



## Health Literacy among the Adolescent Girls: A Socio-Economic Analysis of the Adolescent Girls of Darrang District, Assam

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Article History	Abstract
Received: 06 June 2023 Revised: 05 Sept 2023 Accepted: 02 Nov 2023	<p><i>In the present century the most needed quality that every society should have is the "Health Literacy". In this century where we are facing pandemics, where people are witnessing or to be specific suffering from various savage troubles people are really required to be conscious about their health. We have chosen to study this problem more importantly from the perspective of adolescent girls as adolescence is the most critical age of development full of multifaceted problems and challenges. They not only experience rapid developmental changes but also face various psycho-social trauma and anxiety. We have chosen Darrang district as our subject area to study. We have sufficiently made investigation on the issue to grasp the real scenario. This paper will surely throw light on the rate of health consciousness or literacy among the adolescent girls of this specific area. If there is any inefficiency then through this paper, we will make effort to provide probable solution to it. We have properly studied the adolescent girls between the age of 12 to 18 through primary and secondary sources. We have used survey as well as personal interview among the subject to find out the outcome.</i></p>
CC License CC-BY-NC-SA 4.0	<b>Keywords:</b> Adolescent, Health Literacy, Education, Hygiene, Menstruation

### 1. Introduction

Health literacy is the basic requisite of every civilized human being. It is the ability to understand, grasp or convey basic health knowledge and information through which one can take proper decision on any health issues. Lower health literacy is equivalent to lower hygiene and higher illness. It creates various serious disorders among people like diabetes, kidney problem, pressure, AIDS and many more. Health literacy is the chief factor of disparities among people, nation and societies. A strong nation must have health literate generations. Otherwise, it will lose itself in the loop of ignorance. This is a fundamental quality that every school and every family should cultivate in their children. If the children are not aware of health, if they are lacking health information and properties then the society which is going to be led by them in future will be fragile and baseless. That's why it is not only important but also need of the hour to educate the children with proper health education. We cannot guarantee in future that we'll not face one more tragic pandemic like COVID. For a better future and better us it is very much essential to have health consciousness and literacy among each and every youth. That's why we have decided to study this problem to find out the rate of health literacy and provide probable solution to it.

#### 1. Objective of The Study:

This paper aims at achieving the following objectives: -

- To find out the rate of health literacy among the adolescent girls of Darrang district.
- To find the inefficiency if there is any.
- To provide probable solution if there is any lacking.

### 2. Materials And Methods

During the study both primary and secondary sources were used. For the primary data we have conducted survey and personal interview among the adolescent girls of the said district. Survey was conducted through distributing questionnaire among the subject. We made a survey of 320 randomly selected girls who were basically studying in schools. Along with survey a personal interview was also

conducted by us from 30 randomly selected girls. Moreover, we have collected secondary data from census 2011, District Administration Darrang, Joint Directorate Office Darrang and from print media like- newspaper, magazine and researches.

### Background of The Study:

Health is the prime asset of individual. If it is lost then whole life will be futile. Only in a healthy body a healthy mind and thoughts can be formed. Health is a very sensitive concern of every nation and society. With a team of healthy citizen, a nation can progress. So, we have prepared to focus on this crucial area of study. A pre-condition of good health is sufficient knowledge to preserve and secure it. So basically, a very rudimentary attribute of every human being is health literacy. Health literacy as defined by various sources and scholars summarize that it is the degree to which individual have the ability to find, grasp, understand and apply the health-related information and to take appropriate decision on its own.

