

INTRODUCTION TO HEALTH EDUCATION AND HEALTH PROMOTION

Health education is a part of health care which are concerned with promoting healthy behaviors. It is through health education we help peoples to understand their behaviors and how it affects their health and encourage them to make their own choices for healthy life.

Definition of health education and promotion

Before discussing about health education, it is important to conceptualize what health itself means.

Health is a very abstract concept to conceptualize and measure and it is too difficult to put in words. There have been many attempts to define health in meaningful ways, but opinions regarding what has to be understood by health differ across and within health care disciplines.

For centuries, health was defined in terms of the absence of physical disability. From this medical-biological point of view, only persons suffering from chronic diseases or a physical handicap were considered to be unhealthy. According to this definition, individual is healthy if all the body parts; cells, tissues, organs, organ systems are functioning well. It is easy to see that this definition is rather narrow, since it only incorporates physical factors, and therefore is not very useful in the field of maintaining, improving or sustaining health.

Health has both objective and subjective aspects. Someone may have a disease without feeling ill, or, conversely, someone may feel ill without having a disease in the medical sense.

Therefore, health is defined in its broader and more holistic concept. The most commonly accepted definition is that formulated in the WHO (1948), which defines health, as:

“A state of complete physical, mental, and social well-being not merely the absence of disease or infirmity.”

This classic definition is important, as it identifies the vital components of health. To more fully understand the meaning of health, it is important to understand each components of health

1. Physical health:

- It is the absence of diseases or disability on the body parts
- It is the biological integrity and the physiological well-functioning of the human body
- It is the ability to perform routine tasks without any physical restriction.

2. Mental health

- Termed as psychological health and it is subjective sense of well-being.

It has two major components:

A) Cognitive component

- It is the ability of an individual to learn, perceive and, think clearly.

E.g. A person is said to be mentally retarded if he/she cannot learn something new at a pace in which an ordinary person learns.

B) Emotional component

- Is the ability of expressing emotions (e.g. fear, happiness, and to be angry) in an “appropriate” way.
- It is the ability to maintain one’s own integrity in the presence of stressful situations (tensions, depression and anxiety).

E.g. if somebody gets into coma during an examination.

3. Social health

Is the ability to make and maintain “acceptable” and “proper” interaction and communication with other people and the social environment; satisfying interpersonal relationship and role fulfillment. For example, to mourn when close family member dies, to celebrate festivals, to create and maintain friendship etc.

Mahler extends the WHO definition; accordingly, he defined health as;

“The ability to lead socially and economically productive life” and he come up with five components of health by adding the concept of emotional health and spiritual health Emotional health –the same definition as WHO; but put as separate component.

Spiritual health

- It is also called personal health and is a reflection of self-actualization.
- It is a relation of health with religion or cultural values and beliefs and is a way of achieving mental satisfaction in stressful or in other ill- health conditions.

All the above aspects of health are interrelated and interdependent. Physical problems can lead to mental problems and vies versa. Therefore, health should be viewed as a holistic concept. The approach helps health professionals and community members to realize and act accordingly based on the multiple factors that affect health directly or indirectly.

APPROACHES TO ACHIEVE HEALTH

- **Legal or regulatory approach:** focuses on the use of the law to protect the health of the public
- **Administrative or service approach:** concerned with making health facilities accessible to the people
- **Educational approach:** designed to improve health literacy, knowledge, and life skills conducive to individual and community health

Health Education /HE/

Health Education is a part of health care concerned with promoting healthy behaviors. Since individual’s behavior can be the main causes of health problems, and it can also be the main solution. Through HE we help peoples to understand their behaviors and how it affects their health and encourage them to make their own choices for healthy life, without any coercion.

Health education as aimed at bringing about behavioral changes in individuals, groups, and larger populations from behaviors that are presumed to be detrimental to health, to behaviors that are conducive to present and future health.

Health education covers the continuum from disease prevention and promotion of optimal health to the detection of illness to treatment, rehabilitation, and long-term care. It includes infectious and chronic diseases, as well as attention to environmental issues.

