# Health Education

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Few slides were adapted from Prof Ronda's lectur(thanks)

### The outline of the presentation are:

- 1. Define "health education" and state its aims
- 2. Explain the role of health education in relation to the stage of disease prevention
- 3. Identify the factors that influence human behavior
- Discuss the factors that contribute to behavior change
- 5. Define learning and identify the domains of learning
- 6. Outline the Health Belief Model of behavior change
- 7. Describe the trans-theoretical model of stages of motivation
- 8. List the direct and indirect methods of communicating health messages
- 9. State the strength and limitation of each method of communicating health messages
- 10. State the types and values of audiovisual aids in facilitating the transfer of health message



# Definition

**Health education** is defined as "designed combination of learning health education is defined as "designed combination of learning health".





# Definition ..... cont' ed

Health education is defined by WHO "any combination >

of learning experiences to help individuals and

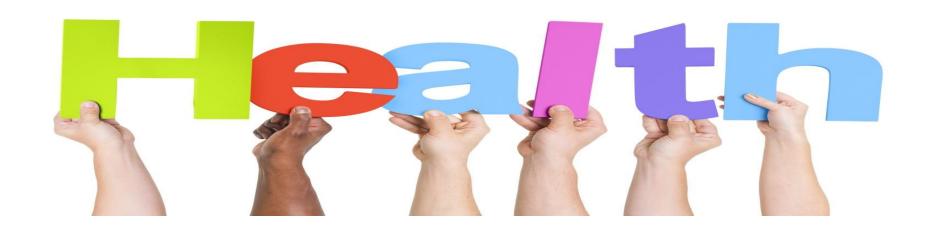
communities improve their health by increasing their

knowledge, influencing their attitudes.



# Meaning

Heath: defines by WHO of complete physical, mental and social being and not merely the absence of disease or infirmly



Heath literacy: defines by WHO" of complete physical, mental and social being and not merely the absence of disease or infirmly"





Knowledge a intellectual acquaintance with facts truth or principles by sights experience or report, it's the collection & storage of info, or experience.



Attitude: Manner, disposition, , returns, , position twoard aperon or thing.

**Skill**: the ability to so something well talent training or practice

### Belief:

- ✓ is a conviction that a phenomenon or object is true or real.
- ✓ Beliefs deal with people's understanding of themselves
- ✓ and their environment. People usually do not know whether what they believe is true or false.



### values

- ✓ are broad ideas and widely held assumptions
- ✓ regarding what are desirable, correct and good that most members of a society share.
- √ Values are so general & which behaviors are
- ✓ acceptable and which are not. Instead, values provide us withcriteria and conceptions by which we evaluate people, objects,& events as their relative worth, merit, beauty or morality

#### Behaviour change communication

- ☐ is a process of working with individuals, families and communities through different communication channels
- **□**To promote positive health behaviours
- □ and support an environment that enable the community to maintain positive behaviours taken on



# Aims Of Health Education

- 1. Make people value their own health
- 2. Take the initiative to attain and keep positive health
- 3. Understand and practice healthy habits
- Interrupt a behavioral pattern that heightened the risk of disease, injury, disability or death
- Utilize the available health services



**Health Education Principles and** 

Concepts

Health promotion and disease prevention.

Aims of Health education

Utilization of available health services.

Early diagnosis and management.

### **Health Education At Different Levels Of Prevention**

#### **LEVEL OF PREVENTION**

#### **GOAL OF HEALTH EDUCATION**

#### **Primordial prevention**

### **Primary prevention**

✓ Immunization, Healthy diet PA, breast feeding

Secondary revention....screening

tertiary prevention.....limit comp, disability

Promote health by reinforcing healthy practices

Prevent ill-health, maintain the highest level of **Immunization, Healthy diet**, health & improve the quality of life

Understand health behavior underlying the ailments and means of behavioral changes to prevent further deterioration of health or restoration of health

Make the most of the remaining potential for healthy living.

