

# COVID-19 Outbreak and Health literacy of Health Institutions: The Role of Strategic Theory

Hashim Fawzi Alabadi<sup>1</sup>, Ehsan Amori Almomen<sup>2</sup>

<sup>1</sup>Prof, Faculty of Business Administration and Economics, University of Kufa, Najaf, Iraq, <sup>2</sup>Postgraduate, Faculty of Business Administration and Economics, University of Kufa, Najaf, Iraq

## Abstract

The local outbreak of COVID-19 and its development into a global pandemic in a short time have made health literacy more critical than ever in facing these global health threats. The main objective of the research is to know the reflection of the strategic theory in health literacy and the relationship and impact statement, and then it is possible to know the determinants of the health institution's success in managing health literacy efforts as the Department of Health of Najaf was the organization in question. The researcher surveyed the opinions of a number of its employees, as the research community was (248) employees, and the research sample reached (155) responses on which the analysis can be performed. A set of specialized descriptive and inferential tests and methods were conducted on the data obtained by using (SPSS v.26) program. The results show that the health institution's interest in strategic theory will contribute to achieving health literacy by demonstrating the relationship and impact between the two research variables. The research extracts a set of recommendations, the most important of which is to increase the interest of the departments in the Najaf Health Department in the concept of strategic theory and make health literacy programs a priority that must be implemented even in light of the scarcity of financial resources.

**Keywords:** Strategic theory, health literacy, and the COVID-19 pandemic.

## Introduction

The theory means looking, seeing, observing. Many of the theories that have been used and developed in strategic management research, as in other established disciplines, implicitly or explicitly reflect the understanding of social activities and behavior that has occurred in the contemporary business environment. There are clear opportunities to develop new theoretical concepts that reflect assumptions, ideas, and relationships that differ from traditional settings either as entirely new or fundamental differences <sup>(1)</sup>. Strategic theory refers

to models that describe or explain how strategies are developed, implemented, and changed. Models of strategic processes identify patterns in decisions or actions over time and address the mechanisms and pathways that shape and govern strategies. Research in strategic management is often categorized as related to either the content of plan or the strategy process <sup>(2)</sup>.

Good theories provide valuable and relevant conceptual frameworks to understand the general requirements of a strategy and the general logic associated with its effective employment. This theoretical and conceptual knowledge is crucial for policymaking <sup>(3)</sup>, and strategic theory may be the theory of interconnected decision-making under conditions of uncertainty <sup>(4)</sup>. It is able to resolve conflicts in the attempt to assess social activity designed to achieve

---

**Corresponding author:**

**Prof. Dr. Hashim Fawzi Alabadi,**

Email: hashimf.alabadi@gmail.com

the goals of arbitrary moral assessments. In this way, strategic theory facilitates clarity of understanding. Hence, strategic theory opens the mind and liberates it intellectually <sup>(5)</sup>.

A disciplined strategic theory allows a professional to evaluate the merits of a particular strategy. The framework provided by this theory can be a systematic basis for the disciplined thinking process to aid the strategist in developing strategy and act as a guide for others to follow in understanding, evaluating, and criticizing the merits of a particular approach <sup>(6)</sup>. The strategic theory is a theory of action. From this standpoint, Colin Gray developed the idea of a “strategic theory” that helps educate the strategist so that he can visualize, plan and implement strategy through his leadership performance <sup>(7)</sup>. A brief review of the main developments in strategy theory indicates. The conventional wisdom suggests that the increasing polarization and fragmentation of strategy theory has gradually limited its applicability to actual strategic management practice <sup>(8)</sup>.

“Making appropriate health decisions” is a consequence, as the means are usually language, communication, knowledge, mobility in the health system, an understanding of mathematical concepts of risk, an understanding of basic biology, disease processes, and health issues <sup>(9)</sup>. Another definition most often used is “interpersonal, cognitive and social skills that determine the ability of individuals to access, understand and use information to promote and maintain good health.” People with limited health knowledge often have low educational levels, are elderly, and immigrants who depend on various forms of Public Transfer Payments <sup>(10)</sup>.