Therefore, Health Education is defined as:

“Any combination of learning experiences designed to facilitate voluntary action conducive to health”

Elaboration of the definition: -

- **Combination:** it emphasizes on the importance of matching multiple determinants of behaviors with multiple learning experiences or educational intervention
- **Designed:** distinguishes health education from incidental learning experiences as a systematically planned and organized activity.
- **Facilitate:** creating favorable condition such as predispose, enable, reinforce.
- **Voluntary:** with full understanding and acceptance of the purpose of the action.
- **Action:** means behavioural steps taken by an individual, group or community to achieve an intended health effect.

In general health education is referred to as the process by which individuals and groups of people learn to behave in a manner conducive to the promotion, maintenance or restoration of health.

The declaration of Alma-Ata(1978) emphasized the need for individual and community participation and they come up with definition: “A process aimed at encouraging people to want 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.”

Health Promotion

To reach a state of complete physical, mental and social well-being it is beyond the activity of health education and even health sectors. In other words, health is not just the responsibility of health sector alone, but the responsibility of every sectors working for development. Thus, the concern for health outside to the healthcare sector is the call for health promotion.

Health promotion is the process of enabling people to increase control over, and to improve their health. It is a positive concept emphasizing personal, social, political and institutional resources, as well as physical capacities. Health promotion is an umbrella term that includes disease prevention, improvement of health, and enhancing well-being.

Health promotion can be defined as:

“A combination of educational and environmental supports for actions and condition of living conducive to health.”

Elaboration of the definition:

- **Combination:** refers to the necessity of matching multiple determinants of health with multiple intervention or sources of supports.
- **Educational:** refers to the communication part of health promotion. That is health education.
- **Environmental:** refers to the social, political, and economic, organizational, policy and regulatory circumstances influence behavior or more directly health

Health promotion has the following characteristics:

- HP is a process –a means to an end
- HP is enabling –done by, with and for people, not imposed upon them
- HP is directed towards improving control over the determinants of health

Health education is one of the most important component of health promotion. It is a means of promoting health.

- Health education is primarily focused at voluntary action people can undertake on their own to improve their own health, their families’ health and the community as a whole.
- Health promotion aimed at the social and political actions that will facilitate the necessary organizational, economic, and other environmental supports for the conversion of individual actions into health enhancements.

Components of health promotion are:

- Health education
- Political environment
- Social environment
- Economic environment
- Organizational environment

Generally, health promotion is any combination of health education economic political spiritual or organizational initiative designed to bring about positive attitudinal behavioural social or environmental changes conducive to improving the health of populations

Health Information

It is health facts disseminated to the target audience focusing on the basic facts related to the health issue under consideration. In dissemination of health information, base line information or data (currently existing level of multiple determinants of behaviors) is not necessarily required.

Health Education	Health Information
<ul style="list-style-type: none"> - Baseline information or current level of Multiple determinants of behavior are necessarily required - Appropriate for old problems (problems Known to the people for long period) - Required at all stages in behaviors change Continuum (it is continuing, even to prevent defaulter after adoption) - Encourage people to make their own choices for healthy life - Focus on the reason behind behaviors - People are not blamed for unhealthy behaviors - Uses a variety of methods or educational Strategy as appropriate 	<ul style="list-style-type: none"> - Baseline information or data are not necessarily required - Appropriate for newly emerging health problems and during epidemics - One time telling facts provided that the information reaches at all the intended Audiences and understanding takes place - Merely telling people to follow healthy behaviors - Blind to the reason behind behaviors - People blamed for un healthy behaviors - May not use a variety of methods.

Importance of health education

- HE improves the health status of individuals, families, and communities in general.
- HE enhances the quality of life for all people
- HE reduces premature deaths
- HE is concerned with helping people to help themselves.
- A way of empowering people to understand their own problems, identifying its solution and take appropriate action.

