Part III
Recommendations—Networking the e-Society

Everyday-ing Health Literacy and the Imperative of Health Communication: A Critical Agenda

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Abstract Health literacy is an increasingly important issue amongst scholars of health studies and medical practitioners. This essay seeks to understand how health knowledge is co-constructed by different agencies and the role of health communication in this process can contribute to everyday-ing health literacy. In addition, this essay attempts to understand how health communication becomes an everyday practice in identifying disease-specific needs.

Keywords Health literacy · Policy-making · Everyday health needs

Background

To-date, discourses related to health and illness are no longer confined within hospitals and other medical establishments; they have become an everyday, interactive discourse which helps define our way to perceive health issues. This chapter provides an everyday perspective towards the idea of human communication and locates the importance of health literacy—the production and consumption of health-related knowledge and information (Kickbusch and Maag 2008)—in enhancing the quality of public health service. Firstly, we examine the importance of health literacy in establishing the basis of health communication. As recognised by the World Health Organization (n.d.), health literacy shall be playing a critical role in encouraging multi-stakeholder dialogue in empowering individuals and communities. How to put health literacy into policy-based, knowledge-informed action is an important issue that health administrators should consider seriously. Second, we try to look at how health communication is facilitated by the changing

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modes of communication and compare different media-technological options in knowledge construction across different sectors. For the purpose of this chapter, we look specifically at how the increasing concern for health risk offers possibilities for a networked way of knowledge construction with reference to three aspects and the case of mental health literacy. Overall, we attempt to shed light on how information and communications technology can facilitate the promotion of health literacy.

A Conceptual Background About Health Literacy and Health Communication

We begin with the idea of health literacy. Essentially, health literacy refers to the competence to make informed decisions on a wide range of health-related matters such as nutrition, medication, choice of medical services, and ways to minimise exposure to illnesses (Kickbusch and Maag 2008). With the development of information technology and the increasing awareness of the imperatives of public health education, health literacy has become an emerging governance agenda. A new policy discourse has emerged which is driven by participation of different stakeholders such as medical professionals, community networks, research institutions, and individuals. At the normative level, health literacy is about how to create a knowledge discourse which can ensure convergence of values, understandings and expectations about health-related matters. In this connection, World Health Organization points to the need to cultivate 'the cognitive and social skills' in broadening the basis of participation (WHO n.d.). In operationalising the concept, Nutbeam (2000) points to the need to pay attention to functional, interactive and critical aspects of health literacy. Whereas the functional aspect refers to individual's ability to understand basic health information, the interactive aspect refers to the increasing autonomy of individuals to reflect on different health information (ibid). Critical health literacy, meanwhile, transcends those functional parameters and addresses how individuals and communities are networked in health knowledge construction with their own literacies (ibid).

Meanwhile, what has also been explored in the existing literature are the ways in which health literacy can be promoted. Indeed, the unsatisfactory track-record of promoting health literacy at the global level reflects the failure to integrate health, education and communication together. As emphatically argued by Kickbusch (2001), the imbalance in developing competence in health-related matters reflects the inability to overcome the divide between literacy, communication and knowledge construction. In that connection, there is a need to bring health communication back into the policy discourse.

Health communication, broadly speaking, is about how to create a communicative context for achieving a diversity of health-related purposes. As defined by Ratzan et al. (2004), health communication is "the process through which one person, group, or governmental or private organization uses various communication strategies and channels to educate, motivate, and perpetuate information, skills, and

behaviours that are generally accepted to benefit (improve) the health of individuals and the public" (p. 398). Originally used in the context of commercial marketing (e.g. the promotion by pharmaceutical companies and insurance companies), health communication has assumed a wider scope of importance (Thomas 2006). Nowadays, health communication becomes an everyday dynamic that defines our understanding about possible options for us to pursue health-related behaviours. For example, health communication is becoming more important in sharing patient information within a jurisdiction (Thomas 2006). Health communication is also widely used in community empowerment (Thomas 2006). In developing economies, for instance, health communications—both formal and informal—have been used to enhance the preparedness towards health crises. In the intellectual context, health communication is shaping the fundamental ways in which health issues are narrated and problematised on a day-to-day basis (Dutta and Zoller 2008). Meanings of health, illness and disease are, accordingly, contingent. A recent edited volume by Hamilton et al. (2014) goes further by contending that health communication is a linguistically situated practice mediated by different contexts and modes of interaction. In this next section, we examine how the advancement of technology has reshaped health communication and the opportunities and challenges associated with promoting health literacy.