# What is prevention

- ☐ is defined as the planning for and the measures taken to prevent the onset of a disease or other health problem before the
- □occurrence of undesirable health events. There are three distinct:
- □ levels of prevention: primary, secondary, tertiary prevention.

# Types of preventions approaches

Tertiary Prevention

Rehabilitation, preventing complications and improving quality of life.

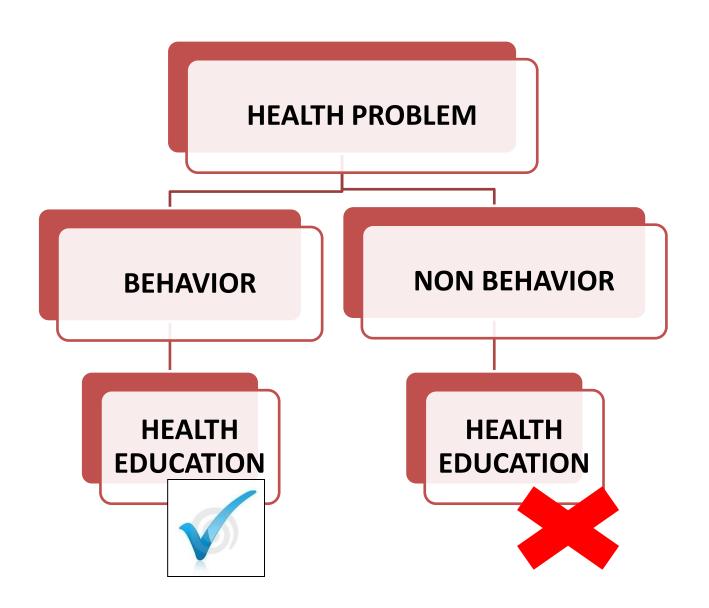
#### Secondary Prevention

Screening of at risk individual, control of risk factors and early intervention.