No doubt health literacy is important for everyone regardless of race, caste, creed, sex and nationality. But also, it is acceptable for all that health literacy is most crucial fundamental need for those who are growing, who are going through transitional phase i.e., the adolescents. It starts from puberty to adulthood. Originally the Latin term of Adolescence means “to mature”. During adolescence people experience rapid and drastic psychological, social, physical developmental changes. These changes are not always satisfactory. People get confused, anxious and traumatic with the developments. They feel being alienated from all as they grow feeling of shyness and egoistic nature at the same time. They feel inferior sometimes. These external and internal changes in them bring to them lots of problems relating to their health. So, in this phase they mostly need basic health information to deal with the health issues of their own which cannot be shared with anyone. Moreover, we can observe in Indian society that after puberty girls have to face various restrictions and limitations both from family and society. They are given boundaries. Traditions, prejudices and dogmatism of our society cut down the wings of girls after puberty. They are not allowed to be friends with boys; they are not allowed to stay out. In fact, some girls also face with drop down from schools. So, adolescence seems scarier for girls then the boys. Because they are deprived of their early unbound life. Research shows that because of these factors adolescent girls face more traumas, depressions and pressure. This study shows how there is a huge gap between the suicidal rate of adolescent girls and boys. In fact, suicide is the third leading cause of death among young adult worldwide. In India, people aged 15 to 24 years have the highest suicide rate. The following table will give the exact information: -

Suicidal Rate (per 100000)			
Youth Female	General Indian Population	Youth Male	General Indian Population
80	10.4	34	10.4

**Figure 1:** Suicidal rate of youth female and male compared to general Indian population

The figure shows the disparity between suicidal rate between general Indian population and youth of India. It also clearly shows how much differences are there between male and female. The risk factors responsible for the high suicidal rate of adolescent female are developmental changes that lead to greater impulsivity, psychological changes and biological changes. Research also shows that during high school level i.e., during adolescence suicidal ideation (suicidal thoughts) is 6-22% and attempt is 0.39-8%.

This paper has studied the adolescent girls of Darrang district. It is an administrative district situated in lower Assam, India. It has a population of 928,500 (according to 2011 census) with 63.08 % literacy rate. The following map will help in locating the district easily.



**Figure 2:** - location of Darrang in Assam

### 3. Results and Discussion

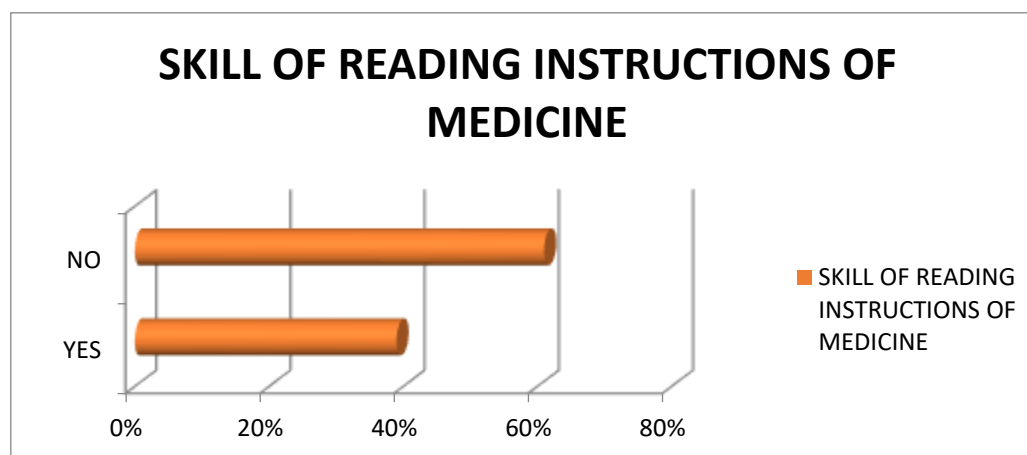
The questionnaire which was used in survey comprised of 30 questions. As health literacy conveys the idea of understanding, knowing and applying health information properly and decision-making regarding health that's why in both survey and interview we have focused on 11 specific criteria to find out the health literacy rate among the subjects. The focused area and its sub elements are as follows: -

Focused Area	Sub-elements
1. Skill of reading instructions of medicine	-checking expiry date of medicine before use -reading "how to use" of medicine before use
2. Openness in health issues	-Sharing of health issues with family members, friends
3. Hygiene during menstruation	-use of sanitary pad during menstruation - frequency of changing pads and underclothing during menstruation - cleanliness during menstruation
4. Nutritious Food	-concept of nutritious food -presence of nutritious food in daily meal
5. Participation in Physical Activities	-indulgence in physical activities like running, swimming and other sports
6. Knowledge of Health Scheme	-beneficiary of state and central government's health schemes and facilities
7. Health Insurance	-Health insurance of any family members
8. Drugs	-Use of drugs -Awareness of drug uses
9. Self-medication	-Use of self-medication during mild disease -Believe in local traditional treatment
10. First-Aid Box	-Availability of first-aid box in home
11. Health check-ups	-Frequency of health check-ups

**Figure 3: -** Table of focused area and its sub-elements during survey and interview

The questionnaire and interview both had open and close ended questions. Open ended questions helped us in understanding the backgrounds of the subjects and also knowing the factors responsible for their responses.

