Health Education

What it is and How to Impart it

Mrs. M.M. PATIL

Introduction

Health Education is an integral part of Medical Services.

It is not an individual Science like Medicine, Surgery, Orthopaedics, Gynae, Paediatrics and likewise.

But it is concerned with all these Sciences; it is concerned with Surgery, Medicine, Gynae Paediatrics, Orthopaedics and likewise.

It is incorporated in comprehensive Medical Services.

It is applied Science rather than theoretical science.

It is a complex activity.

Health

Definition: "Health is a state of complete physical, mental, social and spiritual welbeing and not merely the absence of disease or infirmity".

Very big, very ambitious definition.

No system of Medicine is available today to gain this type of health.

In fact, we think of health as a person in a time of sickness.

As a national or state representative when we think of health we think of number of hospitals, Primary Health Centres, Sub-centres and the staff employed under this scheme and the money spent on the scheme.

Though the science has been developed so much that:

Tube babies have been born.

Emplantation of kidneys and heart is being done.

Man has stepped on the noon.

But we have not changed our attitude believes and not corrected our misconception.

That change and correction we have to do by education.

Education

What is Education? Nowadays we hear much about it as Women's Education, adult education, free education, community education. Crores of rupees are spent on it.

Definition: "Education is a learning process", Education is a learning process of: 1. intellectual growth, 2. introducing planned change, 3. providing learning experiences, 4. transforming potentialities into actualities, 5. modification of behaviour, 6. tripollar process, educant, educator and environment, 7. Two way process learning and teaching Concept of education is corelated with concept of life.

(1) Intellectual Growth: more or less but definite there is an intellectual growth whether it is primary education, secondary education or collegiate education.

(2) Introducing planned change, certain type of curriculum/syllabus is organised for particular course. So 12th standard students become fullfledged doctor, advocate, engineer, teacher.

(3) Providing learning experiences. Education provides learning experiences to develop inherent capacity.

(4) Transforming potentialities into actuality with learning, there is scope to unfold potentialities.

(5) Modification of Behaviour. Educant improves own behaviour with the process of education.

(6) Tripollar Process Educent, Educator (not always a person—it may be a book, film, picture etc.). and environment.

(7) Two-way Process Teaching as well as Learning Learner should be able to grasp and teacher should be able to give correct information. He should provide a knowledge at the level of students understanding and student should be attentive, concentrating on the topic.

Now we see teacher completes his portion. Students are overloaded with the knowledge. Students are just the moving encyclopaedia overloaded with the knowledge but without the scope to explore further.

Learning Process includes three basic facts: (i) Providing factual knowledge, (ii) Teaching and training basic mental and manual skill (iii) Indoctrination for set of value judgement in relation to cultural pattern.

Products

Intelligent, constructive, healthfull individual or community action.

Concept of Health Education

(i) translation of scientific knowledge about health into practical behaviour e.g. personal hygiene, balanced diet.

(ii) Sum of our efforts to modify human conduct and attitude to raise their health level e.g. in the field or clinic, we try to explain and tell people for sedimentation and filteration of drinking water. To minimise waterbrone diseases.

(iii) Health Education is process which helps

people to achieve healthful living by modification of behaviour, i.e., removing their ignorance, misconception and prejudices, e.g. weaning foods, mothers from middle/higher class society don't know what, how and when food is to be given to their children. They give only glucose biscuits to their children, here there is no illiterecy or poverty, but the ignorance of them makes the child malnurished and they say it with very pride which I feel pity for their ignorance exibits.

There are results from western countries studies like united states, that modification of behaviour and environmental control has reduced cardio-vascular diseases, heart diseases even, it is revealed that only medicare is unable to deal with the people's problem.

Now, there is a need to shift from medicare to preventive care. The Alma Ata Conference in 1978 where representatives from the different countries of all over the world had declared the target of "Health for All by 2000" through Primary Health Care. Primary Health Care means very very simple meaning that "What shall I do when I am sick and what should I do to remain well", very simple to say, but very difficult to practice it. We have to take much more efforts to achieve this target.

To achieve this target we have to provide knowledge of preventive aspects. This knowledge has to be processed for transmission to and applied by the individual.

It has to be interpretted in appropriate forms and in small bits.

It is to be communicated in peoples language.

We can not and should not give the bookish knowledge and should not use strange words, like protein, CHO, fat, etc. even 'Prathine' is not understood we should tell the names of resources.

Aim of Health Education

To help the people to achieve health by their own actions and efforts means to help the community to help itself i.e. we have to provide knowledge and guidence. We have to impress upon them that Health is of top most importance of our life. *Health is Wealth* it is an aspect of our life.

To achieve this aim we have made some steps.

Objectives

(i) To creat health consciousness and awareness about health needs and health problems, country like India where 80% of the people stay in rural area are not aware of their own health. Problem it may be surprising to somebody to know this, but, it is a fact. I can give a nice example of night-blindness. This problem is just agnored, oh! Its night blindness better to finish the work before sunset. They will not think of it for avitaminosis/difficiency of Vitamin A. They will think that he/she might have walked on papaya seeds. These types of misconception and ignorances are deeply rooted in our community. They will not find the way to seek for medical care.

(ii) To develop positive attitude and desire for individual and community health programme.

Many health programmes are there provided for the people.

People do not co-operate even.

People shquld participate the programme because it is of them, by them and for them famous example of family planning people don't think of their own benefits from the programme but they will think that these Government Employees do not get their salaries unless they perform family planning cases so that they are behind us.

(iii) To accept adopt and continue to practice the desired health actions. e.g. Ante Natal care, immunization, periodical check up. We have come across with the parents, who are resistant to accept immunization to their children will spend their money and time on worship of God/Godess for recovery of their child in vaccine preventable diseases. They may worship the God/Godess, but their children must receive immunization.