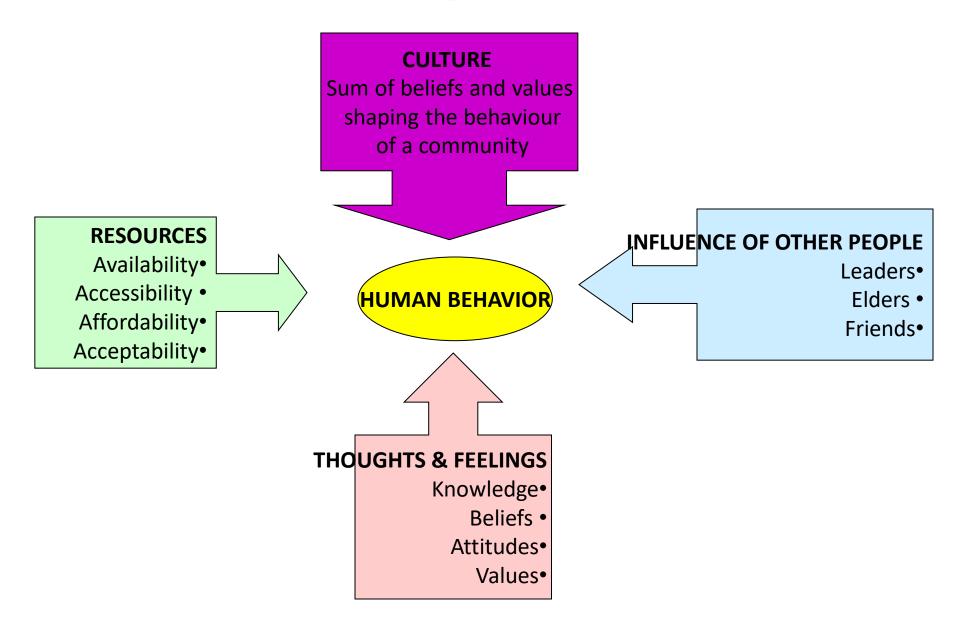
#### **Primary Prevention**

Health promotion and addressing risk factors, social and genetic factors

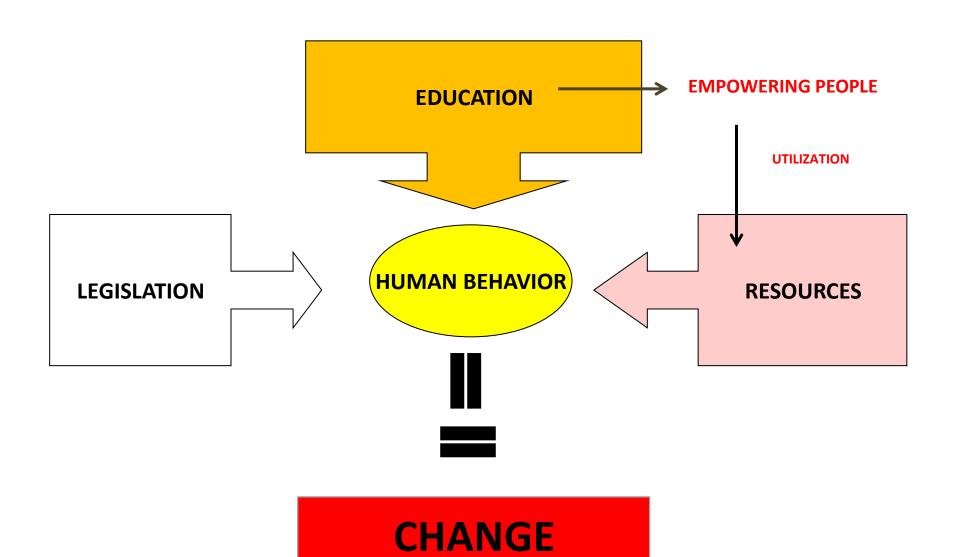
# Underlying Cause Of A Health Problem



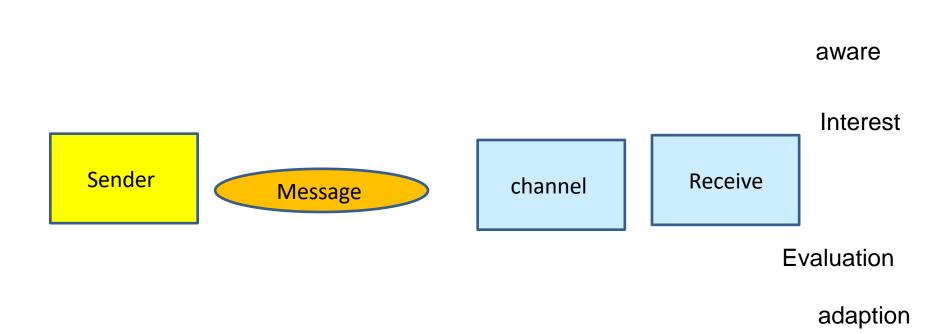
# Factors Influencing Human Behavior



# **Changing Human Behavior**

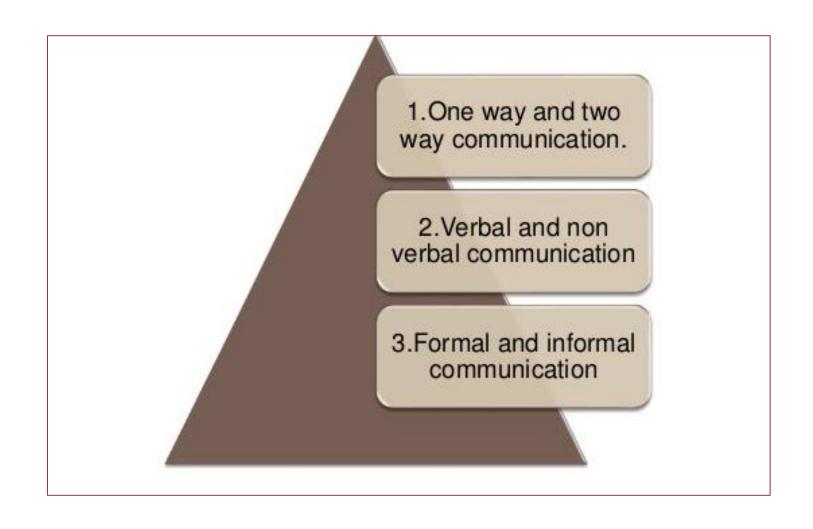


# Health education communication



behaviour changed

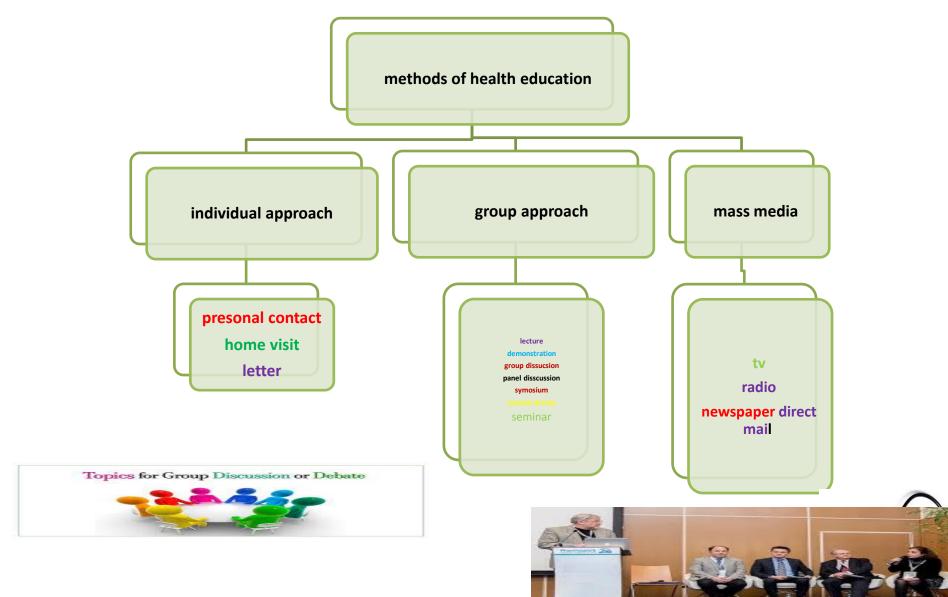
# Types of communications



## Barriers to communication

- Psychological.....sad
- Physiological ......def
- Environmental .....noisy background
- Cultural .....health literate

# Methods of health communication



### **LEARNING**

LEARNING ------ KNOW - FEEL - DO

"Change of behavior brought about by experience, insight, perception or a combination of the three, which causes the individual to approach future situation differently".









