



Mini Review

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Quality of Life as a Result of Health Literacy among Patients with Non-Communicable Diseases in Saudi Arabia

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Introduction

Recent study showed that the prevalence of chronic disease in Saudi Arabia is increasing, in which the prevalence of hypertension is 71.3%, diabetes 27.3%, heart disease 16.4%, asthma 9.7%, ulcer 8.9%, and cancer 2.0% [1]. Health literacy which is recognized as being able to find, understand and use the health information necessary for making health-related decisions Chin et al., 2015; can play a crucial role in the management of chronic diseases [2].

Previous studies revealed that there is an association between health literacy and quality of life [3]. More importantly, recent studies showed that inadequate health literacy adversely affects health-related quality of life [4]. On the other hand, disease knowledge and behavioral changes are factors that can influence health-related quality of life in patients with chronic disorders [4]. Also, studies found that literacy problems can inhibit a patient's ability to attend appointments because they may not be able to register for health insurance or follow directions to the physician's office [5]. So, the main aim of this study is to highlight the association between health literacy and quality of life within among adults with chronic diseases within the context of previous studies and within the scope of Kingdom of Saudi Arabia.

Health Literacy and Quality of Life

Low health literacy can have numerous negative impacts on health and is associated with a decrease in adherence to treatment and in use of preventive services [2], an increase in number of hospitalizations and health system cost, poorer health and higher

mortality risk. Health literacy could also be a better health indicator than age, income, employment status and education [6]. The relationship between health literacy and quality of life, an important patient-centered outcome often in previous studies [6]. Conducted a cross-sectional study to examine the relationship between health literacy and the physical and mental components of quality of life among frequent users of health care services with chronic diseases. The study results showed that there was an association between health literacy and quality of life. The study concluded suggested that there is no relationship between health literacy and the physical and mental components of quality of life among frequent users of health care services. Another study conducted by Salem (2018) aimed at evaluating the degree of health literacy among the sample. The study results in Saudi Arabia showed that the selected females in outpatient clinics have adequate health literacy levels, with a mean score (15.13±1.856). Moreover, there is no relation between the level of health literacy with age and education level of the participants. The study concluded that: this study provides knowledge that can be applied to evolve schemes to encourage the health literacy level among females in Saudi Arabia. On the other hand, Chica et al. [7] conducted a study to assess the relationship between health literacy and health-related quality of life in patients with ischemic heart disease, and to investigate the role of sociodemographic and clinical variables as possible confounders. The study results revealed that health literacy showed a mean of 39.6 points, with 14.3% classified as inadequate. Scores of the physical component of HRQoL were 39.6, 42.1, and 44.8% for

inadequate, marginal, and adequate health literacy, respectively. This association persisted after adjustment for confounders. Health literacy was not associated with the mental component of HRQoL. Advanced age, lower educational level, disadvantaged socioeconomic position, and a larger number of chronic vascular disorder comorbidities adversely affected both, health literacy and HRQoL. The study concluded that inadequate health literacy is a contributing factor to poor physical functioning in patients with ischemic heart disease. Increasing health literacy may improve HRQoL and reduce the impact of ischemic heart disease among patients with this chronic vascular disorder.

Situation in Saudi Arabia

Language literacy was one of the main challenges in health literacy in the Kingdom of Saudi Arabia, and the health literacy interpretation and the challenges faced throughout the delivery of the key components of the interventions in health literacy education were positively related [8]. Also, Abdel-Latif & Saad [9-10] concluded that the most of the respondents among their Saudi population had intermediate (43.8%) and basic (34.4%) health literacy levels. A higher percentage among men had intermediate (59.8%) and basic (70.93%) health literacy levels compared with women, they also showed that 30% of respondents had difficulty in understanding health screening tests and disease treatment moreover, more than half of participants had difficulty in finding health information. The study confirmed that a majority of Saudis had inadequacy in health literacy linked with poor knowledge of health information; they also shed light on the importance of understanding the condition of health literacy among Saudis and the need for educational programs to promote the health literacy awareness among Saudi population.

Conclusion and Reconditions

The association between health literacy and quality of life is prevalent in several studies. The contribution of a nurse to the increase in health literacy of a patient can be, irrespective of the patient's health condition or age, substantial, as the nurse works in a health-educational way through every interaction with the patient,

either planned or unplanned. The role of a nurse is in modern society facing a number of challenges which means that this role is becoming more and more prominent. The role of the nurse is not only important at times when life activities of the patient need to be provided, but also in ensuring prevention.

Acknowledgement

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Conflict of Interest

No Conflict of Interest.

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