Over the past decade, health literacy has become a significant topic in health research, policy, and surveys that test literacy skills in health care settings <sup>(8)</sup>. Health literacy, as a construct, was introduced in public health research nearly 45 years ago, and since that time, it has become an issue of increasing relevance to global public health <sup>(11)</sup>. Simonds was the

first person to use the term health literacy in 1974. However, the concept of health literacy differed from the current concept.

## **Background**

### **Dimensions of Strategic Theory**

Given the evolving and diverse nature of strategy research, it is challenging to construct a comprehensive theory of the organization, and it is too early to choose one idea to the exclusion of every other idea. The construction of view in the field of strategic management often relies on an inductive approach based on empirical evidence rather than using deductive reasoning <sup>(12)</sup>.

### **Resource-Based View**

The resource-based theory (RBV) is essentially a theory of the conditions necessary for competitive advantage, the main objective of which is to assess whether the current resources have the potential to earn differential rents (profits). Hence, if the resources meet the conditions (jointly necessary) for being of value, Rare and expensive to imitate and replace, it may result in a sustainable competitive advantage <sup>(13)</sup>. The resource-based view (RBV), which is firmly based on ideas developed by economists, has become the dominant strategic management viewpoint.

### **Dynamic Capabilities Theory**

In theory, any organization can create a unique set of resources for the current market situation and gain an advantage over its competitors. But in the long run, this feature will be lost for two reasons: competitors will try to bypass this feature, and they will sooner or later; Ultimately, technology and demand change and the market will then demand a different kinds of products or services. One of the results that an organization’s economic theory can derive from the concept of dynamic capabilities Conclusions is that the organization’s most valuable resource is its first manager because it represents the higher-order dynamic capabilities necessary to reconfigure all

remaining resources <sup>(14)</sup>. The dynamic capabilities view has evolved as an imminent criticism of the lack of dynamics in resource-based theory.

**Knowledge-Based Theory**

Kogut and Zander 1992 emphasized the strategic importance of knowledge as a source of benefits and laid the foundation for organization theory. They have assumed that what organizations do best in markets is creating and transferring knowledge within the organization. In their view, knowledge is possessed by individuals, yet it is also an integral part of the organizational principles under which the individuals working voluntarily cooperate in an organizational context. Since the creation of new knowledge depends on existing capabilities and corporate regulations, the organization’s knowledge develops in a path-dependent manner through the iteration and recombination of existing knowledge. In contrast, it can form the basis of strategic theory <sup>(15)</sup>.

**The Real Option Theory**

Organizations are among the other investment alternatives <sup>(16)</sup>. Kogut and Kulatilaka 2001 indicate that fundamental options capabilities act as dynamic remedies against organizational inertia. The role of knowledge and managerial competencies has been emphasized as a critical precondition for flexible development strategies. Patterns of market entry,

forms of governance, and innovation investments <sup>(17)</sup>.

**Dimensions of Health Literacy**

There are four conceptually distinct dimensions of health literacy: the ability to find health information, the ability to evaluate health information, the ability to understand health information well enough to know what to do, and the ability to actively manage one’s health. According to Sorensen et al., The health literacy dimensions of health promotion include:

- (1) The ability to regularly update oneself,
- (2) understanding information,
- (3) interpretation and critical thinking,
- (4) the ability to make informed decisions about health determinants in the social and physical environment <sup>(18)</sup>. When a society is healthy learning, it refers to its ability to gather information about (the social determinants of health), to mobilize collective resources to act on them, to efficiently advocate for structural changes to improve the daily living conditions of its members <sup>(18)</sup>.

The authors developed a single conceptual model based on the four dimensions of health literacy, as shown in Table (1). The dimensions are: (1) obtaining, (2) processing, and (3) understanding basic health information based on the traditional definition of health literacy. In addition, a fourth dimension has been added, which is the information application <sup>(19)</sup>.