The research conducted among the adolescent's girls of Darrang district is hoped to be a successful one in finding the true scenario and also detecting the sources of lacking and ineffectiveness. The responses received against the close ended questions are analyzed through two sub-headings i.e. yes or no. yes will indicate the positive responses while the No will indicate negative responses. Positive responses will work for health literacy and negative responses are against health literacy. The responses are shown through the following bar diagrams: -



**Figure: 4**

This diagram shows the percentage of how many adolescent girls read the instruction. According to the analysis only 39% girls check the expiry date, manufacturing date and using methods before using any medicine. While 61% don't read those instructions. Reading medicine instruction is a basic sign of health literacy. The huge disparity shows the low rate of human literacy in the 1<sup>st</sup> focused topic of our

survey and interview. Analysis regarding the next criteria or “openness in health issues” is shown as below:-

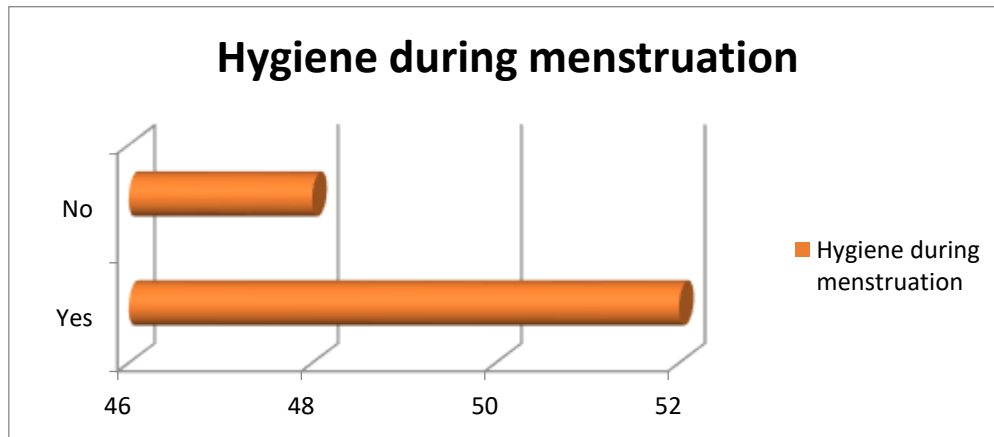


Figure: 5

In the second criteria we have included openness in health issues. It had questions like do they share any kind of health issues with their family members or friends openly. By health issues we meant some sensitive issues (as people treat these problems as sensitive) like – delay in menstruation, pain during menstruation, Leucorrhea (also known as white discharge) etc. the responses were significant as 60% girls said that they don’t discuss these issues with anyone because they don’t feel comfortable and even family members don’t come forward to deal with these problems. Only 40% of girls said in positive. They acclaimed that they can discuss these issues with mothers or other female members of their family.

The third focused criterion was “Hygiene during menstruation”. The data are analyzed through the following diagram:

