

# Health Education

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*Lecture - 15*



# Learning Objectives

- By the end of this lecture the students will be able to :
- 1-Define Health Education (HE) & its concept
- 2-Explain the relationship between health education & individual' behavior
- 3- list Aim & objectives of health education
- 4-Mention the role of health care providers in Health education
- 5-To discuss different fields related to HE, as approaches, contents, principles , practice and Methods in health communication for health education
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# Concept & Definition of Health Education

Health education, is a process or an activity for inducing behavioral changes, its' definitions as follow:

1. Health education is the translation of what is known about health, into desirable individual and community behavior patterns by means of an educational process
2. Health education is the part of health care services that is concerned with promoting healthy behavior .
3. The dynamic definition of health education is now as follows :  
"a process aimed at encouraging people to be healthy, to know how to stay healthy, to do what they can individually and collectively to maintain health, and to seek help when needed" .
4. The Alma-Ata Declaration at 1979 by World Health Organization (WHO), has revolutionized the concepts and aims of health education : as “ The modern concept of health education emphasizes on healthy behavior and related actions of people “.



# Health Education & Behavior

- The behavior to be adopted or modified may be that of individuals, groups (such as families, health professionals, organizations or institutions) or entire community.
- Strategies designed to influence the behavior of individuals or groups will vary greatly depending upon the specific health problem, or disease concerned & its distribution in the population as well as upon the characteristics and acceptability of available methods preventing or controlling that disease (or that health problem).
- Health education can help to increase knowledge and to reinforce desired behavior patterns. Education is necessary, but education alone is insufficient to achieve optimum health. The target population must have access to proven preventive measures or procedures.



# Aim & Objective of Health Education

- The Alma-Ata Declaration held by WHO, adopted in 1978, provide a useful basis for the aims and objectives of health education, which may be stated as below :
- 1. to encourage people to adopt and sustain health promoting lifestyle and practices;
- 2. to promote the proper use of health services available to them;
- 3. to provide new knowledge, improve skills and change attitudes in making rational decisions to solve their own problems;
- 4. to stimulate individual & community self-reliance& participation to achieve health development through individual and community involvement at every step from identifying problems to solving them.
- The educational objectives are aimed at the group to be taught in the educational programme.



# Role of health care providers

- It is clear that education is necessary, but education alone is not sufficient to achieve optimum health. The role of health care providers in this regard comprise to :
  - **a. provide opportunities** for people to learn how to identify and analyze health & health related problems, & how to set their own targets & priorities
  - **b. make health and health related** information easily accessible to the community;
  - **c. indicate to the people** alternative solutions for solving health & health-related problems they have identified;
  - **d. people must have access** to proven preventive measures.



# Approach to Health Education

- There are 4 well-known approaches to health education:
- **1. Regulatory approach** (Managed prevention) defined as any governmental intervention, direct or indirect, designed to alter human behavior.
- **2. Service approach** : this approach aimed at providing all the health services needed by the people to improve their own health.
- **3. Health education approach** : There are many problems (e.g., cessation of smoking, use of safe water supply, fertility control) which can be solved only through health education.



- **4. Primary health care approach:** This is a radically new approach starting from the people with their full participation & active involvement in the planning and delivery of health services based on principals of primary health care, with community involvement and intersectoral coordination.
- The underlying objective is to help individuals to become self-reliant in matters of health. This in turn, can be done if the people receive the necessary guidance from health care providers for identifying their health problems and finding workable solutions.





# Contents of Health Education

- The content of health education may be divided into the following divisions :
- **1. Human biology** Understanding health, demands an understanding of the human biology, i.e., the structure and functions of the body; how to keep it physically fit the need for exercise, rest and sleep; the effects of alcohol, smoking and drugs on the body; cultivation of healthy lifestyles, etc. Reproductive biology is another area of current interest.
- **2. Nutrition** The aim of nutrition education is to guide people to choose optimum and balanced diets, and promote good dietary habits



- **3. Hygiene** This has two aspects - personal and environmental. The aim of personal hygiene is to promote standards of personal cleanliness within the setting of the condition where people live. Personal hygiene includes bathing, clothing, washing hands after toilet; care of nails, feet and teeth; spitting, coughing, sneezing, personal appearance and inculcation of clean habits in the young. Training in personal hygiene should begin at a very early age and must be carried through school age.
- **4. Family health** The family is the first defense, as well as the chief reliance for the well-being of its members. Health largely depends on the family's social and physical environment and its lifestyle and behavior.



- **5. Disease prevention and control** Drugs alone will not solve health problems without health education, a person may fall sick again and again from the same disease.
- **6. Mental health Mental health problems** occur everywhere. They become more prominent when major killer diseases are brought under control.
- **7. Prevention of accidents** :Accidents are a feature of the complexity of modern life. In the developed countries, they are taking an increasing ways and need more awareness and orientation.



- 8. **Use of health services** Many people particularly in rural areas do not know what health services are available in their community, and many more do not know what signs to look for that indicate a visit to the doctor is necessary.



# Principles of Health Education

- **(1) Credibility** : It is the degree to which the message to be communicated is perceived as trustworthy by the receiver.
- **(2) Interest** : It is a psychological principle that people are unlikely to listen to those things which are not to their interest. It is salutary to remind ourselves that health teaching should relate to the interests of the people.
- **(3) Participation** : Participation is a key word in health education.



- **(4) Motivation** : In every person, there is a fundamental desire to learn. Awakening this desire is called motivation.
- **(5) Comprehension** : In health education we must know the level of understanding, education and literacy of people to whom the teaching is directed. One barrier to communication is using words which cannot be understood.



- **(6) Reinforcement:** Few people can learn all that is new in a single period. If there is no reinforcement, there is every possibility of the individual going back to the pre-awareness stage. If the message is repeated in different ways, people are more likely to remember it.
- **(7) Learning by doing :** Learning is an action - process; not a "memorizing" one in the narrow sense. The Chinese proverb : "If I hear, I forget; if I see, I remember; if I do, I know" illustrates the importance of learning by doing.
- **(8) Known to unknown :** In health education work, we must proceed "from the particular to the general"; "from the simple to the more complicated;" "from the easy to more difficult"; and "from the known to the unknown".



- **(9) Setting an example :** The health educator should set a good example in the things he is teaching. If he is explaining the hazards of smoking, he will not be very successful if he himself smokes.
- **(10) Good human relations:** Sharing of information, ideas and feelings happen most easily between people who have a good relationship.
- **( 11) Feedback :** Feedback is one of the key concepts of the systems approach. The health educator can modify the elements of the system (e.g., message, channels) in the light of feedback from his audience.
- **(12) Leaders:** Psychologists have shown and established that we learn best from people whom we respect and regard.





# Practice Of Health Education

- Educational material should be designed to focus attention to provide new knowledge, to facilitate interpersonal & group discussion & to reinforce or clarify prior knowledge and behaviour.
- (1) **Auditory Aids** Radio, tape-recorder, microphones, amplifiers, earphones.
- (2) **Visual Aids** (a) Not requiring projection : Chalk-board, leaflets, posters, charts, flannelgraph, exhibits, models, specimens, etc.
- (3) **Combined A-v Aids** Television, sound films (Cinema), slide-tape combination.



# Methods in health communication for health education

- **1. Individual approach** There are plenty of opportunities for individual health education.
- **2. Group approach** Our society contains groups of many kinds school children, mothers, industrial workers, patients, etc.
- **3. Mass approach - Education of the general public** · No health worker or health team can mount an effective health education programme for the whole community, except through mass media of communication.