**Table 1. dimensions of health literacy**

	<b>Access to health information</b>	<b>Understand health information</b>	<b>Evaluating practical health information</b>	<b>Use of health information</b>
<b>Health care</b>	Access to information on medical or clinical matters	The ability to understand medical information and derive meaning	The ability to interpret and evaluate medical information	The ability to make informed decisions on medical issues
<b>Prevention of diseases</b>	The ability to access information on health risk factors	The ability to understand information about risk factors and derive meaning	The ability to interpret and evaluate information on health risk factors	The ability to make informed decisions about health risk factors
<b>Promoting health</b>	The ability to update itself on health determinants in the social and physical environment	The ability to understand information about health determinants in the social and material environment and derive meaning	The ability to interpret and evaluate information on health determinants in the social and material environment	The ability to make informed decisions about health determinants in the social and physical environment

### Findings

Table 2 shows the results of the correlation analysis between strategic theory and health literacy at the level of the health institution under study. It is evident that there is a positive and significant correlation (overall indicator) between the strategic theory combined with health literacy and its dimensions, as the general correlation coefficient reached (.495 \*\*). It is a positive (positive) correlation relationship,

and it was marked with a sign (\*\*) indicating that it is a statistically significant level (0.01). With the dimensions, there were two important relationships, which is the relationship between (strategic theory, obtaining health information and evaluating health information) ).

Table 2 results of correlation relationships between study variables.

**Table 2. Results of correlation relationships between study variables**

Variables approved Variables Independent	Health literacy					
	Access to health information DSN	Understanding health information YU	Evaluating practical health information Eat	Use of health information YU	Total index St	Statistical significance with the overall indicator
Strategic Theory	.407**	0.129	.494**	0.149	.495**	0.00

Table 2 summarizes the findings of the effect relationship test between strategic theory and health literacy, assuming that there is a substantial link between the real value of strategic theory (X) and health literacy (Y), as indicated by the following equation:  $(H.LITRACY) = B_0 + b_1 * (STR.THE.)$

H.LITRACY = Health Literacy.

STR.THE. = Strategic theory.

$B_1$  = slope of the equation (the amount of change in y that occurs as a result of change of x units).

$B_0$  = constant term.

This equation shows that health literacy is a function of the actual theoretical and strategic value, that the estimates of this equation and its statistical indicators were calculated at the level of the research sample of (155), which showed a simple linear regression model of the effect of strategic theory on health literacy.

As it appears from the results of Table (31) that the value of the constant ( $B_0$ ) coefficient is (2.213), which means that there is an existence of health literacy of (2.213) when the value of the strategic theory is equal to (zero).

**Table 3. Correlation Coefficients Between Strategic Theory and Health Literacy**

prototype		Non-standard transactions		Standard transactions	T Calculated	Level of morale
		coefficient $B_0$	Standard error	bI		
1	Hard	2.213	0.206		10.719	.000
	Strategic Theory	0.245	0.060	0.495	7.043	.000

According to Table (6), the value of (R) has reached (.4950). This demonstrates that the strategic theory explains for a component of the change in health literacy (0.245) and that the remaining interpretation explains for a portion of the change in health literacy (0.755). It is for other factors that we propose to study in future studies.

The calculated value of (F) was high, as it amounted to (49.603) compared to its tabular value, which amounted to (3.915). On this basis, the first central hypothesis is accepted.

**Table 4. Contrast Analysis (ANOVA) of the relationship between strategic theory and health literacy**

prototype	Link R	R2 Rate	Standard error	Statistical change			
				R2	F	df	Level of morale
Strategic Theory	.4950	0.240	0.418	0.245	49.603	155	.000