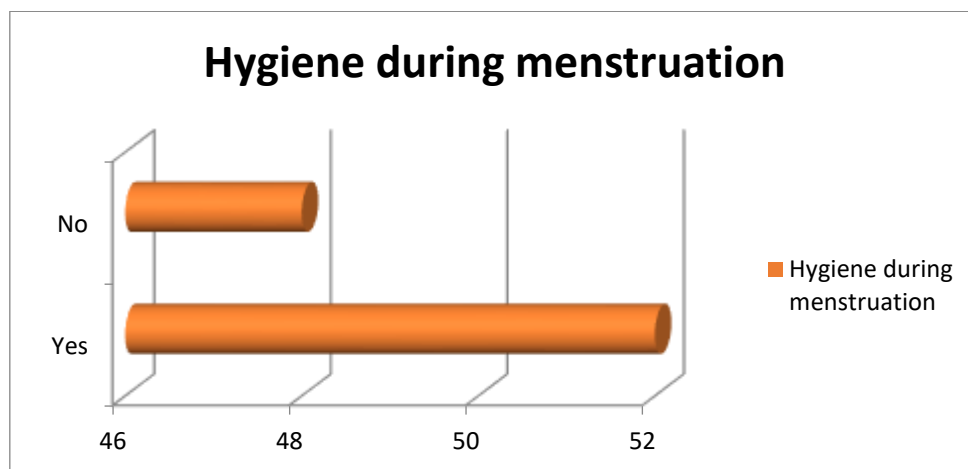
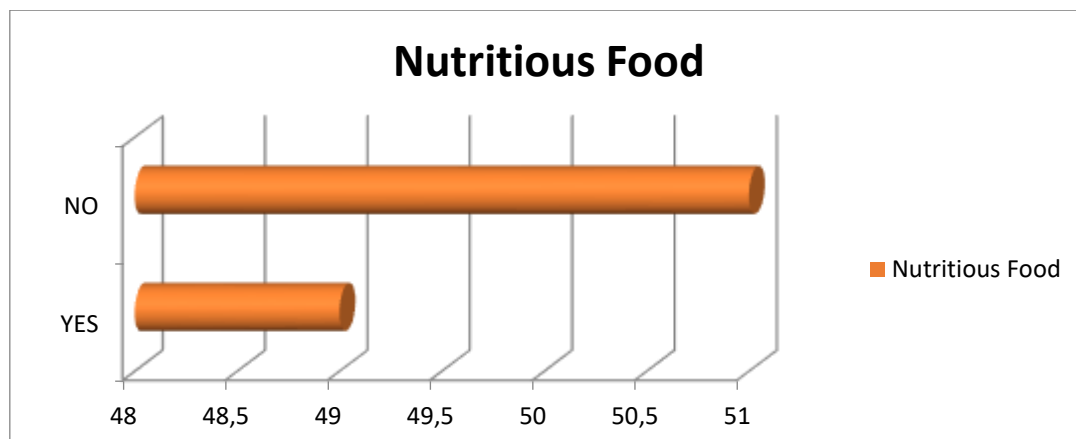


Figure: 6

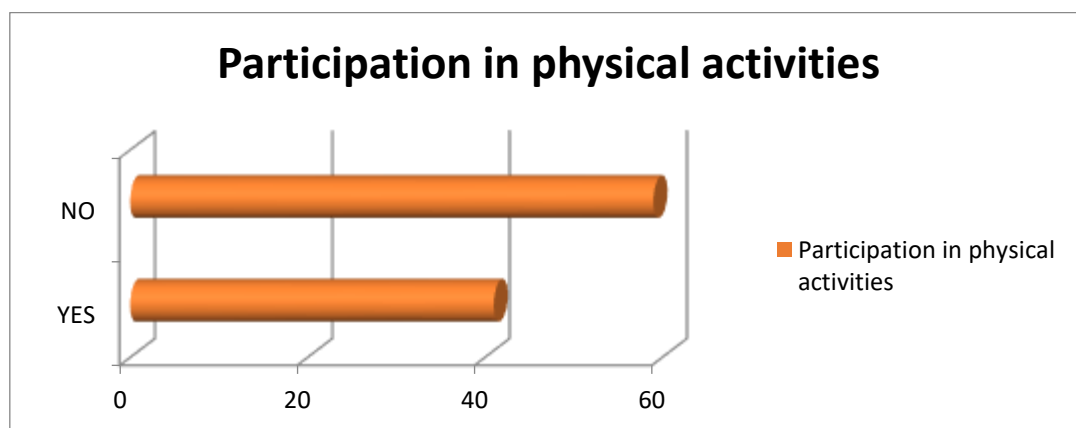
In these criteria we included some important issues related with menstrual hygiene. Questions like use of sanitary pads during menstruation; cleanliness and frequency of change of underclothes and pads during menstruation were asked to the subjects. But surprisingly 48% of girls answered that they don’t use sanitary pad. In fact, they don’t even know the basic cleanliness practice during menstruation. The fourth criterion was about “Nutritious Food”. The positive and negative responses are provided below:



**Figure: 7**

49% of adolescent girls could give positive responses regarding the basic meaning of nutritious food and they mentioned the names of nutritious food present in their daily meal. While the remaining 51% girls are not aware of what is nutritious food and also there is very rare presence of nutritious food in their meal. The open-ended question answers also revealed the cause of this incapability.

