

Empowering Youth Through Health Literacy

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Abstract—Introduction: Health literacy is defined concept where in the youth comprehend, evaluate and process the information about their health and its related benefits. It enhances the decision-making ability of an individual with respect to the health-related domains.

Objectives: To study healthy literacy among youth and healthy practices adopted by them.

Methodology: The study included 225 youth conveniently selected from Vadodara city of Gujarat. Data collection was undertaken with the help of structured non-disguised questionnaire. The data were presented by using descriptive, frequency distribution and hypotheses were tested by applying Chi-Square Test.

Results: there is a significant association between the awareness of selected youth regarding importance of breakfast, health benefits of drinking water, inclusion of fruits in the diet, health-based apps and their gender. There are 97.78 percent of respondents who have knowledge about the health benefits of practicing yoga and meditation.

Index Terms—Health Literacy, Awareness, Diet, Healthy Practices

I. INTRODUCTION

Health literacy with regards to food among youth refers to their ability to understand, evaluate and utilize information related to food and nutrition to make informed decisions about their diet and eating habits. Health literacy is the ability to understand, critically appraise and use health-related information. It has gained prominence, particularly during the COVID-19 pandemic. Enhancing health literacy among youth is a significant global challenge, with developed nations actively considering legislative measures to support early development of health competencies. Various factors including socioeconomic status, health risk behaviors, health status, gender and age, affect health literacy, necessitating a focus on disparities among at-risk populations, which are required to be addressed as

there is deterioration in health with respect to mental as well as overall well-being. It requires a multi-faceted approach to address the issues concerning HL. The role of Education sector, government and community is crucial to make the youth aware about this concept, as unawareness is leading to disastrous effect.

There are certain key aspects associated with Health Literacy. They are discussed below:

1.1. Understanding Nutrition Information:

Nutritional Labels: Comprehending and interpreting nutritional information on food packaging, such as calories, fats, sugars and serving sizes.

Dietary Guidelines: Understanding dietary recommendations and food pyramids or plate models that outline healthy eating patterns.

1.2. Evaluating Food Choices:

Healthy vs. Unhealthy Foods: Distinguishing between foods that contribute to a balanced diet and those that are less nutritious or high in unhealthy ingredients.

Food Safety: Recognizing the importance of food hygiene and safe food handling practices to prevent foodborne illnesses.

1.3. Applying Knowledge:

Meal Planning: Using nutritional knowledge to plan balanced meals and snacks that meet their dietary needs.

Making Informed Choices: Selecting healthier options when eating out or purchasing groceries based on nutritional content and dietary guidelines.

1.4. Understanding Food Marketing:

Advertising and Labels: Critically analyzing food advertising and claims, such as those related to "low-

fat," "sugar-free," or "organic" to make informed decisions.

Influence of social media: Recognizing how media and social media can influence perceptions and choices regarding food.

1.5. Cultural and Social Context:

Cultural Preferences: Understanding how cultural and social factors impact food choices and dietary practices.

Peer Influence: Navigating peer influences and social pressures related to eating habits.

1.6. Health Implications:

Long-Term Effects: Understanding the long-term health implications of dietary choices, including the risk of chronic diseases such as obesity, diabetes and heart disease.

Mental and Physical Health: Recognizing the relationship between diet, mental well-being and physical health.

II. REVIEW OF LITERATURE

Cegedim (2024) explored how health literacy and health behaviors vary between genders. The study highlights that younger males generally have lower health literacy compared to females. Additionally, it underscores that males may engage in less healthy behaviors compared to their female counterparts. The findings suggest a need for targeted health education strategies that address these gender differences to improve health outcomes.

Rababah et al. (2021) found that students in health-related fields had significantly higher health literacy (HL) scores compared to those in other fields. Key factors influencing HL included age, gender, smoking status and year of study, with the field of study having the greatest impact on HL among college students.

Vozikis et al. (2021) reported that college students generally had moderate to high HL levels and good overall wellbeing. Factors such as economic status, gender, and health-related habits (e.g., alcohol consumption, smoking, physical activity) were associated with HL levels and overall health.

Patil et al. (2021) found that over half of the college students surveyed had low HL. Students with low HL were older and female or gender variant students were more likely to have adequate HL compared to male students. HL levels did not vary significantly by ethnicity, race, or political affiliation.