Global Diversity in Health Communication and Everyday-ing Health Literacy

Health communication and health literacy co-evolves with the changing form of media (Hagglund et al. 2009). The role of the traditional media in promoting health literacy has been discussed in the existing body of work. Jorm (2000), for example, discusses the use of traditional media in Defeat Depression Campaign in promoting community awareness towards mental health. How far the momentum for health literacy can be sustained is highly debatable. Scholars thus look to the prospect of the ascendency of e-society as a possibility for offering a new way of health communication. For example, emphasising the importance of interactivity and user-friendliness, the new digital media such as the Internet (especially Web 2.0), social media, digital games, and use of avatars has opened up a wider possibility for a networked way for collaborative construction of health information and knowledge (Prestin and Chou 2014). Laverack (2009) argued that with the increasing availability of low-cost and innovative communication options, the role of the public in health literacy is becoming more proactive. Health literacy is, accordingly, more than helping individuals to make informed decision; it becomes a discursive tool for everyday mobilisation for health development. The Centers for Disease Control and Prevention (CDC) has identified the following aspects of social media

and the emerging interactive media which allows a more 'credible' form of health communication:

- "Increase the timely dissemination and potential impact of health and safety information.
- Leverage audience networks to facilitate information sharing.
- Expand reach to include broader, more diverse audiences.
- Personalize and reinforce health messages that can be more easily tailored or targeted to particular audiences.
- Facilitate interactive communication, connection and public engagement.
- Empower people to make safer and healthier decisions" (CDC 2011, p. 1).

Based on these aspects, we identify several examples where health communication, health literacy, and the new media coalesce. One of the key observations by public health scholars is that the proliferation of electronic (new) media has led to a 'tectonic shift' in the way people are engaged in processes related to health-related knowledge and information (Hesse et al. 2005). The literature has identified two levels of interaction that the evolving media landscape is impacting on health literacy. On one hand, social media is playing a functional role in expanding the clinical space beyond hospitals and medical establishments. The health care provider is capitalising upon the use of e-technology in forging a closer physician-patient relationship (Sundar et al. 2011). Communications beyond the face-to-face consultation allow patients to receive and share a wider range of clinical information such as chronic disease self-management (Prestin and Chou 2014) and interventional evaluation (Harrison et al. 2010). Meanwhile, it is reported the use of peer-to-peer (P2P) communication is useful in developing competence in understanding technical information and in accessing relevant health provider. P2P communication also provides information related to how patients can communicate with medical specialist. The study by Meier et al. (2007) looks, for example, at how cancer patients can develop linguistic competence in everyday communication with the medical expert. These information are, however, 'instructional' and 'pedagogical' (Evans et al. 2009) at best, and may not promote a more dynamic way of promoting health literacy.

Beyond the clinical dimension, the 'digitalisation' of health communication has created opportunities for a dynamic, critical approach for promoting health literacy. We here offer an overview of three possible opportunities. First is the possible dialogue between 'traditional' expert epidemiology and lay epidemiology. Whereas traditional epidemiology refers to how medical professions define the nature of a health problem based on scientific discourse, lay epidemiology refers to how people construct their health risks with reference to their subjectivities and bodily constitutions. Lay epidemiology is thus about how the society becomes a knowledge basis for possible community-based actions for enhancing health. The possible contribution of public knowledge in informing professional action has been documented in different works (Arksey 1994; Davison et al. 1991). Essentially, it provides very important data about the possible cause of health risks (such as

environmental risks). Whilst some scholars have contested the reliability of public knowledge in ensuring effective public awareness, lay epidemiology becomes a new discourse in exposing conceptions (and misconceptions) about health and disease and provides clues as to what kind of public health intervention is necessary (Laverack 2009). This is made possible by the prevailing use of social media of Twitter, Facebook and other social blogs which has fostered a new socio-political culture of sharing.

Another key opportunity is the use of social media in enhancing community preparedness for health disasters. In the first place, the use of geographic information system (GIS) becomes more prevalent in constructing necessary knowledge for emergency medicine. The Ready New York initiative was developed by the New York City Government in allowing residences to develop their own plans of evacuation in cases of natural or human-made disasters (Zarcadoolas and Pleasant 2009). Cromley and McLafferty (2012) point to the geospatial mode of health communication which can allow health authorities, community leaders and residents to identify the possible 'hotspots' for critical intervention. For example, the US Department of Homeland Security's Science & Technology Directorate, capitalising upon the proliferation of smartphones and other GPS technologies, has introduced the Social Media Alert and Response to Threats to Citizens (SMART-C) programme. The programme, accordingly, "aims to develop citizens' participatory sensing capabilities for decision support throughout the disaster life cycle via a multitude of devices (such as smartphones) and modalities (MMS messages, Web portals, blogs, tweets, and so on)" (Adam et al. 2012, p. 92). At the same time, the use of online virtual gaming is popularising emergency health knowledge. The Centers for Disease Control and Prevention has recently made use of Zombie Preparedness to create a virtual community for engaging public in developing emergency preparedness (CDC 2015).