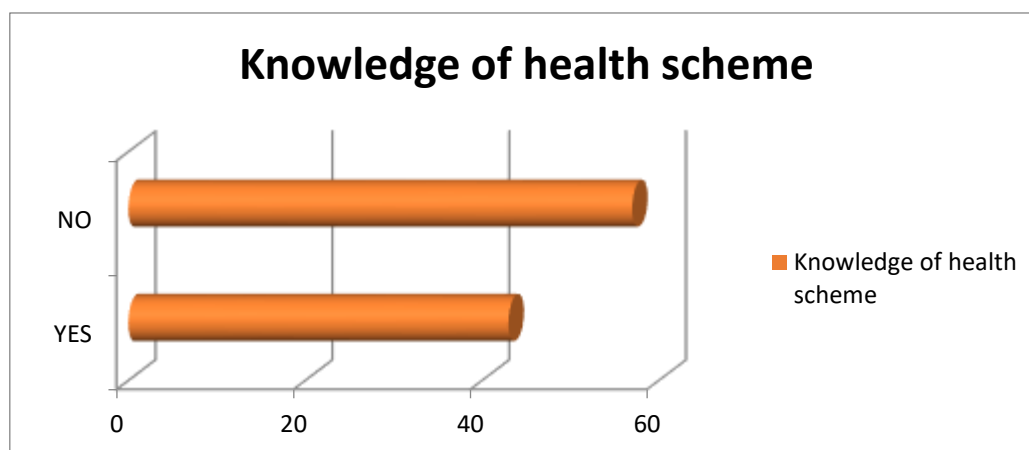
The fifth point of focused topic was “Participation in Physical Activities”. The data recorded against the topic are shown below: -



**Figure: 8**

Physical activities keep the body energetic, active, fit and free from indolence. While we surveyed this topic, we got to know that very few, only 41% girls participate in physical activities or sports etc. Majority of them aren’t allowed to engage themselves in physical activities. They don’t get opportunities to participate in physical activities which are a negative sign of health literacy.

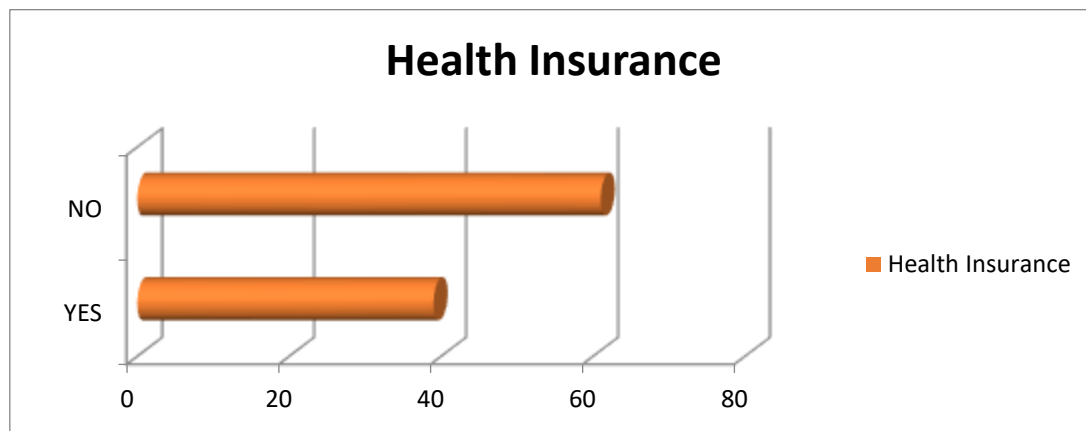
The next criteria are “knowledge and beneficiary of Health Scheme”. The data found from the survey and interview is produced below: -



**Figure: 9**

Indian government is quite affectionate towards its citizens. Constitution has devoted many provisions to the wellbeing of its citizens. All state governments are also taking favorable steps towards health and hygiene of its people. So, in this criterion we included questions which can address the basic awareness of adolescent girls regarding central and state governments schemes related to health. Unfortunately, 57% girls are not aware of it. Only 43% girls know about the schemes.