Rationale of health education

- The continued existence and spread of communicable diseases such as malaria, TB, HIV/AIDS that need the involvement of the community members and environmental interventions.
- About 75% of childhood illnesses are preventable e.g. measles by immunization, malnutrition and diarrhea by teaching mothers about good weaning foods and promoting breast feeding up until age of two. Today's children contain all of tomorrow's productive public.
- For some diseases health education is the only practical choice in order to prevent the spread of the disease or to lead a normal life. E.g. HIV/AIDS.
- The tendency of increasing magnitude of chronic conditions and other emerging agendas, which required the cooperation of individuals to lead with the problem. E.g. Hypertension.
- Increasing threats to the young from new and harmful behaviors. Eg.tobacco use, teenage pregnancy, substance use, etc.
- Shift in the major causes of death from infectious (communicable) and treatable diseases to non-communicable diseases. For such diseases, prevention is the best cure and the most cost effective intervention exists to reduce the future burden of those currently emerging health problems.
- Human behaviors are almost the single causes for the development of such currently emerging health problems and also the main solution. Therefore, prevention of those currently emerging health problems are possible only through life style modification and behavioral changes in which health Education is the only responsible profession at the front line to modify life styles and to bring sustainable behavioral changes.
- Many people are ignorant of the causes of their illnesses and may be afraid of seeking treatment and hide their illness not to be considered, as an "outcast" from society and many others do not seek treatment until it is too late. In this case, health education is a frontline to promote the use of preventive and curative health services.

The ultimate goals and educational objectives of health education

A) The ultimate goals of health education

The goal of all health professionals including health educators is to improve the quality of life. The goal of health education is to promote, maintain and improve individuals and community health.

In simple words the ultimate goals of health education are:

- To help everyone and family exercise the right to achieve a harmonious development of the physical, mental and social potential.

- To promote health, prevent illness, self-adjust to live with disabilities and decrease morbidity and mortality.

B) Educational objectives of health education

There are many types of objectives in health education depending on the stage and/or level of interventions. The following are broad educational objectives of health education:

- To provide *appropriate knowledge*: provision of correct knowledge, facts and information. For example, facts about HIV/AIDS.
- To help develop *positive attitude*: has a lot to do with changing opinions, feelings and beliefs of people.
- To help exercise *health practice/behavior*: concerned with helping people in decision-making and taking action. For example, helping people choosing alternatives (whether to abstain, be faithful, or use condom)

Dimensions and characteristics of health Education

- ✚ Health education is an eclectic in nature. As applied science, it draws its body of knowledge from a variety of disciplines. Health education's body of knowledge represents a synthesis of facts, principles and concepts drawn not only from medical sciences but also behavioural, biological, sociological and health sciences, anthropology, etc. and interpreted in terms of human needs, human value and human potentials.
- ✚ Health education is concerned with the whole person and encompasses physical, mental, social, and spiritual aspects of a person. Most health problems are the result of a complex mixture of the psychological and physical reactions of people to their socio-cultural and economic environment. The major causes of diseases and deaths are governed by behavioural and environmental factors that are created by human beings themselves;
- ✚ HE is a life long process from birth to death, helping people to change and adopt at all stages. It influences so many aspects of life.
- ✚ HE is concerned with people at all points of health and illness continuum. It is not limited to patients in clinical setups. It includes those who are apparently healthy and who want to minimize the risk of having a problem.
- ✚ Health education is concerned with helping people to help themselves and with helping people to work towards creating healthier conditions for everybody.
- ✚ HE is directed towards individual, family, group and community health
- ✚ Health education involves formal and informal teaching and learning using a range of methods.
- ✚ Health education is concerned with a range of goals, including giving information, attitude change, behaviour change and social change.

Health education is not an end by itself. Rather a way of empowering people to understand their own problems, identifying its solution and take appropriate action.

Principles of Health Promotion

- ✚ Health promotion involves the population as a whole in the context of their everyday life, rather than focusing on people at risk from specific diseases
- ✚ Health promotion is directed towards action on the determinants or cause of health. This requires a close co-operation between sectors beyond health care reflecting the diversity of conditions which influence health
- ✚ Health promotion combines diverse but complementary methods or approaches including communication, education, legislation, organizational change, community change, and community development
- ✚ Health promotion aims particularly at effective and concrete public participation. This requires the further development of problem defining and decision-making life skills both individually and collectively and the promotion of effective participation mechanisms
- ✚ Health promotion is primarily a societal and political venture and not medical service although health professionals have an important role in advocating and enabling health promotion

Principles of health education

The practice of health education is based on the assumption “that beneficial health behavior will result from a combination of planned, consistent, integrated learning opportunities and scientific evaluation of programs in different settings.”