The third opportunity is the usage of new media in different health campaigns can equip community members for enhancing linguistic and knowledge capacities. Although the traditional printed media has a relatively long history in contributing to the success of many health campaigns, the new media provides a more dynamic and robust way of engaging a wider scope of audience. Yan Tian's study on the impact of Web 2.0 arrives at the conclusion that the media has a positive impact on the audience's understanding about issues related to organ donation (Tian 2010). Donors' families, recipients and activists are able to make use of the digital media platform such as YouTube for disseminating the medical knowledge and benefits of organ donation (ibid). Meanwhile, new media has been argued to have played a crucial role in the promotion of sexual health (Guse et al. 2012). The ability to identify the health risks associated with unsafe sexual practices has accordingly been enhanced with the digitalisation of health communication (ibid). On the whole, all these three opportunities have pointed to the fact that the role of the new media in promoting public health goes beyond passive acquisition of health-related information; instead, it points to the possibility for a decentred, non-hegemonic way of disseminating and expanding the existing body of health knowledge.

Case Study: Social Media and the Promotion of Mental Health Literacy

Whilst mental health has been a growing concern amongst many communities, public health knowledge about this issue has been unsystematic and poor in terms of quality (Jorm 2000; Reavley and Jorm 2013). As lamented by Jorm (2000), "members of the public cannot correctly recognise mental disorders and do not understand the meanings of psychiatric terms" (p. 396). This gives rise to the problem of miscommunication between the public and the medical professionals (ibid). Against this context, there has been a call for paying attention to mental health literacy. As argued by Reavley and Jorm (2013, p. 51), "although mental health literacy incorporates knowledge about mental disorders, it goes further in that it places emphasis on the knowledge being linked to the possibility of action to benefit one's own mental health or that of others." Mental health literacy should thus focus on "(1) knowing how to prevent mental disorders; (2) recognition of when a disorder is developing to facilitate early help-seeking; (3) knowledge of help-seeking options and available treatments; (4) knowing effective self-help strategies for milder problems; (5) first aid skills to support others who are developing a mental disorder or in a mental health crisis" (ibid, p. 51).

Meanwhile, how to operationalise the idea of mental health literacy is still a contested issue. One of the key opportunities since the 1990s is the changing mode of communication which renders mental health no longer a 'taboo' to discuss. There have even been more initiatives taken by different communities to address the need to promote mental health literacy. Initiatives such as Mental Health Foundation and SANE Australia, for example, are well-established organisations in promoting mental health knowledge. SANE Australia, for example, has established a 'Lived Experience Forum' which provides 'a safe, anonymous place' for the public to share their concern (SANE Australia, n.d., a). Both Mental Health Foundation and SANE Australia have made full use of new media to disseminate knowledge about keeping mental healthiness. For example, the former organisation has designed free podcasts which introduce a variety of lifestyle tips for the public (Mental Health Organisation, n.d.). SANE Australia, on the other hand, has developed a guide to the media in order to avoid any further stigmatisation on those who are suffering from mental illness (SANE Australia, n.d., b).

Other initiatives take a more critical stance about the way in which mental health knowledge and information is constructed. Formed by a group of health activists, Hearing Voices Network (2015) has pointed to the 'unsoundness' and 'unreliability' of the contemporary approach of psychiatric diagnoses: "We believe that people with lived experience of diagnosis must be at the heart of any discussions about alternatives to the current system. People who use services are the true experts on how those services could be developed and delivered; they are the ones that know exactly what they need, what works well and what improvements need to be made" (Hearing Voices Network 2015). The Network organises an online platform on which those who are suffering from emotional disturbances can express

themselves without emotional burdens. As asserted by Pilgrim and Rogers (2003), whilst initiatives of this kind may not be scientifically measurable, they do provide a possibility for 'emancipation' and for challenging the dominance of professional knowledge in understanding the medical condition of those who suffer from similar symptoms.