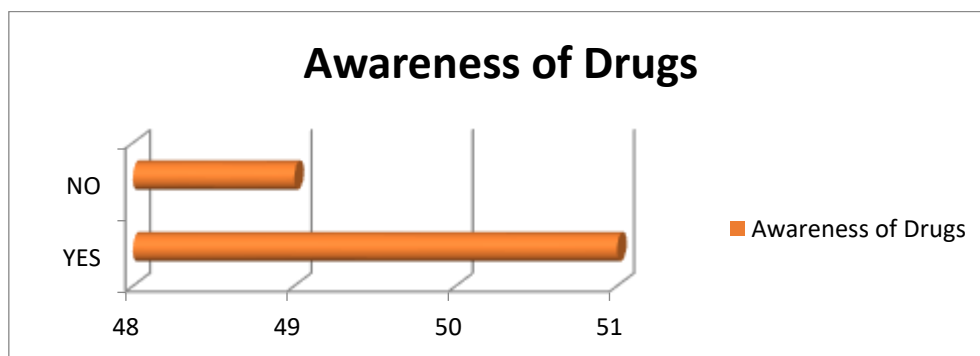
Criterion 7 is about “Health Insurance”. Responses on this criterion are shown as below: -



**Figure: 10**

Health Insurance is needed to deal with any kind of health problems. It is an essential requirement in today’s fast-paced lifestyle. In our questionnaire we asked questions that, is there any member of the subject’s family has health insurance and do they know what health insurance is. In the responses 61% responded negatively that means they don’t know about health insurance and none of their family members has health insurance. Only 39% of them know about it and they have members in their family who have insurance.

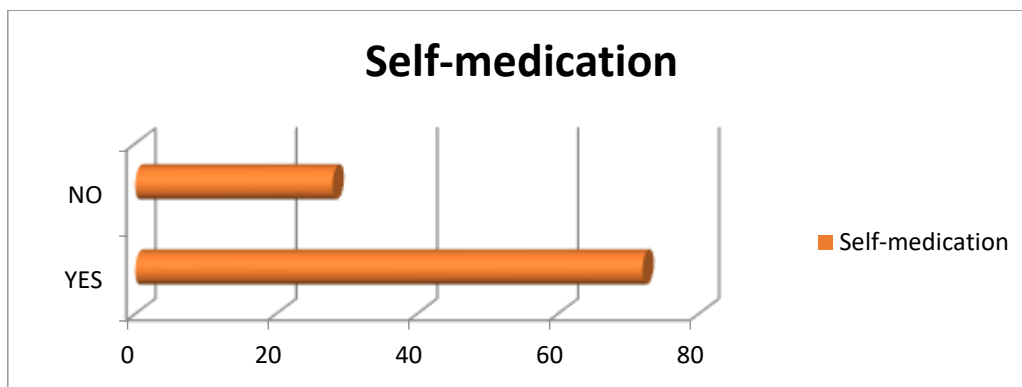
The eighth criterion is most important as it is about “Drugs” the main evil of present society. Data found on this topic are conveyed below: -



**Figure: 11**

Drugs make people illogical, depressed, and anxious. Drugs not only affect an individual, it destroys the family, society and as a whole the whole nation suffers from it. To lessen the effect of drugs awareness must be increased among the young generations. This topic was covered in the survey as it comes under the very basic cognition of health literacy. Though the number of positive responses is not very satisfactory, but 51% girls told that they know what drugs are. They mentioned about names of drugs also. The remaining 49% showed inadequacy regarding it.

