

A Study on the Perceptions of International Students on Health Literacy in an Australian University Context

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Abstract

In recent years, due to the increment in the enrolment number of international students, international students have become one of the most significant stakeholders in Australian tertiary education institutions. There are many studies about international students' academic and daily life in Australia. However, little is known about the health literacy of international students. This research study investigated international students' views on the conceptual and functional aspects of health literacy at one university context: the University of Tasmania. It aimed to provide insightful information and guidance not only for current and future international students in Australian universities, but also for various educational services and relevant government agencies to provide more effective support to them. Qualitative research method was used to gauge the breadth and depth of the issue. Semi-structured interviews were conducted with seven participants who were studying in different faculties. Data were analysed using qualitative data analysis software NVivo. Constructivist grounded theory was the basis of data analysis. The findings indicated that culture, education, and English proficiency are three main factors influencing international research students' health literacy. Coping strategies used in improving health literacy were also examined as references for current and prospective international students in the Australian university context.

Keywords:

International students, health literacy, perceptions.

Introduction and background

In recent years, the increments in the numbers of new international students have made international students become significant population in Australia. Until November 2011, there were 554,764 enrolments by full-fee paying international students in Australia on a student visa. They are mostly from Asian countries, including China, India, Republic of Korea, Vietnam and Malaysia (AEI, 2011). It is undeniable that overseas students, especially those who come from different countries and cultures will face more challenges in studying and living in Australia compared the local students due to the different environments, people and cultures. Although there are many research and literatures discussed about international students' perceptions and experiences on academic challenges, but there is a little known on their physical and health awareness. In many cases, the health conditions do affect the international students' academic performance. Thus, it is important to look into health condition of international students in term of their health literacy.

Health literacy described as the degree to which people are capable of obtaining, processing, and understanding necessary health information and services in order to make appropriate decisions in situations related to health (Ratzan & Parker, 2000). This is the most popular definition which was introduced in United States National Library of Medicine. In simple sentence, health literacy refers to the ability to comprehend and behave on health information (MacCray, 2005). Furthermore, the skills and knowledge about health make a person competence to seek out and understand the access of health information and concepts to make informed choices; as well as to restrain health risks and improve the living standard (Zarcadoolas, Pleasant & Geers, 2005). On the other hand, Adams et al. (2009) pointed out that health literacy is not simply that people are literate and classify in the health setting. Health literacy is the cognitive ability that allows people to understand and interpret thoroughly the meaning of health information in written, spoken or digital form. It enables people to make health decisions in their

daily life. However, some scholars disagree with the definitions mentioned above. They indicated that health literacy should consider not only from the view of individual competence but also the other features such as education, culture and language. According to Bohlman et al. (2004), "health literacy is a shared function of social and individual factors. Individuals' health literacy skills and capacities are mediated by their education, culture, and language" (p. 5). Thus, the effects of education, culture and language on individual's health literacy cannot be underestimated.

Health literacy has been highlighted as an important issue in many researches. Health literacy has viewed as an asset to be enriched, as a key outcome of health education and communication that promotes the empowerment in making decisions related to health (Nutbeam, 2008). The emergence of many problems arising from inadequate health literacy has highlighted the role of health literacy. There are various factors in influencing a person healthy literacy level. Educated and literate people who live in modern life have benefited more from the innovative health care systems compared those who not able to comprehend and apply state-of-art services may keep themselves away from such advances in health science (Cultilli, 2005). This means people with lower health literacy are likely to face more risk of getting sick and diseases (Williams, Davis, Parker, & Weiss, 2002). Poor health literacy could be lead to difficulties in communication especially in special scientific terms and doctor-patients dialogue (Schillinger, Bindman, Wang, Stewart, & Piette, 2004). Thus, health outcomes for patients with poor health literacy may be negatively influenced due to their complicated array of communications obstacles (Williams et al., 2002). Inadequate health knowledge can lead to high mortality compared patients with higher health literacy (Peterson, et al., 2011). Furthermore, people with lower health literacy suffer higher medical cost which will create accelerate of cost burdens on society (Howard, Gazmararian, & Parker, 2005). However, despite the importance of health literacy, little research has been conducted to address this issue on international students. There are only findings showed that international students face a high risk of psychological problems that may influence their academic performance (Sandhu & Asrabadi, 1994; Mori, 2000). So, this study purposely designed to investigate perceptions of international students on health literacy as well as the factors that influence their health literacy.