The following points are few *working principles* of health education:

1. Principle of educational diagnosis

The first task in changing behaviors is to determine its causes. Just as physicians must diagnose an illness before it can be properly treated, so, too, must a behavior be diagnosed before it can be properly changed. If the causes of the behaviors understood health educator can intervene with the most appropriate and efficient combination of education, reinforcement and motivation

2. Principle of Participation

The prospect for success in any attempt to change behaviors will be greater if the individuals, families, community groups, etc...have been participated in identifying their own needs for change and have selected the methods that will enable them to take action.

3. Principle of multiple methods

This principle follows from the principle of educational diagnosis. In so far as multiple causes will invariably be found for any given behaviors.

4. Principle of planning and organizing

Planning and organizing are fundamentals for health education which distinguishes it from other incidental learning experiences. It involves deciding in advance the when, who, what, how, what and why of health education. It also requires the planning for resources, methods and materials to be used, identification of target groups etc. It is very difficult and often unsuccessful when carrying out health education program that are not planned and organized appropriately.

5. Facts

Health education is given based on scientific findings/facts and current knowledge. It is unthinkable to provide health education without scientific and knowledge related to the topic or issues to be addressed.

6. Segmentation

Health education should be designed for a specific group of people/ specific target groups

7. Need based

Health education is primarily educational, and its purpose is to ensure a desired health related behavior after real need identification.

All HE should be need-based. If the problem is severe or serious from the health person's point of view but is not felt as much by the individual or the group, then a proper diagnosis should be made.

Therefore, before involving any individual, group or the community in health education the felt need of the community should be ascertained and if there is no felt need the education will be wasted.

8. Culture

Health education should not consider as artificial situation or formal teaching –learning process. One should get into the culture of the community and introduce novel ideas with a natural ease and caution.

Health education should respect cultural norms and take account of the economic and environmental constraints faced by people

Therefore, Health education starts from where people are and slowly build up the talking point to avoid any clash of ideas to allow for people understanding, appreciation and internalization of fresh ideas.

Targets of health education

Every stage of life, every person or social group and all occupations are appropriate targets of health education programs. Depending on the type of the problem there are three broadly classified targets of health education programs.

- *Individuals*: this includes clients of services (contraceptive or VCT users), patients and healthy individuals.
E.g. diabetic or hypertensive patients.
- *Groups*: includes gatherings of two or more people who have a common interest.
*E.g. a family planning service for a couple
a youth club about HIV/AIDS*
- *Community*: include a collection of people who have common interests, a feeling of belongingness, and who usually share common values, culture, beliefs and interests.
E.g. a village community about the dangers of FGM

Health Education in Disease prevention

Disease prevention means to interrupt or slow the progression of disease. Therefore, the aim is to push back the level of detection and intervention to the risk factors of disease. There are three levels of Prevention: Primary; Secondary; and Tertiary prevention.

1) Primary Prevention

- Interventions carried out before a response or disease occurs; avoidance of an illness through health promotion activities and specific protective actions (nutrition, hygiene, immunizations)

2) Secondary Prevention

- Focuses on the detection of symptoms and support of a positive reaction to an illness
- Early treatment

3) Tertiary Prevention

- Involved with an illness and assisting an individual to achieve some stability.
- Purpose is to limit disability and to rehabilitate

The levels of health education in disease prevention

There are three distinct levels of disease prevention in health education: Primary, Secondary, and Tertiary health education.

1. Primary health education

Is encompass of those health education activities that aimed specifically at prevent the onset of illness or injury before the disease process begins

Examples: Wearing safety belt, Immunization, Physical exercise, Brushing one's teeth, Breast feeding

2. Secondary health education

Once the disease occurred health education is important to slow down the disease progression to prevent the onset of disability.