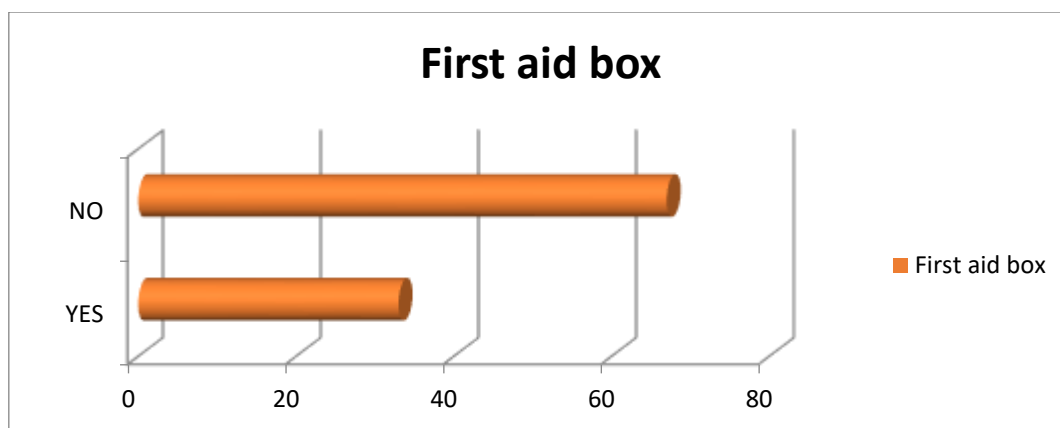
The next criterion is “Self-medication”. Information is shown below through diagram: -



**Figure: 12**

Self-medication is when a person treats his illness by own without consulting any physician or doctor. It is proved as very dangerous as it may even take life of someone. Most of the time people prefer to use his own experience to treat a disease. For example, during headache or mild fever people can take any local medicine or can use any other practice that they think as appropriate. But it is so dangerous and it has negative aspect on health. This kind of unscientific practice shows the little amount of health literacy. Most surprisingly 72% girls, in their families use self-medication during mild illness. Only 28% told that they don't use self-medication.

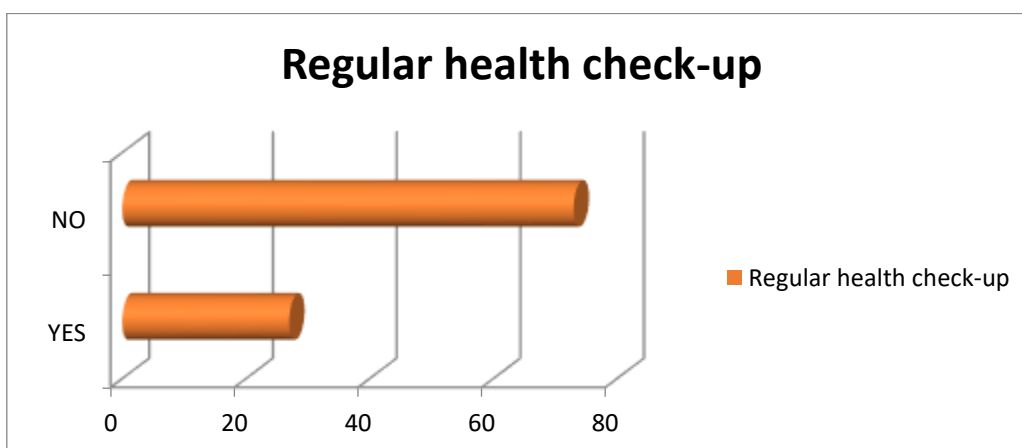
The next criteria are about "First-aid Box". Information recorded on it is as follows: -



**Figure: 13**

For any kind of immediate medical occurrences, a first aid box is essential in each household. In our study we got to know that 33% girls, in their house have first aid box while 67% are ignorant of it. Availability of first aid box is basic demand of health literacy. Majority of subjects are ignorant of it. It shows the poverty of our society in health literacy.

The last and one of the most important criteria of our study is regular body or health check-ups. The data are shown as below in the diagram: -



**Figure: 14**



There is a common assumption in the society that regular health checkup is not needed until the body is fine. But it is not true. A regular health checkup helps in detecting any kind of problems early so that necessary steps can be taken to prevent it from becoming more serious. Indian society is still not very progressive regarding it. In our study also we found that 73% of adolescent's girls don't prefer to do regular health check as well as their family also don't do this. Only a rare number of people i.e., 27% girls told that they go for frequent health checkup.

