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## Analysing Quality of Doctor-Patient Communication and Health Literacy among Delhi Patients

**Abstract :** Patients with poor health literacy have problems while interacting with doctors. They also face difficulties in understanding medical instructions from doctors. The health workers also interact with the doctor face-to-face, i.e. verbal communication. This paper analyses the doctor-patient verbal communication. Data from 100 patients visiting general physicians were collected at the primary health centres in Delhi, and their responses were obtained through a semi-structured questionnaire. The paper examined the quality of communication between doctor and patient to understand the quality of communication between doctor and the patient. This paper also analysed whether patients with low literacy can understand the instructions of the doctor. The study found that patients with low health literacy and who are less literate sometimes encounter problems while interacting with doctors. They are also more dependent on pharmacists to make them aware of the medicines and treatment prescribed by the doctor.

**Introduction :** Health communication is an important part of life. Understanding our own health, making the right choices and receiving treatment for any ailment at the right time is important for a healthy life. The people are taking health seriously, especially after the world faced the pandemic in the years 2019-21. In India, the government has also taken health communication

seriously. The Government has directed the doctors to write prescriptions in legible handwriting or provide the patients with printed prescriptions. The Government wants the patients to understand their prescription so that they can make better health decisions (Perappadan, 2015). The patients have the right to know and understand the treatment they are receiving. Health communication is an important skill that every person should be aware of, and can make better health choices for themselves and their family members. Swain (2022), in his book, mentioned that health communication in India is very important, especially between the main stakeholders like doctors and patients. It is also important for the treatment of diseases like diabetes and hypertension. A good and fruitful communication between doctors and patients promotes positive behaviour among patients, promotes treatment follow-ups, and encourages positive change in the behaviour of a patient. The Indian healthcare sector has to face many challenges, especially in communicating health-related messages. This makes drawing communication strategies more important.

#### **Defining Health Communication :**

Thompson (2014) defines health communication as an important component in interpersonal communication dynamics to international health problems, stressing that health communication covers personal, cultural and social problems. Health communication is a

practice of disseminating health-related information among health workers, doctors, patients, and the common citizens, and to improve health results, ensure better patient safety, and enhance healthcare results. Health communication is about the sharing of knowledge concerning to health among patients, health workers, and doctors. Good health communication is essential for making sure that the patients are diagnosed accurately and receive proper treatment to garner positive health results (CipherHealth, 2025). Health communication is a new, important, and emerging applied domain of study that studies the influence of man and mediated messaging on the delivery of healthcare and the advocacy of health. Health communication is basically issue-based, which understands the important communication problems that work towards reducing the quality of health care and health messaging, as well as promoting evidence-based health messaging that further contributes to garner better health results (Kreps, 2015).

Health-related communication is a growing field of study. It is evolving, and every day a new concept and aspect adds to it. In the history, it was believed that the communication, which is related to the health concerns was considered as an interpersonal communication practice rather than finding societal benefit in it. Health communication also advocates for societal responsibility and the empowerment of people. A proper health

communication can contribute towards society through removing environmental, cultural, social and economic problems that create barriers for the dissemination of health-related information and ultimately slow down the improvement towards health-related attitudes that promote health (Gianfredi et al., 2018).

### **Health Literacy and Its Importance :**

Health literacy is an important part of life today as it promotes positive health behaviour and attitude. Health literacy is important to understand personal as well as societal attitudes towards health and health practices. Health literacy is an important part of public health, and it affects personal and public health and well-being. Health literacy helps to understand the ability to attain and understand the information related to health and make better health related decisions. Health literacy not only promotes health behaviour it can also be considered as a scale to measure positive health outcomes and gain health equity. Health literacy is a very important part of the Sustainable Development Goals, and for the world, it is important to promote health literacy among citizens so that they can also achieve better health outcomes. Health literacy is important to manage the health diseases which are chronic in nature and which have long-lasting effects. Proper health literacy and continued messaging for the Pulse Polio program helped India to get rid of this disease. In the same manner, if health literacy is promoted and people are

properly health literate, then people will move towards self-care, and will make more informed decisions regarding their health related issues. Improved health literacy among citizens will improve the quality of life and lower the expenditure on health related problems.

Health literacy is important as it helps in making health related decisions that are informed and it promotes health behaviour and attitude, which is better and garners better health results. Health literacy is a major indicator of health, and poor health literacy indicates poor health. The World Health Organisation has always advocated that health literacy promotes positive health behaviour and better health equity, and it is important for achieving sustainable development. It is advocated that health literacy should be taught from the school level as it is the ideal time, and it will help to bridge the gaps between health and education. Promoting health literacy will help to achieve sustainable development goal 3 and 10 (Cruickshank et al., 2023).

### **Importance of Doctor-Patient**

**Communication :** Effective communication between doctor and patient is very important, as it is the fundamental part of quality healthcare. A good doctor-patient communication encourages the patient to follow the treatment, and the patient is more satisfied after effective communication with the patient. Effective communication between doctor and patient reduces medical errors and ensures accurate diagnosis. Medical

treatment and communication are both collaborative processes. Communication is very important for good health in India. The study highlights the importance of medical tourism in the country. The study states that the communication, which is rich in cultural context, improves the communication quality between the doctor and the patient. It also ensures that the patient gets a better experience.