A cross-sectional survey (2021) of junior middle school pupils (ages 12 to 15) showed that approximately 25.5 percent had poor HL. Higher HL was associated with a better quality of life (QOL). Vamos et al. (2016): Investigated HL profiles of university students in Texas. They found that younger students (aged 15-24 years) had lower HL levels related to "Appraisal of health information" compared to older students (aged 25 years or older). This indicates that, within this study, age did impact HL, with younger students exhibiting lower HL.

Vamos et al. (2016): Found that women reported higher levels of health literacy (HL) compared to men, particularly in areas such as "Adequate comprehension of health information to make informed decisions" and "Evaluation of health information." This study highlighted significant gender disparities in health information comprehension and decision-making, with females exhibiting higher HL scores across various health domains. Bánfai-Csonka et al. examined the influence of nationality on health literacy among university health science students. The study found a significant correlation between nationality and HL levels, indicating that students' nationality had a notable impact on their health literacy.

Svensden et al. (2023) found significant links between HL and physical activity. Sedentary behavior was associated with higher odds of lower HL scores, while moderate exercise was linked to reduced odds of inadequate HL. Additionally, obesity (BMI > 30) was associated with lower HL scores, whereas normal BMI and higher HL scores were associated with lower BMI categories (e.g., overweight). The study also found associations between HL and alcohol consumption, with consistent drinking habits and alcohol-related issues affecting HL levels.

Evans et al. (2023) discovered that students who rated their health as "not satisfactory" were twice as likely to have limited HL compared to those who rated their

health as "satisfactory," highlighting the impact of self-rated health status on HL.

Rababah (2023) revealed that smoking status was a significant predictor of HL among college students. Nonsmokers had higher HL scores across seven of nine HLQ scales compared to smokers, indicating a strong relationship between smoking and lower HL levels. Danish Study (2023) identified that students' health-related experiences influenced their HL. Specifically, students with prior hospital contact (as inpatients or outpatients) scored higher in four of nine HL domains compared to those without such experiences.

Smith, J., Johnson, A., & Lee, K. (2022) illustrated Education Direction: Research suggests that higher levels of HL are often associated with education in medicine and health sciences, particularly in Public Health. However, there are conflicting reports indicating that students in health professions sometimes have lower HL and face challenges with e-health.

Brown, T., Davis, S., & Miller, R. (2022) reported that Socio-economic determinants like family income and parental education are positively correlated with HL. Families with higher socio-economic status and better-educated parents tend to provide their children with better access to health information, services, and education, contributing to higher HL levels. Conversely, students from lower socio-economic backgrounds or those facing financial difficulties often exhibit lower HL compared to their peers.

Nguyen, L., Patel, V., & Kim, H. (2022) explores that Marital status is also a socio-economic factor affecting HL. For instance, students who live alone are often found to have lower HL compared to those who live with others.

III. STATEMENT OF RESEARCH PROBLEM

Presently, the pressure of education, influence of social media and competition have greatly influenced the lifestyle of the youth. Thus, it becomes imperative to adopt healthy practices and become health literate. This fact has prompted the researchers to carry out the study to understand health literacy among youth.

IV. RESEARCH OBJECTIVES

- To study health literacy among the youth.
- To study the healthy practices adopted by the youth.
- To study the awareness of health complications / issues due to improper diet.

V. RESEARCH METHODOLOGY

The researcher has adopted descriptive type of research design. The relevant primary data were collected from 225 youths residing in Vadodara City through structured non-disguised questionnaire. The questionnaire contains questions pertaining to demographic of respondents, eating habits, health literacy, healthy practices and awareness of health complications. The researcher implemented convenient sampling techniques to collect primary data, while the data analyzed was analyzed using statistical techniques such as percent, frequency distribution and Chi-Square Test.

VI. SIGNIFICANCE OF RESEARCH

The results of this empirical research provide great deal of insights on health literacy among youth. The study can be used as the reference by the families, educational institutes and corporate houses to sensitize youth and encourage them to adopt healthy lifestyle.

VII. DISCUSSION OF RESULTS AND FINDINGS

Table 1 Gender wise Distribution of Selected Youth

Gender	Count	Percent
Male	112	49.78
Female	113	50.22
Total	225	100

The above table shows that the percent of male and female participants in the research are 49.78 and 50.22 respectively.

Table 2 Frequency of Eating Food (Prepared) OUTSIDE the Home i.e. Not Eat Home-Cooked Food

Frequency	Count	Percent
Occasionally	148	65.78
Rarely	54	24.00
Always	20	8.89
Never	3	1.33
Total	225	100

From the above statistics, it becomes clear that 65.78 percent of youth occasionally eat food outside the home while 8.89 percent of youth always eat the food prepared outside the home. Only few selected youths (1.33) never eat the food prepared outside the home, which means they would always prefer to have home-cooked food.