**Conclusions**

There is a clear and positive difference for the research sample in the Najaf Health Department in the availability of strategic theory variables in it, but not at the required level. The reason for this is attributed to the fact that the Najaf Health Department is subject to the Iraqi Ministry of Health in its central decisions. The results of the research show that the strategic theoretical variable has a good effect on health literacy in the health institution, and then it is possible to know the determinants of the health institution’s success in managing health literacy efforts. Strategic theory helps to open the mind to all possibilities and influencing forces, and that it may

serve to explain or predict multiple events of interest. It prompts us to consider the costs and risks of our decisions and weigh the outcomes of those decisions. Strategic theory provides strategy-makers with tools to help guide and shape their strategies, and establish a systematic basis for the disciplined thinking process in strategy development. The strategic approach assists in overcoming uncertainties and uncertainties. Public organizations are most needed when planning to manage health literacy efforts and facing risks, disasters, and crises, as is the case in the spread of epidemics, by developing emergency strategies using scenarios, for example. The process of health literacy in the community is of the utmost necessity, as this

concept has great importance in ensuring the health of its members. In return, it works to reduce individuals' review of health institutions and then reduce them and save money for health care. The health institution should take advantage of the dimensions of strategic theory and its hypotheses in developing programs and plans, such as caring for resources, harnessing capabilities, investing knowledge, and creating multiple options to face emergencies and continuous changes. It should also be urged to conduct constant field surveys necessary for collecting data and information required on health phenomena and forecasting them and developing appropriate strategies to serve the directions of the health institution.

**Source of Funding:** Self-funding

**Conflict of Interest:** The authors declare no conflict of interest, financial or otherwise.

**Ethical Clearance:** Taken from University of Kufa Committee

### References

- Ethiraj SK, Gambardella A, Helfat CE. Theory in strategic management. Wiley Online Library; 2018.
- Augier M, Teece DJ. The Palgrave encyclopedia of strategic management: Springer; 2016.
- Osinga FP. Science, strategy and war: The strategic theory of John Boyd: Routledge; 2007.
- Smith M, Stone J. Explaining strategic theory. *Infinity Journal*. 2011;4:27-30.
- Smith M. Strategic Theory: What it is and just as importantly, what it isn't. *E-International Relations*. 2011;28.
- Laksmana EA. Strategic Theory, Clausewitz, and the Indonesian Military. *The Indonesian Quarterly*. 2008;36(1):86-106.
- Heuser B. The evolution of strategy: thinking war from antiquity to the present: Cambridge University Press; 2010.
- Samerski S. Health literacy as a social practice: Social and empirical dimensions of knowledge on health and healthcare. *Social Science & Medicine*. 2019;226:1-8.
- Prince M. Health Literacy and Case Management. *Professional case management*. 2020;25(2):92-3.
- Wittink H, Oosterhaven J. Patient education and health literacy. *Musculoskeletal Science and Practice*. 2018;38:120-7.
- Gustafsdottir SS, Sigurdardottir AK, Arnadottir SA, Heimisson GT, Mårtensson L. Translation and cross-cultural adaptation of the European Health Literacy Survey Questionnaire, HLS-EU-Q16: the Icelandic version. *BMC public health*. 2020;20(1):1-11.
- Seth A, Thomas H. Theories of the firm: Implications for strategy research. *Journal of Management Studies*. 1994;31(2):165-92.
- Foss NJ, Roemer E. Real options, resources and transaction costs: advancing the strategic theory of the firm. *International Journal of Strategic Change Management*. 2010;2(1):73-92.
- Storchevoi MA. The theory of the firm and strategic management. *Problems of Economic Transition*. 2015;57(9):1-19.
- Hannah DP, Tidhar R, Eisenhardt KM. Analytic models in strategy, organizations, and management research: A guide for consumers. *Strategic Management Journal*. 2021;42(2):329-60.
- Scherpereel CM. The option-creating institution: a real options perspective on economic organization. *Strategic Management Journal*. 2008;29(5):455-70.
- Driouchi T, Bennett DJ. Real options in management and organizational strategy: A review of decision-making and performance implications. *International Journal of Management Reviews*. 2012;14(1):39-62.
- Kendir C, Breton E. Health literacy: from a property of individuals to one of communities. *International journal of environmental research*

- and public health. 2020;17(5):1601.
19. Griech SF, Skrzat JM. Roles for Physical Therapists to Address Health Literacy as a Social Determinant of Cardiovascular Disease: A Clinical Perspective. *Cardiopulmonary Physical Therapy Journal*. 2020;31(1):29-34.