their preparation for consultations, and enhance decision-making processes pertaining to treatment and care (Stage et al., 2024). However, the members of online disease communities could be interpreted as informationally privileged or health-literate individuals endeavouring to effectively manage their conditions amidst healthcare-system challenges. Regarding the role of health literacy in this context, future research should delve deeper into how varying levels of health literacy influence engagement in peer-led online communities and the management of (dis)continuity in care. Understanding the interplay between health literacy and online patient work could offer valuable insights to healthcare providers, policymakers and researchers seeking to develop tailored interventions that can empower patients with chronic conditions to navigate and mitigate difficulties in the healthcare landscape.

The article by Anna Wagner and Doreen Reifegerste investigated “gender-specific non-disclosure of mental distress” by conducting a cross-sectional survey in Germany (N = 2,471). Research suggests that non-disclosure of mental distress is associated with poorer mental health. While men are more reluctant to communicate personal issues during informal and professional social contacts, little is known about the reasons for and factors associated with non-disclosure among men and women. The results of this study showed that although non-disclosure was not higher in the male subsample, men had fewer trusted contacts. Non-disclosure was also associated with conformity to traditional gender norms in both men and women (Wagner & Reifegerste, 2024). The authors point to evidence that men’s mental health literacy is usually lower than that of women. Mental health literacy, which is a construct that derives from health literacy, is thought to be positively associated with decreased stigma concerning mental disorders and increased help-seeking (Kutcher et al., 2016). Health communication can help to reduce the stigma (still) associated with disclosing a mental disorder. The authors of this paper suggest specific actions for mental health campaigns (Wagner & Reifegerste, 2024). In doing so, they highlight the gender-specific challenges of non-disclosure of mental distress and point to the need for mental health campaigns to address stigma and improve mental health literacy, especially among men.

In conclusion, the *ECREA Aarhus Best Papers* special issue of the *European Journal of Health Communication* serves as a platform for the dissemination of diverse international perspectives on health communication. It addresses critical gaps in the field and underscores the importance of health communication and literacy in accessing health services and information. The research presented in this special issue suggests the urgent need for tailored interventions and strategies that promote health literacy. The included papers provide valuable insights into different facets of health communication, ranging from patients’ intentions to use digital health services to the difficulties linked to the communication of public health data and the gender-specific non-disclosure of mental distress. Moving forward, future studies should continue to explore the complex dynamics between health communication, literacy and outcomes to inform evidence-based practices and policies that support the well-being of individuals and communities in Europe and beyond.

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