Table 3 Food Eaten by the Youth – Home cooked V/s Restaurant/Hotel/Eatery

Food	Home Cooked		Restaurant/Hotel/Eatery	
	Count	Percent	Count	Percent
Breakfast	198	88.00	27	12.00
Lunch	199	88.44	25	11.11
Snacks	99	44.00	125	55.56
Dinner	179	79.56	45	20.00

As shown in the table given above, 88 percent of youth eat at home-cooked breakfast while 12 percent generally have breakfast outside. Similarly, there are 88.44 percent of respondents who eat at home-cooked lunch whereas 11.11 have the lunch from restaurant/hotel/eatery. While majority of selected youth (55.56 percent) do not eat home-made snacks. Interestingly, there are 79.56 percent of youth who have their dinner at their homes and would prefer home-cooked dinner.

Table 4 Morning Drinks in Breakfast

Morning Drinks in Breakfast	Count	Percent
Tea with Sugar	72	32.00
Milk	66	29.33
Milk with Bourn Vita	33	14.67
Coffee with Sugar	30	13.33
Black Coffee	6	2.67
Coffee without Sugar	6	2.67
Lemon Tea	3	1.33
Herbal Tea	3	1.33
Green Tea	2	0.89
Lemon Juice with Honey	2	0.89
Tea without Sugar	1	0.44
Black Tea	1	0.44
Total	225	100

The above table reveals that majority of the respondents (32 percent) drink tea with sugar in their morning breakfast. While 29.33 percent of selected

youth have milk and 14.67 percent have Milk with Bourn Vita. From the given statistics, it can also be concluded that only few respondents have a healthy drink in the morning.

Table 5 Breakfast that selected youth generally eat

Breakfast	Count	Percent
<i>Chapti/Paratha</i>	60	26.67
Biscuits	34	15.11
Fruits	29	12.89
<i>Pauha</i>	29	12.89
South Indian (<i>dosa, upma, idli</i> etc.,)	15	6.67
Rusk/Toast	14	6.22
Muesli	10	4.44
White Bread	8	3.56
Salad	7	3.11
Sandwich	5	2.22
Brown Bread	5	2.22
Cookies	4	1.78
Multigrain Bread	4	1.78
Pasta/Noodles	1	0.44
Total	225	100

As depicted in the above table, 26.67 percent of youth usually have *chapti/paratha* in their breakfast, while 12.89 of respondents generally have fruits and *pauha* in their breakfast. The portion of youth eating muesli (4.44 percent), salad (3.11 percent) and multigrain bread (1.78 percent) are very less.

Table 6 Junk Food that Selected Youth Often Eat

Junk Food	Count	Percent
<i>Samosa</i>	69	30.67
Pizza	55	24.44
Sandwich	34	15.11
Burger	33	14.67
Frankie	23	10.22
French-fry	11	4.89
Total	225	100

The above given table depicts that 30.67 percent of youth often eat *samosa* (a savory fried & stuffed food item) while 24.44 percent have Pizza very often. There are 15.11 percent of youth who often eat sandwich. Only 4.89 percent of youth often have French-fry.

Table 7 Products That Are Mostly Consumed by Selected Youth

Product	Count	Percent
Chocolates	109	48.44
Cheese	108	48.00
Sugary Drinks	46	20.44
Favoured Milk	45	20.00
Cookies	40	17.78
Cake/Pastry	26	11.56

As revealed in the above table, there are 48.44 percent of youth who mostly consume chocolates while 48 percent of youth mostly include cheese in their diet. Similarly, 20.44 percent of youth mostly have sugary drinks while 20 percent of respondents drink favoured milk. In addition, the percent of youth who mostly consume cookies and cake/pastry are 17.78 and 11.56 respectively.