### Causes behind the Inadequacies:

The literacy level and socio-economic thinking and capacity of a population depend on the socio-economic, demographic, educative value and standards of the society that they do belong from. Darrang district, the subject district we have chosen for study is a mostly rural area district with about 85% people engaging directly or indirectly in agriculture. It's a basically agrarian society. There is a huge socio-economic disparity across socio-religious communities of the district. In terms of income, education and health the district is in the lower end with 63.08% literacy rate.

During the study we could detect the causes behind the inefficiencies regarding health literacy. The following causes are found responsible: -

- i. **Low per capita income:** main source of income in the district is agriculture. The per capita income is very low. It is Rs 59,714. Because of lower income their socio-economic status is poorer and they cannot get the minimum facilities relating to health.
- ii. **Less involvement of school and colleges:** progress of a society is dependent on the involvement of the educational institutions of that society. If schools and colleges perform low then it cannot construct a human resource and a strong society. Schools and colleges have very little involvement in providing health education to its students in the area. There is not any specific content on health in their courses. It is one of the major liable factors behind low health literacy.
- iii. **Less proficiency in English language:** while we inquired about the skill of reading instructions of medicines before using it found that because of limited knowledge of English people cannot understand the instructions and they don't feel any want of reading it.
- iv. **Inaccessibility to health facilities:** Adolescent girls also can't be adequately health literate because of unavailability of basic health facility and infrastructure in their locality. Hospitals and health centers are mostly situated in the city area and it cannot reach the remote areas.
- v. **Lack of social awareness:** There is very few social awareness programmes in the districts. Especially the rural areas are deprived of it. Adolescent girls were asked about any kind of health camps that they have attended. They replied in negative. They haven't participated in any of these. There are no blood donation camps, social awareness camps on AIDS, drugs, unprotected sex etc. they don't have even the minimum knowledge on it.

### Probable Measures:

Health literacy is the cardinal factor to make a society strong and progressive. After the study a very low performance of the adolescent girls regarding health literacy is detected. This inadequacy is growing problem of the society. Being ignorant about basic health information and ethics is a disease of society in itself. The probable steps that can be taken to address it are given below: -

- i. **Social and family awareness:** family is the ground where society and nation grow. If family cultivates good qualities, then the society will automatically will be enriched by all good qualities. That's why the society and family should be effortful regarding health literacy.
- ii. **Proper Education:** School is the first stepping stone in the life of child. Schools and colleges must include programmed on its curriculum. Formal education will be proved helpful in it.
- iii. **Guidance and counseling:** guidance and counseling can lead the girls in the true path. It is an important educational tool in shaping students' orientation towards health. It can plant health ethics and knowledge on them. It also makes teaching and learning effective one.
- iv. **Development of health infrastructure:** health infrastructure and facilities should be made available to all the people. The remote areas should also be connected. Good infrastructural facility can provide people good health and opportunities.



- v. **Role of NGOs:** NGOs are called lifeblood of present society. It works on all social issues, environmental issues. In Darrang there is rich variety of NGOs working in every sector of society. NGOs are public friendly as it is composed out of the common people to make a bridge between the government and people. NGOs should take initiatives in the field of health literacy also. It will be quite effective if NGOs take the leading role.
- vi. **Role of Government:** After the NGOs and society, state and central government should take initiatives to address this problem. It can take schemes, training programme, orientation program on it by resource person. It will make people understanding and conveying the meaning of health literacy.

#### **4. Conclusion**

Health literacy can ensure health equity in society. It is the Pre-condition of every strong civilization. In this paper we have tried the best to reflect the real scenario of health literacy among the adolescent girls of Darrang district. Pathetically the result was very poor signifying the lower rate of health literacy of the people. If the youth cannot be made aware of it then the whole society will be suffering from it in future. Especially after break down of pandemic like COVID 19 in the recent years made it more urgent to study health from the very close. To save and protect everyone from the probable coming crisis health literacy is becoming vital for everyone. Being a rural district Darrang has slow rate of urbanization. Facilities and infrastructures are also not available in the district. It has made the people ignorant and less efficient in health field. To reduce this difficulty society, government, NGOs all should be alert and vigorous on its workings.

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