**Literature Review :** Humphries et al. (2018) in a study mentioned that health communication is very important, especially between the major stakeholders, i.e. doctors and the patients. In India, health communication between patients and doctors is inconsistent and does not provide enough information to share medical problems. Many patients in India many patients do not have proper medical documents required for a proper treatment, which results in a fragmented information transfer. In India, 55% patients mentioned that they received verbal medication prescription during an appointment with the doctor. The findings of the study also reveal that less time available with the doctors in the hospital and inconsistent communication practices are major problems in better communication. Harding et al. (2021) in a study revealed that the communication related to health between doctors and the patients in India mainly depends on self-opinions and the judgement through experience of the doctor as many patients are influenced by preferences and do not disclose their medical

information. Many relatives of the patients do not completely disclose the medical information in hope of not being diagnosed with serious ailment. The doctors also disclose treatment information from their side on the perception regarding financial capabilities of the patient for the treatment. The patients also hesitate to ask questions and they could not properly understand their ailment and its proper treatment. This behaviour of non-disclosure influence outcomes of treatment.

In India, to achieve a good patient centered treatment and medical consultation it is important that the patient and doctor have an effective dialogue. Better communication skills will garner better results and hence will result in faster recovery. It will also increase patient satisfaction. This also calls for a better communication training during g medical courses so that later doctors could have a better communication with the patients and it will ultimately result in improved diagnosis and treatment of the patient (Khursheed et al., 2022).

Srivastav (2024) in a research paper mentions that the communication related to health in India between the doctors and the patients is influenced by the new trends in healthcare sector and it emphasis more on patient centred care. It is important to strike an effective communication with the patient by the doctor to establish trust and improve relationship. Although the challenges related to cultural differences and low

health, literacy needs to be improved with time as these challenges still stay. These challenges needs attention so that a well regulated healthcare setup could be developed to cater patient needs. Basu et al. (n.d.) in a research article stated that communication regarding health between doctors and the patients if mostly obstructed due to burden on doctors due to high patient footfall in hospitals. Low ratio of doctors, patients, and insufficient time for fruitful conversation.

Schillinger et al. (2004) in a study used the TOHFLA (Test of Functional Health Literacy in Adults) test to understand and study on 408 patients and clinicians who spoke English and Spanish and are diabetes patients. The study tried to know about the functional health literacy levels among health seekers and health providers. The research observed that there was poor oral communication skills among the respondents especially in the areas where the doctor patient dialog was direct. The doctor's communication was not up to the mark and found to be poor, as they did not properly explain to the patient that what the treatment should be. The doctors' also did not pay proper attention to the queries of the patients.

#### **Objectives:**

1. To analyse the quality of doctor-patient communication in Delhi.
2. To examine the level of health literacy among patients in Delhi.

#### **Research Questions**

1. What is the perception of patients in Delhi regarding their communication with the doctors?
2. What is the level of health literacy among patients in Delhi?

**Research Methodology :** The research paper utilised a survey method, and a semi-structured survey was conducted among 100 patients at four different primary health centres in Delhi. The purposive sampling technique was used to select the sample for the study. The survey was conducted in the North-West district of Delhi. The patients were surveyed in the month of January 2025, and a sample of 25 patients from every primary health centre was selected.

**Findings and Analysis :** The findings and analysis of the research reflects on the better and more effective communication from the doctor's side. The patients, however, report some issues with the communication from the doctor's side, which can be solved with some corrective measures in the doctor's communication. The patients were asked eight questions on a Likert scale and the answers obtained are analysed as follows:

1. How often do you face problems while explaining your problem to the doctor?

Response	Delhi	Total %*
Never	12	12%
Rarely	27	27%
Sometime	44	44%

Response	Delhi	Total %*
s		
Often	7	7%
Always	10	10%

The data shows that in Delhi, only 17% patient's face problems while explaining their problem to the doctor always and often. This is a small number of respondents. The patients who some times face problems are 44%, which is a big number, but if they sometimes face problems, then it could be because of many problems. They are facing many other problems, like their own incapability to explain their problem, or their disease is a novel disease for which the standard operating procedures are still to be laid down by the medical bodies and the government. 12% patients have never faced any such problem, and 27% patients have rarely faced a problem while explaining their problem to the doctor. Patients who have never or rarely faced a problem are 39% collectively, which is a satisfactory number. The patients in Delhi are satisfied with the conversation with the doctor, mostly because most of them rarely get trouble while explaining their problem to the doctor.