Methodology

Data collection

The goal of this study was to examine international students' views on different aspects of health literacy that emphasises on factors influence the level of health literacy. It sought to provide useful information and implications for Australian universities or other authorities in doing any policies to take care their students properly. In this study, semi-structured interviews were conducted with seven participants with different backgrounds were selected randomly. The interviews were conducted face-to-face and individually. A list of ten questions was designed and adopted to give researcher a guideline to ask questions and for interviewees to prepare what would be asked during interview. These interview questions were designed to fulfil the research aims, by asking questions that required detailed and reflective answers from participants. All the data were transcribed and thematic analysis was utilised, with the assistance of a qualitative data analysis software NVivo version 9.

Participants

A total of seven international research students who were studying at the University of Tasmania participated in the semi-structured interviews. In order to include participants with diverse backgrounds, participants' demographic backgrounds were taken into consideration. Amongst the seven participants, they were from Vietnam, China, Malaysia and Korea. Three of them were studied in Education faculty, three of them were studied in Health Science, and only one was studied in Science or Technology and Engineering. The lengths of which they have been studying in the research degree were varied, ranging from less than one year to over three years.

Findings

CULTURAL INFLUENCE ON HEALTH LITERACY

Cultural factor emerged to be a significant theme in the data analysis. The cultural background of international students is an important factor in influencing their health literacy. Most of the participants in this study agreed that cultural background does have significant effect on their views toward health. One example given by Student 6 is that "Cultural background will dramatically affect people's perspective about health, especially Asian people. This will lead to their decision and opinion in choosing the food that will influence their health." According to the interview data, the following four general issues related to cultural factor emerged:

- Subtheme 1: Habit in diet
- Subtheme 2: Religion
- Subtheme 3: Sexuality
- Subtheme 4: Traditional medical treatment

Habit in diet

Within the category "cultural factor", "Habit in diet" was one of the issues highlighted by participants. Cuisine is an important feature that typifies a culture. There is a big difference between Asian and Western styles of eating habit. The following are two examples given by Students 5 and Student 4.

Traditionally, in my country, people do not have habit of eating raw food, thus they experience less parasitic disease. When I came here, I saw many people eat beef that was still red inside, or they seemed to be crazy with raw salmon. (Student 5)

In my family, in every meal, my father is the one who use his own chopsticks to get food for my grandparents and that behavior is always considered a very caring action. And as his children, we need to learn from that to treat others when having meals. (Student 4)

Religion

Other than food habit, "Religion" seems to be a sensitive issue of culture that influences health literacy of a person. All participants in this study have their own religions and admitted that their beliefs do restrict their food choices. For example, a student whose religion is Seven Days Advantages only eat beef and chicken because the religion does not encourage the believers to have pork. Similarly, most people in Buddhism are vegetarian who only consume vegetables no matter how their health conditions are.

My grandmother believed in Buddhism. Whenever she gets sick, it is very difficult for my parents to persuade her to see the doctor. She just keeps eating veggies with the belief as a way to express her loyalty to the God and she believed that this will help her to overcome sickness. (Student 1)

Sexuality

Apart from "Habit in diet" and "Religion", "Sexuality" was another concern highlighted by participants. In Asian countries, the sexuality is always regarded as very sensitive issue. Female patients especially Asian women are expected to see female doctor to consult about women's problem. Furthermore, it is a more sensitive issue for single and unmarried women who have not experienced sexual relationship to talk about sex. Student 6 has confided that "actually, I am scared of being touched by a male doctor. Although most of them are very friendly and humorous, I could not relax when they check somewhere on my body."

Traditional medical treatment

In the interview, most participants shared their views on "Traditional medical treatment" has influenced their health literacy. In many cases, traditional medical treatments are known to be inherited from previous generation without any explanation on that. However, there are still people from Asian countries using only western medication.