### LEARNING ------ KNOW - FEEL - DO

Learning is an **ACTIVE PROCESS** 

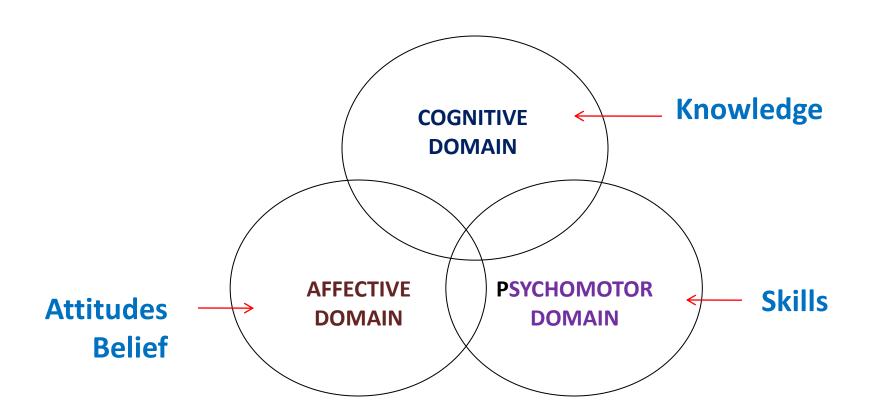
Learning is stimulated by a NEED

Learning is demonstrated by a CHANGE IN BEHAVIOR





### **DOMAINS OF LEARNING**

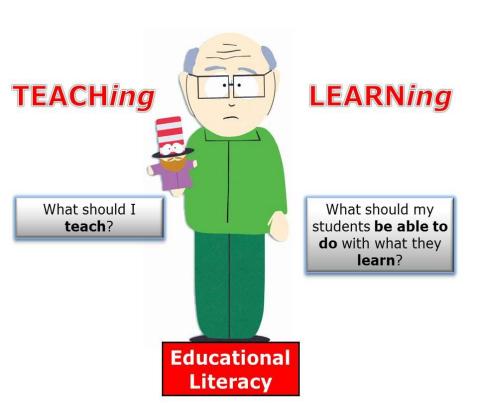


# TEACHING ENABLE LEARNING

### **TEACHING**

#### **FORMAL = PLANNED**

#### **INFORMAL** = **NOT PLANNED**



### **TEACHING ACTIVITIES**

- ✓ Giving information
- ✓ Clarify thinking
- ✓ Identifying options
- ✓ Develop new skills

### Variables In The Behavior Change

**Knowledge** An intellectual acquaintance with facts, truth, or principles gained by sight, experience, or report.

Values Ideas, ideals, customs that arouse an emotional response for or against a thing or a behavior.



Beliefs Acceptance of or confidence in an alleged fact or body of facts as true or right without positive knowledge or proof; perceived truth.

### **Variables In The Behavior Change**

**Attitudes** 

Manner, disposition, feeling, or position toward a person or thing.

**Perceptions** Ascribing meanings to sensory or cortical activity in such a way that the activity comes to acquire symbolic function.

**Skills** The ability to do something well, arising from talent, training, or practice.

**Self-efficacy** The internal condition of experiencing competence to perform desired tasks which will influence the eventual outcome.

## The Health Belief Model For Behavior Change

#### The model postulates

- Health behavior of all kind is related to a general health belief that one is susceptible to a health problem (Perceived susceptibility)
- Health problems have undesirable consequences (Perceived seriousness or severity)
- 3. Health problems and their consequences are preventable.
- 4. If health problems are to be overcome, barriers have to be overcome

# Predisposing, Enabling And Reinforcing Factors In The Education Process

### **Predisposing Factors**

- Characteristics of a person or population that <u>motivate</u> a behavior change
- Predisposing factors are knowledge, beliefs, values and attitudes

### **Enabling factors**

- Characteristics of the environment and individuals that <u>facilitate</u> action to attain a specific behavior
- Enabling factors are health services (available, accessible, affordable), skills and legislations

### **Reinforcing factors**

- It determines the continuity (<u>maintenance</u>) of the new behavior
- Reinforcing factors are rewards (experienced or anticipated) of the new behavior

### MAINTAINING A HEALTH-RISKY BEHAVIOR

### **REASONS**

- 1. Lack of knowledge of the health risk
- 2. Modified perception of risk
- 3. Low self efficacy to change

### **Transtheoretical Model: Stages Of Motivation**

#### Stages related to individual's motivation

**Pre-contemplation** No interest or consideration for behavior change (denial, ignorance, demoralization)

**Contemplation** Thinking about making a change

**Preparation** Person's imagining himself with different behavior

**Action** Making specific changes

Maintenance New behavior becomes a life long pattern

The Transtheoretical Model should be viewed as cyclic rather than a straight line.

## METHODS OF HEALTH EDUCATION

Direct methods			Indirect methods	
	Face to face			
			Mass media	
Individuals	Group	Communities		

## who is responsible for health education

□ Everyone engaged in :
 □ health (healthcare providers)
 □ Community development activities
 □ Health care providers, treat disease, educate
 □ Medication alone will not solve the health problem, pt must know the disease; s causes
 □ Health educators

# References

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