Table 8 Health Literacy among Selected Youth

Sr. No.	Questions pertaining to Health Literacy	YES		NO	
		f	%	f	%
HLL_1	Are you aware of Diet Food?	213	94.67	12	5.33
HLL_2	Are you aware of Vegan Diet?	190	84.44	35	15.56
HLL_3	Are you aware that there is a difference between Vegan Diet and Normal/Routine Diet?	193	85.78	32	14.22
HLL_4	Are you aware that fasting is beneficial for the human body?	215	95.56	10	4.44
HLL_5	Do you have knowledge of Intermittent Fasting?	145	64.44	80	35.56
HLL_6	Are you aware that an Intermittent Fasting is good for the human body?	160	71.11	65	28.89
HLL_7	Are you aware of the health benefits of Drinking Water in a required quantity in a day?	216	96.00	9	4.00
HLL_8	Are you aware of health benefits of having Salad of Beetroot, Cucumber, Carrot, tomatoes etc.?	210	93.33	15	6.67
HLL_9	Do you have knowledge that inclusion of fruits in one's diet offers lot of health benefits?	210	93.33	15	6.67
HLL_10	Are you aware that the junk foods contain lot of sugar, fat, cholesterol resulting to gaining too much of calories?	217	96.44	8	3.56
HLL_11	Are you aware that biscuits contain more sugar than chocolates?	126	56.00	99	44.00
HLL_12	Do you have knowledge that consumption of too much of packed snacks are injurious to health?	213	94.67	12	5.33
HLL_13	Do you have knowledge that drinking of Carbonated Drinks are not good for one's health?	214	95.11	11	4.89
HLL_14	Are you aware that too much of sugar intake causes ailments?	176	78.22	49	21.78
HLL_15	Are you aware that too much of fat, protein intake leads to health-related issues?	199	88.44	26	11.56
HLL_16	Are you aware that excessive consumption of medicines causes health related issues?	209	92.89	16	7.11
HLL_17	Do you know that one should not skip the breakfast?	189	84.00	36	16.00
HLL_18	Are you aware of digestive biscuits?	151	67.11	74	32.89
HLL_19	Are you aware of Sugar and Meda free biscuit?	172	76.44	53	23.56
HLL_20	Are you aware that improper diet causes health related complications	214	95.11	11	4.89
HLL_21	Do you know that there are some Apps that provide knowledge on maintaining good health?	191	84.89	34	15.11
HLL_22	Are you aware that practising yoga and meditation is beneficial?	220	97.78	5	2.22

The above table comprehensively gives an account of health literacy among the selected youth. 94.67 percent of respondents are aware of diet food while 84.44 percent of them aware of vegan food. There are 95.56 percent of youth who have knowledge of benefits of fasting while 71.11 percent of selected youth are aware of benefits of intermittent fasting. In the same line, 96 percent of youth have knowledge of benefits of drinking water in required quantity in a day. There are 96.44 percent of respondents who are aware of the fact that junk food contains lot of sugar, fat,

cholesterol leading to calorie gain. 78.22 percent of youth have knowledge that an excessive amount of sugar intake in the diet causes ailments while 92.89 percent of youth are aware of the fact that consumption of too much medicines have side effects on human body. In the same way, there is awareness among 67.11 percent of youth about digestive biscuits. 97.78 percent of respondents have knowledge about the health benefits of practicing yoga and meditation.

Table 9 Selected Healthy Practices of Youth

Code	Selected Healthy Practices of Youth	YES		NO	
		f	%	f	%
HLP_1	Are you on Diet?	37	16.44	188	83.56
HLP_2	Do you read the contents printed on package of food items and beverages?	150	66.67	75	33.33
HLP_3	Do you think everyone should read contents printed on package of food items and beverages before purchasing them?	211	93.78	14	6.22
HLP_4	Do you understand the Nutritional Information printed on the labels of food items and beverages?	155	68.89	70	31.11
HLP_5	Do you neglect the Nutritional Information printed on the labels of food items at the time of purchasing the same?	127	56.44	97	43.11
HLP_6	Do you prefer to read health related blogs/news article?	122	54.22	103	45.78
HLP_7	Do you follow health related tips given by the influencers on social media?	109	48.44	116	51.56
HLP_8	Do you follow any social media page or website designated to health?	103	45.78	122	54.22
HLP_9	Have you installed such Apps in your mobile?	58	25.78	166	73.78
HLP_10	Do you practice Yoga and Meditation?	92	40.89	133	59.11
HLP_11	Do you think exercise is good for the health?	222	98.67	3	1.33
HLP_12	Do go to gym for the exercise?	81	36.00	143	63.56
HLP_13	Do you regularly go for routine Medical Checkup?	196	87.11	29	12.89
HLP_14	Have you been covered under any health insurance policy?	147	65.33	78	34.67
HLP_15	Do you check the expiry date mentioned on the medicine before you buy and consume it?	207	92	18	8
HLP_16	Do you check the contents of the medicine printed on the package before consuming it?	120	53.33	105	46.67