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Imaging an E-future: Education as a Process Towards Understanding

Margaret E. Robertson

Abstract Education is the vital tool for understanding the complexities of living within social structures—regardless of scale. Traditions that shaped the infrastructure of ancient communities leave a residue presence today in architectural, cultural, economic and political values and practices. The past helps us comprehend the rapid changes to the space, place and environment interactions associated with transport and communications developments. Nowadays time-space compression is reorganising our global networks and commodity flows. Understanding events in the twenty-first century requires communities to adjust but preserve their collective memory.

Towards Understanding

New geographies are products of time and space reorganisation. The history of human occupancy on earth highlights periods of great change caused by migration, trade and colonisation of lands distant from 'home'. These periods facilitated the spread of ideas and cultural, economic and political practices. At the heart of much of the interaction has been trade. Hence, colonisation, imperialism (mostly of European origins), capitalism associated with the free market economy, and the production of monetary wealth, are key processes for understanding global transactions. The argument we make is that whilst new technologies enable transactions by anyone, anywhere, anyplace and across traditional boundaries, the processes that

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underpin each transaction—small and large—are similar. However, this assumes the universality of the European and United States superpower discourse (Said 1994). In Said's words:

> Without significant exception the universalizing discourses of modern Europe and the United States assume the silence, willing or otherwise, of the non-European world. There is incorporation, there is inclusion; there is direct rule; there is coercion. But there is only infrequently an acknowledgement that the colonised people should be heard from, their ideas known. (Said 1994, p. 50)

Understanding processes that lead to 'native nationalism' (Said 1994, p. 51), will undoubtedly, help explain contemporary geo-political discourses. And, whilst emergence from colonial rule by modern nation-states is a field of scholarship beyond the scope of this book we do acknowledge the powers of contemporary communications process helping to shape local communities and give voice to their cultural needs. In this book, case studies from Sierra Leone and Papua-New Guinea provide illustrations of innovative practices bringing about change and improving lives within local communities. Worthy of celebration for showing how new technologies can help transform local health, education and daily survival, they also highlight the dangers of assumptions reliant on centralised managerialism, without adequate consultation and capacity building at local levels. Two-way education helps to maintain traditions and cultural identity within a framework that can benefit from modern infrastructure and preserve the 'landscape memory' (see Schama 1995; Lowenthal 2015).

Whilst this may be good advice, finding 'voice' to negotiate better futures remains a struggle for many indigenous societies. Help is not necessarily derived from central agencies. However, being connected to the worlds of others via the internet can provide agency to expand upon traditional knowledge, and ideally, evolve into contemporary lifestyles in harmony with neighbours—near and far. Regrettably, the time-space compression affordances of new technologies are not all for the good of humanity. Internet tools can, and are, fuelling contemporary crises of faith. The age appears to have encouraged defection from mainstream values and the privileging of subjective politics where 'wrong' can appear to outweigh social good. In this sense there is a politicization of the ideals of democracy for personal gain (Žižek 1999). As Keen (2015) asserts in his book titled *The Internet is not the answer* the surveillance capacity of big data services such as *Facebook* and *Instagram* are "creating a panopticon of information gathering" (p. xiv) which: "Rather than focussing in renaissance, it has created a self-centered culture of voyeurism and narcissism" (ibid.).

Why? Arguably, the pace of information flows made possible with new technologies has overwhelmed the political processes. The conditions for knowledge transfer have changed and in turn systems have to change to accommodate new spatial and temporal realities. Transdiscipline approaches are needed, and perhaps, as David Harvey concedes in his most recent book (2016) we need to consider a 'critical anti-capitalist' world. Neo-liberalism and capitalist agendas may be both the high and low points of the Anthropocene.

Along with the continual making of new geographies, including the concretization of the landscape as human populations increasingly live in mega-cities, the draw down on survival physical resources is also threatening the environment. Nature and culture intertwined are elemental concepts for human survival. Climate change is real. Warming of our oceans and air currents is directly linked to the symbols of modern living—car ownership, long-distance travel, larger homes containing multiple energy using appliances, and perhaps of greatest impact for families—access to lines of monetary credit. Critical theorists and scholars like Harvey (2016) are now raising the alarm for agencies to consider almost the unthinkable for future survival. A right hand turn from capitalism may help save the planet but any slowing of the market driven juggernaut will require education of the current millennial generation. What follows is a summary analysis of some practices which use new learning tools whilst simultaneously encouraging responsible lifestyle choices.