Example: Providing HE on adherence, educating ill person to seek treatment, breast-cancer screening, Blood pressure examination Cholesterol level examination, treating malaria patients.

3. Tertiary health education

Health education programs that specifically aimed at patients with irreversible, incurable, and chronic condition for social and psychological adjustment. It meant to avoid major disability, premature death.

Example: educating after lung cancer surgery, working with the diabetes patients to ensure the daily Injections are taking.

Health education settings

When considering the range of health education interventions, they are usually described in relation to different settings. Settings are used because interventions need to be planned in the light of the resources and organizational structures peculiar to each.

Health education is delivered in almost every conceivable setting—universities, schools, hospitals, pharmacies, grocery stores and shopping centers, recreation settings, community organizations, voluntary health agencies, worksites, churches, prisons, health maintenance organizations, migrant labor camps; it is delivered through mass media, over the Internet, in people's homes, and in health departments at all levels of government.

Thus, the main areas for health education and promotion activities were Schools, Worksites, Health care settings and Community settings, Special communities: such as prisons and refugee settings...

These settings differ in their organizational structure, the mission of the organization, and the centrality of the mission to health education. However, the process of health education is the same across settings, although the emphasis on content areas and the target population for health education will differ.

1. Health education activities in school

School health education, as the name implies, primarily involves instructing school-age children about health and health-related behaviors. School children are groups of young people with similar background and environment. School based health promotion is the most crucial approach needed to improve the wellbeing of the children and the adolescent.

Objectives of school health education

- Protect and promote health of children and staff
- Promote safe and healthful environment
- Educate on public health practices

2. Health education activities in worksites

The work site health promotion programs are of recent origin when compared to other settings. Health promotion encourages worksites to offer programs in worker safety and health, alcohol and smoking reduction, blood pressure and cholesterol education and control. Majority of the activities reported at the worksites are injury prevention, job hazards, and smoking control.

3. Health education activities in health care setting

Health education for high-risk individuals, patients, their families, and the surrounding community, as well as in-service training for health care providers, are all part of health care today. It focuses on preventing and detecting disease, helping people make decisions about genetic testing, and managing acute and chronic illnesses.

4. Health education activities in homes

Health behavior change interventions are delivered to people in their homes, both through traditional public health means, like home visits, and through a variety of communication channels and media such as Internet, telephone, and mail.

Who is responsible to provide health education?

It is true that some people are specially trained to do health education work. We may refer to those as specialists. But since all health workers are concerned with helping people to improve their health knowledge and skills, all health workers should practice health education in their job. *If health and other workers are not practicing health education in their daily work they are not doing their job correctly.* Health education, then, is really the duty of everyone engaged in health and community development activities.

The role of health education and promotion in Primary Health Care

Since the declaration of PHC, Health education was identified as a primary means of "Health for All." Its central role is in improving community participation and building the capacity of communities to make decisions.

To achieve effective community participation two things need to be done.

First: the political issues or government decision: the government should commit itself for community participation in health and development.

Second: educational issues (health education): people need to know how to lead healthy life style. This involves the adoption of certain types of behaviors and styles of living beneficial to health in individuals, families and community.

Therefore, health education is central to primary health care which in turn is the primary means of achieving health for all, and no components of primary health care can successfully be implemented without health education.

Challenges to the process of health education

Good health education does not just happen. Much time, effort, practice, and on-the-job training are required to be successful. Even the most experienced health educators find program development challenging because *no two days are the same in health education* (the constant changes in settings, resources, and priority population).

The process of health education is often challenging, because:

- 1) HE is not considered as important during relatively healthy status as people are often concerned about diseases
- 2) Changing health behavior is conditioned by factors such as social, psychological, economical, cultural, accessibility and quality of services, political environment, etc. which are difficult to deal with simultaneously.
- 3) Failure to see the value of health education by many health professionals.

In general, the people charged with health education programs lack special training and are *not qualified* and even if the value of health education is well understood by many health professionals, few make it part of their routine professional practice.