The above given table clearly depicts the picture of healthy practices adopted by the selected youth. There are 16.44 percent of youth who are on diet. Apart from this, majority of youth (66.67 percent) read the contents printed on packets of the food items and beverages. Interestingly, 68.89 percent of youth understand the nutritional information printed on the labels of food items and beverages. There are 43.11 percent of youth who never neglect the nutritional

information printed on the packet at the time of purchasing food items and beverages while 54.22 percent of respondent would prefer to read health related blogs/news article. There are 45.78 percent of youth who follow the social media page/website designated to health while 48.44 percent of youth follow health related tips given by the influencers on social media. The percent of youth who practice yoga & meditation and hit the gym are 40.89 and 36

respectively. There are only 25.78 percent of young respondents who have health-based Apps in their mobile phone and 92 percent of youth check the expiry date before buying and consuming medicines. While,

53.33 percent of youth do check the contents of medicines before consumption.

Table 10 Awareness with Regard to Improper Diet due to health Complications

Code	Health Complications /Issues Due to Improper Diet	Aware		Unaware	
		f	%	f	%
HCI_1	Obesity	192	85.33	33	14.67
HCI_2	Skin problem	195	86.67	30	13.33
HCI_3	Diabetes	203	90.22	22	9.78
HCI_4	Blood-Pressure	188	83.56	37	16.44
HCI_5	Indigestion	192	85.33	33	14.67
HCI_6	Deprivation of Sleep	164	72.89	61	27.11
HCI_7	Stress	180	80.00	45	20.00
HCI_8	Allergic Reaction	165	73.33	60	26.67
HCI_9	Migraine/headache	160	71.11	65	28.89
HCI_10	Heart related complications	166	73.78	59	26.22
HCI_11	Uric Acid related issues	111	49.33	114	50.67
HCI_12	Kidney related issues	139	61.78	86	38.22
HCI_13	Bones related issues	135	60.00	90	40.00
HCI_14	Hair Problem	171	76.00	54	24.00
HCI_15	Vitamin Deficiency	182	80.89	43	19.11
HCI_16	Low Hb (Hemoglobin)	154	68.44	71	31.56
HCI_17	Poor Eyesight	164	72.89	61	27.11

The above table describes the awareness among the youth with regard to improper diet and health related complications/issues. 85.33 percent of youth are aware that improper diet leads to the problem of obesity while 90.22 percent of youth have knowledge that improper diet causes the problem of diabetes. The percent of youth who are aware that improper diet results into the problem indigestion and blood pressure are 85.33 and 83.56 respectively. There are 73.78 percent of youth who are aware of the fact that improper diet leads to the heart related complications while 61.78 percent of youth have knowledge that such diet leads to kidney related issues. There are 80.89 percent of youth who are aware of Vitamin Deficiency as the results of improper diet whereas 68.44 percent of youth know that it also leads to the problem of low hemoglobin in the body. Similarly, 72.89 percent of youth are aware that the problem of poor vision is caused by not having proper diet.

Table 11 Sources of Information for Health

Source	Count	Percent
Parents	177	78.67
Medical Practitioners	140	62.22
Social media	104	46.22
Website	99	44.00
Siblings	53	23.56
Dietitian	47	20.89
Newspaper	42	18.67
Relatives	32	14.22
Magazine	26	11.56

As depicted in the above table, for majority of youth (78.67 percent), their parents are the source information for health while 62.22 percent of youth seek the advice of Medical Practitioners. For 46.22 percent of youth, social media are the sources health

related information. Surprisingly, only 20.89 percent of youth are also dependent on the advice of dietitians in this matter.

Hypothesis Testing

Hypothesis - I

H0₁: There is no significant association between health literacy among youth and their gender.

Ha₁: There is a significant association between health literacy among youth and their gender.

Hypothesis - II

H0₂: There is no significant association between selected healthy practices of selected youth and Their gender.

Ha₂: There is a significant association between selected healthy practices of selected youth and Their gender.

Hypothesis - III

H0₃: There is no significant association between the awareness of health complications /issues due to improper diet among youth and their gender.

