Health literacy has recently become a topic of relevance among researchers, practitioners and policy-makers across various disciplines. One major driver of this obvious increase in importance is the potential that has been attributed to health literacy in order to understand, explain and tackle individual as well as group differences in various health outcomes. Empirical findings such as the results from the European Health Literacy Project have supported such perspectives as they have consistently been highlighting the need for action. The emergence of the topic of health literacy in various research and policy agendas has also been promoted by the zeitgeist prevailing in Western societies that is also rising in other parts of the world.

Concepts of health literacy basically address the use of health information in all forms and thus fit well as an approach to cope with the various challenges that Western societies have recently been faced with. The rise of digital technologies, for example, has been associated with a sharp increase in the multimodal availability of, and a simplified access to, information and data. Citizens and consumers are therefore challenged by the overwhelming supply of information in various ways. Other key words such as ‘shared/informed decision-making’ or ‘patient empowerment’ point to the ongoing transition in the notion of the bond between the doctor and the patient. The questioning of interaction patterns and power relationships between experts and laypeople, as well as the shift in the assignment of responsibilities to laypeople, is not only restricted to healthcare but also applies to other areas of life – or, in other words, to everyday life where people live, work, study and play. People are increasingly assumed to act as consumers and to make choices on health and information, both of which are increasingly viewed as services or goods. This shift complements the increasing emphasis that is generally put on the self for the shaping of individual and collective lifestyles. Concepts such as self-management of chronic diseases or everyday self-optimisation not only serve as examples but also give indications on the effects of macro-level conditions, such as the ongoing market liberal transformation of welfare economies. This sketchy outline of the multifaceted societal developments and challenges illustrates that they offer favourable conditions to advocate and call for the topic of health literacy as a promising approach.

The revived interest in health literacy has not only been noticeable in public health and medical care. This is well documented, such as with the growing number of published scientific papers and the introduction of health literacy as a major subject in various policy agendas (most recently and notably in 2016, with the World Health Organization’s Shanghai Declaration on health promotion). Findings from an exploratory bibliometric analysis confirm the growing attribution of relevance to health literacy as a subject of research as they highlight that there was an almost ten-fold increase in the number of
articles that were published about health literacy from 1997 to 2007. There are good reasons to assume that the numbers have continued to skyrocket since them. The multidisciplinary nature of health literacy is reflected by the fact that information on health literacy can be found in health-related databases as well as in education, library and information sciences, nursing, pharmacy, communication and sociology databases. The large interest in health literacy and its international uptake are also well documented on the policy level with governmental and non-governmental organisations (NGOs) addressing health literacy promotion in their national policy strategies and health goals. For instance, the United Nations’ (UN) Economic and Social Affairs Council (ECOSOC) released a ministerial declaration in 2010 to strengthen health literacy on the policy level. Since then, health literacy has been included in strategic plans, with health literacy-related policy programmes, white papers, recommendations, alliances, health goals and action plans developed and implemented in several countries. Beyond health policies, in some countries health literacy is also part of educational policies, placing health literacy at the core curriculum of teaching and learning in schools starting early on in the life course.

With the proliferation of health literacy research and policy measures, it has also become clear that there is no unanimously accepted overall definition of the concept, although available definitions are predominantly overlapping while also highlighting subtly different aspects. They coexist and may be linked to different vocabularies and conceptual backgrounds from different academic fields, and it becomes obvious that they share more commonalities than differences. In spite of many similarities, the differences influence attempts to operationalise the concept that varies widely in scope, method and quality. The currently dominant views of health literacy have mainly been nurtured by perspectives from healthcare and public health that started to evolve three decades ago.

From the healthcare perspective, in the early 1990s health literacy was defined as a set of skills that enables the individual to act as a competent patient within the patient–provider interaction. Health literacy in this context primarily focuses on functional skills such as reading, writing and numeracy, and can be broadened to skills, such as understanding for better health communication, self-management and caring skills, better adherence and navigation of the health system.

By the end of the 1990s, the public health approach took a shift to people’s everyday life settings, and views health literacy as a multidimensional concept that is closely associated with health promotion. Besides cognitive skills, public health highlights the social and cultural components and connects health literacy with a Freirean perspective on education, literacy and empowerment in order to improve health behaviour and to act on the political and social determinants of health and wellbeing. Thereby it focuses on a social justice approach, taking into account environmental factors and sociocultural context conditions, the wider social determinants of health, participation in society and health and personal agency.