I drink ginger juice whenever I feel unwell, sometimes it works, sometimes doesn't. One more thing I do not understand why but I must follow is that I must not wash my hair during my period. That is very

annoying for me but my mother said that this habit will protect me from many diseases when I get old. (Student 4)

Yes. I am a Chinese. So I am influenced much by Chinese culture. I know that traditionally, Chinese people prefer go to Chinese medicine shops to get herbs if they are sick. However, in my case, my family not use to traditional Chinese medicine. Normally, we will go for medicine, that's what we call, "zhong yi". (Student 1)

EDUCATIONAL INFLUENCE ON HEALTH LITERACY

Education was another factor identified in interview. Education plays an important part in addressing health literacy of one person. There were two aspects of educational level described by participants. There were two categories of educational level: professional education and general education.

- Subtheme 1: Professional education background
- Subtheme 2: General education background

Professional education background

"Professional education background" was emerged as one of the concern in affecting health literacy level. When participants' studies are related to health area, they are likely to have more knowledge on health and reach a certain level of health literacy. Moreover, some participants admitted that being educated in Australian background enhanced their health knowledge and familiarity to Australian health care system.

Yes, I am doing a health professional course thus I know more about diseases and their consequences. Therefore, I pay more intention to protect myself and others from those diseases or I know what to do to slow them down as well as choose suitable treatment. (Student 5)

I gain better understanding of health literacy during the time I study in Australia. Thanks to the availability of health resources. As being a nursing student, I also have more chance to expose to healthcare service here and find it very accessible. (Student 6)

As I was a Biology student, I learned more on nutrition. So, I will have knowledge on how to differentiate healthy and unhealthy food in order to have good health. (Student 1)

General education background

"General education background" has been viewed as an important factor in influencing health literacy of participants. Some participants with opinions that the higher the education level, the higher health literacy level one could gain. This is supported by one Vietnamese student 7.

I think an educated person knows how to evaluate the source of health information that he or she has access to and how to use that appropriately. They tend to trust scientifically based information rather than traditional practices.

THE SIGNIFICANCE OF ENGLISH ABILITY IN HEALTH LITERACY

All the participants agreed that English language had significant role in affecting health literacy of a person. English language as a communication medium was always a worry for international students. There were two sub-themes emerged.

Subtheme 1: Poor communication between doctor and patient

Subtheme 2: Difficulties in updating health information

Poor communication between doctor and patient

"Poor communication between doctor and patient" was a significant challenge in healthy literacy, especially for those who not from English speaking background. The low English proficiency can affect the communication between doctor and patient. Consequently, they may not ask depth questions related to health condition. One Korean student 2 gave the response as below:

As English is not my mother tongue, I have the limitations to communicate in English. When it comes to medical terms and terminologies that are not frequently used in daily life, it makes the expression of my symptom difficult when sick.

Difficulties in updating health information

Poor English proficiency had blocked people from improving their health literacy in Australian context. Health information in Australia is mostly provided in English. This makes people with non-English background, especially international students difficult to understand the health information.

Most of the information about health in Australia is written in English. There are translated factsheets but they are limited. (Student 6)

Discussion and conclusion

Cultural, education and English ability have become factors that directly influence international students' health literacy. These are barriers for them because they are from different cultural backgrounds with different educational level. Furthermore, most of them are from non-English speaking backgrounds that are not familiar with English. The findings of the research reflect the literatures which suggest that culture can "shape perceptions and definitions of health and illness, preferences, language and cultural barriers, care process barriers, and stereotypes" (Bohlman, et al., 2004, p. 12). Cultures do take major part in influencing international students' health literacy. Habit in diet, religion, sexuality and traditional medical treatment interrelated with cultures were aspects that form international students' health literacy. They were not the only factors found in this study. Educational level and English ability in communicating and understanding the health information are also main concerns to international students. There are more advantages for international students if they have been exposed to health areas. Higher educational levels can help to improve their health literacy as well. Through the research findings, identified factors which influenced the health literacy of international students play an important source of information for the authorities in Australia to focus on while apply suitable adjustment in a way to support their students. In addition, the research can raise the awareness of health literacy in the mind of current and prospective international students. Thus, the study also can be regarded as a base for further research dealing with issues related to international students' health literacy.

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