2. Do you understand the treatment explained to you by the doctors?

Response	Delhi	Total %*
Never	5	5%
Rarely	8	8%

Response	Delhi	Total %*
Sometimes	43	43%
Often	27	27%
Always	17	17%

The patients in Delhi claim to understand the treatment explained to them by the doctors. As 44% patients in Delhi claim to understand the treatment always (17%) and often (27%). This shows that almost half of the population rarely have trouble understanding the treatment explained to them by the doctor. The patients who sometimes understand the treatment are 43% this is also a big number; therefore, the problem in understanding the treatment has some issues, as the occurrence is sometimes, then it could be solved with minor corrections in the communication strategy by the doctors. The patients who rarely or never understand the treatment explained by the doctor are 8% and 5%, respectively. This 13% could be because of the major communication gaps between the doctor and the patient.

3. What is the highest level of education you have received?

Response	Delhi	Total %*
Till Primary Class or below	37	37%
Class 10 <sup>th</sup> or below	40	40%

Response	Delhi	Total %*
Class 12 <sup>th</sup> or below	13	13%
Undergraduate or below	7	7%
Postgraduate or below	3	3%

The majority of the patients (90%) visiting the primary health centres in Delhi have not attended formal college, and 77% patients have studied class 10<sup>th</sup> or below. The data suggest that the majority of patients visiting primary health centres in Delhi are less or not educated. The literacy level of the patients in Delhi who visit the primary health centres is low; therefore, they might have problems in understanding the treatment, information about the disease and the diagnosis.

4. How many times have you heard about the disease the doctor tells you about?

Response	Delhi	Total %*
Never	0	0%
Rarely	5	5%
Sometimes	27	27%
Often	51	51%
Always	17	17%

The data suggests that the patients are aware of the diseases or the problems that are diagnosed for, at least they have heard about the name and the primary symptoms of the disease. The patients who are always aware of the disease are 17%, whereas 51% patients have often heard about the disease they are diagnosed with or have symptoms of the disease. Only 5% patients have rarely heard about their disease. This is also because the patients visiting primary health centres visit the centre to be cured of regular diseases and check-ups, for example, for the treatment of cough and cold, or to be treated for regular fever. For other major diseases, they are referred to civil hospitals, and mostly they themselves choose to visit the civil hospitals.

5. How often do you think that the doctor has patiently listened to you properly before suggesting the treatment?

Response	Delhi	Total %*
Never	13	13%
Rarely	12	12%
Sometimes	18	18%
Often	30	30%
Always	27	27%

The data shows that the doctor patiently listens to the patients in the majority of conditions. The patients visiting primary health centres in Delhi. 27% always feel that the doctor has

patiently heard their problem before prescribing the treatment. While 30% patients feel that the doctor has patiently heard their problem before prescribing the treatment. The patients who feel that they are not heard properly by the doctor are also not negligible, as 13% and 12% feels that they are never or rarely heard by the doctor before prescribing the treatment, respectively. This is also a big number as it constitutes one-fourth of the respondents and this shows time constraints with the doctors.

6. How often does the doctor explain to you about the medication he/she is suggesting?

Response	Delhi	Total %*
Never	2	2%
Rarely	11	11%
Sometimes	30	30%
Often	37	37%
Always	20	20%

The data suggest that in most cases the doctor explains the medication to the patients properly, and in very few cases the doctor is not able to explain the medication to the patient. In Delhi, 20% patients agree that the doctor explains the medication to them, and 37% have agreed that it happens often. Whereas 30% patients agree that the doctor explains the medication to them. This could be because if the doctor has not changed the medicine, and if the medicine is only one or two in number

and does not require much explanation, the doctor must have skipped the process. Only 2% patients reported that the doctor never explained the medication to them, and 11% reported that the doctor rarely explained the medication to them. This could be because of the high pressure of footfall and less time available with the doctors.

7. How often do you think that the doctor is rude in their interaction with you?

Response	Delhi	Total %*
Never	30	30%
Rarely	52	52%
Sometimes	15	15%
Often	3	3%
Always	0	0%

The data suggests that the communication behaviour of the doctors in Delhi, as suggested by the patients, is good with them. The respondents who feel that the doctor has never been rude to them are 30%, and the patients who have rarely felt that the doctor was rude to them are 52%. This shows that 82% patients are satisfied with the good behaviour of the doctor. Only a few 3% respondents have reported that they often face rude communication behaviour from the doctor's side.

8. How often do you feel that your interaction with the doctor was satisfactory?



Response	Delhi	Total %*
Never	7	7%
Rarely	2	2%
Sometimes	14	14%
Often	37	37%
Always	40	40%

The data shows that the majority of the patients feel that their communication with the doctor was satisfactory, and 40% patients have reported that they always feel that their interaction with the doctor was satisfactory, and 37% patients often felt like this. Only 9% patients feel that their interaction with the doctor was never or rarely satisfactory.

**Conclusion :** The study suggests that the health literacy of the patients visiting the primary health centres is satisfactory, despite their low literacy level is low but many patients still need awareness about the health problems. The doctors at the primary health centres possess good communication skills, and the patients are largely satisfied with their communication practices. The patients feel that they are satisfied, and very few incidents are reported where the patient feels less satisfied or avoided. The doctors also try to give time to the patient and calmly explains them the treatment and the medication prescribed.

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