Today there is common sense across disciplines that health literacy is a broad concept. Thus, the field of health literacy has advanced from a concept that focused
on functional skills in a medical and healthcare context, to an interdisciplinary and multidimensional construct that entails people’s knowledge, motivation and competences to access, understand, appraise and apply health information in order to make judgements and take decisions in everyday life to maintain or improve quality of life. There is also a consensus that health literacy evolves and develops throughout life, ‘from the womb to the tomb’. Therefore, efforts to comprehensively embrace and discuss the topic benefit most from a life course perspective. Health literacy plays an important role for healthcare, prevention and health promotion, and in this context, it is a major influence on the capacity of the individual, throughout his/her lifespan, to make sound health decisions at home, in the community, in social media settings, at the workplace, in the healthcare system, in the marketplace and in the political arena.

For many years, the individual’s health literacy skills and related health knowledge have been the predominant focus of interest, while the environment with which the individual interacts in the context of health issues received less attention, although research streams have continuously highlighted that health literacy is context-specific and affected by a social and relational dimension as well. Attention towards collective health literacy and distributed health literacy increased substantially, especially since the individual is always embedded into a social, cultural, economic and political context. Besides the health literacy of individuals and groups on the micro- and meso-levels, also addressing macro-level systems and policies was moved up on the health literacy agenda. It became obvious that health literacy is a systems issue demanding a systems perspective and systems-wide approach across the whole spectrum, addressing individuals, professionals, organisations and policy-makers. Addressing health literacy in its depths and in the long run requires a systematic approach, and to issue it within an advanced cooperation and network framework for strengthening health literacy at local, regional, national and global levels, including aiming at (inter)national level change. In this context, the health-literate healthcare organisation first introduced a concept to overcome barriers between the individual and population’s health literacy skills and the complex demands of healthcare settings. This concept has been transferred to settings beyond healthcare, with various approaches available addressing the improvement of the physical and social infrastructure of a system and facilitating the creation of health literacy-friendly settings, including its responsiveness and training for healthcare professionals and other professional groups working with people in a health context. However, as of today, social care organisations remain the only other setting besides various healthcare settings that have included the health-literate organisations’ approach, but especially regarding health promotion and prevention, defining and demarcating actions and action areas in relation to health literacy-friendly settings must encompass further everyday life settings, such as kindergartens, schools, universities, workplaces and beyond. Addressing systems and settings, and therefore the structures into which individuals are embedded, is an important target in order to increase equity and reduce health inequalities and health literacy disparities.
This handbook, therefore, draws on a new narrative and should be seen as a frontrunner for new thinking that aims to provide an overview of the multifaceted and multidimensional nature of health literacy by adopting a lifespan perspective, while addressing research, practice and policy. Hence, the book is intended for health literacy experts, as well as researchers, practitioners and policy-makers who are interested in, but less familiar with, the topic. The various chapters offer a wide range of major findings, outline the current discourse in health literacy, and provide updates about the latest developments and future prospects. The breadth and depth of the book’s chapters present cutting-edge research and future prospects for research, policy and practice in the health literacy field.

Comprised of 45 chapters and divided into four thematic parts, the book addresses different populations, such as children, adolescents, adults and older people, in different settings, and with a wide range of concepts, methodologies, programmes and interventions to improve health literacy and governmental, community and institutional policies. The book further aims to share research results, to provide insights into new approaches and theoretical considerations, including making theoretical and practical connections between health literacy and fields and disciplines such as education, sociology, health promotion, social epidemiology, public health, healthcare, medicine, nursing or pharmacy. The aim is to promote future research, practice and policy dialogue among academics, health and educational professionals, and policy- and decision-makers from multiple disciplines and sectors, and to engage and support students interested in learning more about health literacy.

Finally, the book draws on practical experience on a global scope from leading health literacy projects and organisations: the Health Literacy in Childhood and Adolescence (HLCA) Research Consortium, the Health Literacy Europe project (HLS-EU), the Global Working Group on Health Literacy of the International Union for Health Promotion and Education (IUHPE), the International Health Literacy Association (IHLA), the Asian Health Literacy Association (AHLA) and more.

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