DETERMINANTS OF HEALTH LITERACY STATUS AMONG ETHNIC IDENTITIES IN UPPER LAYMYO RIVER, MRAUK U TOWNSHIP, RAKHINE STATE

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ABSTRACT

Health literacy is the capacity to obtain, comprehend, evaluate, and use health information for medical treatment, illness prevention, and health promotion. Ethnic minority populations often have distinctive cultural practices, beliefs, and languages, and the majority of them live in challenging geographic locations.

A cross-sectional descriptive study was conducted among 375 respondents of four ethnic groups (Rakhine, Daingnet, Maramagyi and Chin) in Upper Laymyo area, Mrauk U, Rakhine State in August to December 2023, to assess the health literacy status and its determinants among ethnic groups. Face to face interview were conducted using HLS-EU Q-47, validated pretested structured questionnaires. Multivariable binary logistic regression was used to determine the determinants of health literacy status.

Of 375 respondents, only (5.1%) of respondents had sufficient health literacy and most (94.9%) had limited health literacy levels. About (9.3%) of respondents had sufficient health literacy in health care domain, (7.7%) in disease prevention domain and only (2.9%) had sufficient level in health promotion domain. The respondents who were single/divorced/widowed had 4.2 times more sufficient health literacy level [AOR= 4.23, (95%CI= 1.191, 15.040), p= 0.026] than those of married respondents. The respondents who asked about their health during visit to healthcare providers had 4.14 times [AOR= 4.14, (95%CI= 1.013, 16.946), p= 0.048], those who searched health information by attending health talk had 3.3 times [AOR= 3.37, (95%CI= 1.039, 10.945), p=0.043] and those who had searched the health information through internet had 5.7 times more sufficient health literacy level than those of never searched through internet [AOR= 5.76, (95%CI= 1.850, 17.975), p= 0.033] than their counterparts. The respondents who were Okayed to pay medical consultation fees had 10.5 times more sufficient HL level and those who were Okayed for transportation to medical doctor had 3.5 times more sufficient HL level than their counterparts.

Most of the ethnic group in upper Laymyo area had limited health literacy and its determinants were marital status, asking about their health during visit to health care providers, payment for consultation, transportation, searching the health information through internet and attending health talk in this study. Therefore, more health promotion activities and health education programs should be emphasized in this area to improve the health literacy level.