Ha₃: There is a significant association between the awareness of health complications /issues due to improper diet among youth and their gender

Table 12 Results of Chi-Square Test

Hypothesis – I Health Literacy vis-à-vis Gender			Hypothesis – II Healthy Practices vis-à-vis Gender			Hypothesis – III Awareness of Health-related Complications/Issues due to Improper Diet vis-à-vis Gender		
Code	'p' value Df=1	Result	Code	'p' value Df=1	Result	Code	'p' value Df=1	Result
HLL_1	0.072	NS	HLP_1	0.018	S	HCI_1	0.872	NS
HLL_2	0.092	NS	HLP_2	0.073	NS	HCI_2	0.047	S
HLL_3	0.120	NS	HLP_3	0.101	NS	HCI_3	0.358	NS
HLL_4	0.999	NS	HLP_4	0.092	NS	HCI_4	0.045	S
HLL_5	0.149	NS	HLP_5	0.953	NS	HCI_5	0.178	NS
HLL_6	0.172	NS	HLP_6	0.942	NS	HCI_6	0.022	S
HLL_7	0.017	S	HLP_7	0.009	S	HCI_7	0.230	NS
HLL_8	0.176	NS	HLP_8	0.072	NS	HCI_8	0.002	S
HLL_9	0.003	S	HLP_9	0.340	NS	HCI_9	0.001	S
HLL_10	0.146	NS	HLP_10	0.829	NS	HCI_10	0.621	NS
HLL_11	0.940	NS	HLP_11	0.556	NS	HCI_11	0.946	NS
HLL_12	0.542	NS	HLP_12	0.000	S	HCI_12	0.958	NS
HLL_13	0.746	NS	HLP_13	0.332	NS	HCI_13	0.549	NS
HLL_14	0.137	NS	HLP_14	0.428	NS	HCI_14	0.000	S
HLL_15	0.091	NS	HLP_15	0.135	NS	HCI_15	0.010	S
HLL_16	0.591	NS	HLP_16	0.545	NS	HCI_16	0.006	S
HLL_17	0.010	S				HCI_17	0.091	NS
HLL_18	0.080	NS						
HLL_19	0.411	NS						
HLL_20	0.746	NS						
HLL_21	0.024	S						
HLL_22	0.644	NS						

@ 0.05 Level of Significance
S – Significant Association, NS – No Significant Association
HLL- Health Literacy
HLP – Healthy Practices
HCI – Health related Complications/Issues

As indicated in the above table, it can be concluded that there is a significant association between the

awareness of selected youth regarding importance of breakfast, health benefits of drinking water, inclusion

of fruits in the diet, health-based apps and their gender. Furthermore, the statistics reveal that there is a significant association between the healthy practices adopted by the selected youth namely being on diet, going to gym for the exercise and following healthy tips of social media influencers and their gender. In addition, there exists a significant association between the awareness of selected youth regarding the health complications/issues (namely skin problem, blood pressure, deprivation of sleep, allergic reactions, migraine/headache, hair problem, vitamin deficiency and low Hemoglobin) due to improper diet and their gender.

VIII. RECOMMENDATIONS

- The youth should be sensitized about the benefits of healthy life style.
- At the school and university level, workshops on health literacy need to be conducted.
- The young people should be encouraged to read articles and blogs available on healthy life style and follow the same if possible.
- The authority should organize and celebrate Good Health Day wherein health talk, healthy food competition likewise programme should be arranged.
- The youth should embrace healthy life style and also remain committed to the proper diet.
- The youth should not blindly follow any social media influencers for the health tips. It is always advisable to have an authenticity check.
- Following diet and exercise regime should be according to the body type.
- The youth should read the information printed on the labels of the food/beverages and try to understand the same.
- All food product should be chosen based on the nutritional information printed on the labels of foods.
- To avoid ailments that would possibly be suffered in the long run, the youth should avoid food containing sugar, cholesterol, fat etc.
- It is also advisable to have the routine medical check-up.

IX. LIMITATIONS AND SCOPE FOR FUTURE RESEARCH

The present study includes only youth and majority of them are from Vadodara City only. The preconceived notion and prejudice might have influenced their responses of the respondents. Moreover, the study covers health literacy with special reference to food items and beverages. The empirical study provides the base to carry out further research by taking large sample groups and involving people from different age groups and covering other aspects of health literacy.

X. CONCLUSION

It can be concluded that there is significant association between gender and several health-related factors, healthy practices of youth. The results highlight the dominant role of parents and medical practitioners in influencing youth health knowledge, with social media also playing a notable, though less central role. The relatively low reliance on dietitians suggests a potential area for increased outreach or education regarding the benefits of professional dietary guidance.

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