Why Health Education

(i) It's philosophy is in accord with our democratic aspiration. India's ruling authority is of a democratic system. We have to deal the problems considering individuality of a person, otherwise we would have made legal inforcement for compulsory sterilization after 2-3 children and insertion of IUD after one child to achieve our target of NRR by 1995.

(ii) It creats self correcting, adjusting and social order, with the health education one gets corrected, adjusted with modern values of the society by which he is more accepted in the society.

(iii) It provides free hand to people to think, criticise and revise their ways of life—Thus enlighted soul tries to experiment once. The result of this effort is a success. Success makes person more to learn. Success builds confidence.

Steps in Health Education

(i) Sensatization—creating awareness.
(ii) Publicity—providing detail information.
(iii) Education proper—Knowledge about health.
(iv) Motivation—creation of an urge/desire to act.
(v) Practice—repeated use of action.
(vi) Evaluation—looking for advantages and drawbacks.

Contents; Areas of Health Education

(i) Human biology: Anatomy and Physiology in Primary School so that pupils learn to take care of the skin, hair, nails, ear, nose, throat, eyes, teeth etc. i.e. personal hygiene. Cleanliness of a body is not new for us. It is emboded in our cultural ethos as we never miss the bath even in unavoidable circumstances. Beginning of the day is the cleanliness in our costumns. Our mother does not take bath unless whole house is swept and does not take tea unless she has a bath.

(ii) Nutrition: Need for balance diet growing foods, protecting foods, difficiency diseases, cooking methods—good and bad protein supplementary action complete protein multipurpose food.

(iii) Hygiene—Personal hygiene, environmental hygiene, ventilation, disposal of waste which contribute more in communicable diseases.

(iv) Family Health Care: A.N.C., safe delivery immunization, family Welfare Services.

(v) Control of communicable and noncommunicable diseases, knowledge about nature spread and prevention of diseases.

(vi) Mental health: There is a change in society from agricultural economy to industrial economy people do not know each other in person, indifferent behaviour of people., breaks mental peace of them.

Prevention of Accidents

Result of complex modern life; road safety rules to be followed. Precautions are to be taken at the places of accidents—railways, buses, mines factories, home accidents—probably children are prone to meet accidents with fire instruments, sharp metal instruments wet places, darkness.

Use of Health Services

People should be aware of health facilities available for them. They should participate the health programmes and make use of it, take an advantage of it and should not misuse the facilities.

Principle of Health Education

We should provide knowledge about health in such a way that they should feel to accept, adopt and practice the things for that some principles to be kept in mind. (i) Interest. (ii) Participation. (iii) Known to unknown. (iv) Good human relationship. (v) Learning by doing. (vi) Motivation. (vii) Comprehension. (viii) Reinforcement. (ix) Soil seed sower (x) Leader.

(i) Interest: Unless there is an interest we will not listen to others unless there is an examination students will not study so we have to talk/discuss with the patient about his own interest. Choose health problem, talk about his problem. Don't talk on the topic which he or she is not interested e.g. the patient of leprosy to be taught about care of hands, feet, regular treatment and not the family planning.

(ii) Participation: Active learning person gets confidence and so there is easy achievement.

(iii) Known to Unknown: Start with where they are, collect the information about their costums, traditions, beleives. Some believes are scientific, some are not scientific but not harmful, let them practice which is scientific and not scientific, but not harmful. Even you should appreciate these scientific thing and new knowledge which is not known to them.

(iv) Good human relationship: half of the suffering is eliminated, by the way of treatment.

Half of the work is done by good behaviour. We should approach in such a way that we are welcomed accepted by them. A person is welknown by his qualities and not by his qualifications. A person of a good behavior is always trusted by the people. People beleive in him. To get confidence of people we just have to observe some humanity—e.g. give respect to elders say namaskar, say this programme is ours. Our community, our people. It does not need to pay a single pai or it does make any difference to us.

(v) Learning by doing: Learning experience is there, Chinease proverb explains the importance of learning by doing:

"If I hear I forget
If I see I remember
If I do I know."

active participation of all sensitive organs is there. So Learning is effective.

(vi) Motivation: Stimulate the desire by incentive, reward or punishment for sterilization is a kind of incentive. Two increments to them who have only child, this is a kind of reward. Increment is stopped —after three children for men. Meternity leave is not allowed after three children is a punishment to get done our work i.e. target of Family Welfare.

(vii) Comprehension: We must know the community what it is—It's education understanding, language, custom, traditions, cultures. Then only we are able to discuss with them.

(viii) Reinforcement: All can not learn with one instruction, so repeat the instructions/knowledge. Repeation makes learning fixed on learners mind. All can learn what was missed at first instruction.

(ix) Soil Seed Sower: Soil is the community in whom we are going sow the seeds of knowledge seed is the knowledge about health. It should be scientific and receiptive Sower: sower—is the media—which must be effective.

(x) Leader: We always learn automatically from elders/whom we respect so choose the leader from community like Patil, CHV, Sarpanch. They are representative of the community. They know the community more. They know their problems, your work will be easily done with the help of community leader—which you alone can not do with much efforts. This work of Health Education should not be a routine impersonal programme. Total involvement is necessary.

(x) Administration: Government has responsibility to make all the health programmes at the reach of the community. Knowledge about health is to be provided upto the periphery level in the community. So followings establishments are there. There is an international Union for Health Education established in Paris in 1951. This union collaborates closely with WHO, it is a nongovernmental nonpolitical agency.

At National Council of Educational Research and Training: attempts are being made by the Council to introduce Health Education.