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Education Level as a Predictor for Health Literacy Levels in a Rural Community Health Centre A Cross-Sectional Study

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19. STRACT
Health literacy is an important determinant in individual health and public health. However, evidence suggests that there are still disparities in health literacy levels between different socio-economic and education backgrounds. This study aims to look at level of education as a predictor for achieving a certain health literacy level. This study used a cross-sectional design. The study was conducted in Ngempit Village, in the district of Pasuruan, East Java. The participants were registered patients at the Ngempit Community Health Centre (PUSKESMAS). Data were collected through interviews and surveys utilising translated and adapted version of Health Literacy Survey Europe with ten short questionnaires (HLS-EU-SQ10-IDN). Spearman's correlation was used to see the correlation between variables and a causal model logistic regression was built to estimate the association of education on health literacy after controlling for confounders. A total of 60 participants were included in the study. Having only achieved primary education is associated with 5 times the odds (95% CI: 0.31 - 92.2, p:0.253) of problematic or inadequate health literacy levels compared to participants achieving at least high-school education.

Keywords: Health Literacy, Community, Health Centre, Indonesia.

1. INTRODUCTION

¹⁰Health literacy (HL) plays a pivotal role in determining health status, as well as one of the main determinants in public health [1]. However, the gap in HL between rural and urban populations remains an issue [2]. The definition of HL is the cognitive and social skills that determine the motivation and ability of individuals to gain access to health, understand, and use information in ways that promote and maintain good health [1].

Initially, HL focus on access to health care and was in no way related to the patient's ability to understand medical words or terms. However, this concept is developing increasingly complex and interrelated between one concept with another concept. At present, HL includes knowledge about medical information, the ability to communicate with health workers, and

disease, and lacks independence in the treatment of the disease [3,4].

Although an important determinant in public health, low level of community HL remains apparent. In the United States, nearly half of the adult population has difficulty acting on health information [5], and in Canada, the desired HL level is estimated at 48%, Australia with 30% [6][7].

For the Southeast Asian region, HL is still a challenge. Southeast Asia, a region consisting of several developing countries, with high population densities and with a very diverse cultural and ethnic mix, still has many problems with health and economic development indices. Difficulties that are often encountered by countries in Southeast Asia are providing optimal standardised health services, even more so in this population still found low

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