Everyday Knowing and Education in the Millennial Age

Migration shifts to big cities and concentrations of people into even bigger cities is reshaping our urban traditions and further depleting the rural landscapes of labour. Farm workers and their traditions are being reshaped by technologies with labour force reduction being a significant outcome. Whilst labour force depletion in agricultural pursuits is set to continue[1] the need for workers to build infrastructure in new and expanding cities—most notably in East Asia—offers diverse opportunities for alternative employment. For instance, in its Urban Development Series, the World Bank Group (2015) surveys of urban 'spatial growth' in East Asia shows how big data, geospatial technologies and visual imagery are helping the urbanisation transition process. This intersection of technology helps to improve everyday lives in rural areas and contributes to better outcomes in the construction and reconstruction of urban spaces. Knowledge dissemination in the technically connected age also helps transfer skills on how to make improvements that reduce carbon footprint and foster new ecologies for living based on principles of sustainability. Urban gardens, and learning how to garden, are skills for everyday living which can be learnt through community based programs and action based learning in schools. Rather than being lost from memory and identity smart technologies can help younger generations adapt the skills of their rural forebears into current food production lifestyles suitable for urban survival.

Signs of what is shaping up to be a self-help way of living are already operating in the global economy. Uber, AirBnB, online personal and food shopping, are global systems changing the ways in which people interact with one another and

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[1]See The World Bank prediction that 'Today's urban population of about 3.5 billion people is projected to reach 5 billion by 2030, with two-thirds of the global population living in cities.' Retrieved June, 2016 from http://www.worldbank.org/en/topic/urbandevelopment.

their respective communities. These are all signs on an increasing independence within populations and willingness to reach beyond the mainstream systems. Entrepreneurial in their respective ways each system is creating new economies and shifting the balance of consumer interactions. This can be disruptive for business being conducted in traditional ways and already there as signs of regulatory frameworks appearing from governments reacting to community lobby groups including local taxi companies and hotel chains. In the contemporary age of mobility and growth across real space hegemonic power displacement is a likely casualty. Personal geographies operating in juxtaposition with traditional values and day to day operating systems can be viewed as fracturing the orderly conduct of community life. Uncertainty in government or slow responses to community driven disruption can have negative and positive implications. Where personal or group initiatives go against the accepted societal norms the collective memory of the people can be threatened. Optimistic thinking offers an alternative. Innovation and creative use of the tools of the age can transform lives and help tackle poverty, abuse and unemployment. The imperative for education is to encourage and support leaders who are charismatic in style but guided by humanitarian principles and social justice outcomes.

Final Recommendations

The passage of time inevitability shapes place and space connections. They change constantly. Just as history helps us to understand the dynamics of people and place interactions collective memory is useful but not an exhaustive bowl of wisdom. Different paradigms or discourses operate simultaneously and understanding the processes at work within localised communities is complex. Social dissent, hybrid cultures, mobility and environmental stress are all sources of community upheaval. In the current anthropogenic period, with the right decisions, any of these dynamics can precipitate an evolution in lifestyles to harmonious outcomes between nature and culture (Foucault 1994; Whitehead 1971). The alternatives of disunity and chaos are also possible. The pace of change and the opportunities to connect people and place through digital networks is an energy source like no other in history. Education imaginaries that reflect the digital age are the major defence humanity has for better futures. At the same time structures are needed for daily life to operate efficiently. No matter the scale—global, national, regional and local—shared value systems are imperatives for education.

In the International Year of Global Understanding the challenge for education is to capture the views of the majority perspectives and be inclusive of minority voices. The struggle for global understanding will require monumental effort from within and outside mainstream organisations including governments, corporate and small scale enterprises. This is not simply a matter for the millennial generation alone.

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Epilogue

Margaret E. Robertson

> *The art of progress is to preserve order amid change and to preserve change amid order.*
>
> Alfred North Whitehead (1861–1947)

Abstract Interacting, networking and communicating are essential components of everyday life. Finding solutions for peaceful co-existence between all the world's peoples is fundamental for better lives and the preservation of planet earth.

Keywords Change · Innovation · Better futures

Interacting, communicating and networking are key dimensions for enhancing global understanding. The histories of the world's peoples are a rich source of wisdom for how to achieve contentment in everyday life. Customs passed on through the generations give purpose to our experiences and guide us towards wise decisions. However, whilst the traditions and values of our forebears are a vital source of learning and knowledge, the past alone is seldom enough to satisfy human appetites. Curiosity about the world around us is a constant source of wonder, creativity and discovery. New knowledge adds to the available tools at hand to solve new problems and improve lives. Whitehead's words on progress and change capture the dynamic of existence and serve as a reminder of the duality faced during the change process. Change during this millennial period may have disrupted many of the old order customs – especially in relation to communication and mobility options – but the future is ours to create.

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