Public Health

Adult Group Teaching
(in four sections)

By

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Section—1

An Introduction to Learning

Health teaching is one of the important functions of every health worker, and a primary function of the Public Health Nurse, Health Visitor and Sanitarian. Health teaching includes organized individual and group instruction. Health teaching can be carried out in homes, schools, factories, clinics, hospitals, and among special interest community groups.

The main purpose of health teaching is to persuade people to alter or discard certain habits that are known to be harmful to themselves and/or to others. This is a difficult task, requiring different methods of approach. The method selected must be adapted to the interests and experiences of the group. Social Scientists have found, through studies and research, that people generally do things in a certain manner because they derive satisfaction and pleasure from the process; because they do not know, or have not tried any other way; because other people are doing it that way, or because of reward or punishment. Since culture patterns and habits are a basic part of life itself, any thought of change meets with resistance in all people, in some to a less degree and in others to a greater degree. It is the responsibility of health worker to help people understand the difference between superstition and old habits and scientific truth about health, so that they will change those habits that are detrimental to health.

An attempt is made in this chapter to develop some educational principles that may be used as a guide in group teaching. Individual teaching will be discussed in techniques concerned with the home visit, interviewing and in procedures.

Informal adult teaching is stressed throughout. Organized group instruction should be a part of the nurse's plan of work and scheduled in the same way that clinics and home visits are planned and scheduled.

The material presented here is brief and in outline form. The Public Health Nurse and Health Visitor should study, attend conferences, and participate in educational meetings, and constantly evaluate her work as means of improving teaching skills.

A. Responsibility.

It is the responsibility of the Health Officer and his staff to provide opportunity for adults to learn the fundamentals of healthful living so that they exercise their adult power, initiative, intelligence, and creative ability to bring maximum health to the home, and to the community. Having this responsibility, the Health Officer expects the Public Health Nurse and other members of his staff to organize and participate in group teaching. The plans for group organization and the outline of subject matter should be discussed with and approved by the Health Officer. Senior members of the village are responsible for, and influence change in health habits so that
they too should be a part of any planned educational programme of health teaching. The heads of the family are responsible for health habits and they have a right to learn.

In adult teaching the health worker is dealing with physically mature adults, yet many adults, because of circumstances, think as children. There are many emotional blocks to learning in the adult stage, particularly among illiterate groups. School children are learning to read and write while many parents are unable to sign their name. Children are learning principles of health which they would like to see adopted in their homes. Customs, traditions, and superstitions exist to such an extent however that, unless adults have an opportunity to understand scientific truths, little change is likely to occur.

B. Motivating Forces — Basic human needs.

Fundamental life needs are the primary motivating forces of learning.

(a) Physical needs like hunger and thirst compel action. One learns what to do, and the skills for doing it, to get enough food and drink to satisfy this basic need for survival.

(b) Need for security is four-fold:

(1) For economic security a man needs enough income to feed, clothe, house, and educate himself and his family.

(2) For social security a man must be accepted by his group; he must have a feeling of being wanted.

(3) For spiritual security a man must be a respected member of a religion of his choice.

(4) For personal security a man must have protection against ill health brought about through animals, insects and other human beings.

(c) The need to love and to be loved is one of the basic needs of new born babies, and continues to be a need throughout a person's life. The love and affection shown to one by his family and by his joint family group, and the love he shares with his family serves as a safeguard and security in meeting this need.

(d) The need for recognition is present even in a child, as evidenced by his crying, being naughty, being nice, or whatever causes him to gain the attention of other children and adults. A mature, well adjusted adult seeks recognition by exercising leadership and/or by excelling in a job.

The health worker must recognize the basic human needs as natural urges that must be satisfied if the individual is to develop into a well-rounded person. She should have a working knowledge of programmes that help people help themselves such as the community projects and co-operatives; and she should keep informed on all plans and programmes of the local, State and National Government and Societies.

A primary motivating force in learning is to have confidence and respect for the teacher's knowledge, skills and in her sincerity of purpose. To strengthen her position and to be effective in helping a person and/or family, the health worker must be interested in all phases of community development, and it is mandatory to have a working knowledge of the plans and progress made in all aspects of preventive and therapeutic health programmes such as: safe water and safe disposal of sewage; malaria; tuberculosis; maternal and child care; health services; nutrition and all other programmes designed to bring health to the community. A common attitude exists among some health workers relative to their "sphere" of work, for example: the health visitor may feel that environmental sanitation is not her business but the work of the sanitarian; she may feel that the mother and baby is her "sphere" of work. She must understand that the health of the mother and baby is dependent on the water supply and on the control of diseases spread by human feces, flies and other such vectors. Sanitation is everybody's business. Nutrition is everybody's business too. By serving all the health needs of the whole family, the health worker may be instrumental in motivating action that is needed to eliminate the causes of ill
health.

C. Factors that affect adult learning.

1. Learning is a continuing process: Increase in the span of life from 27 years in 1935 to 35 years in 1955, makes it important to recognize two facts, namely:

(a) That adults can learn safe ways of living and they can change habits that are detrimental to health, otherwise the span of life might have remained static—many people learned many things during these 20 years.

(b) That opportunities should be provided for adults to learn and to practise healthful living.

2. Interests: The natural social changes that occur during life bring a shift in interests caused by adjustments to added responsibilities.

(a) Infancy, toddler and school age (dependent stages) gives way to young adulthood, in which the individual assumes responsibilities for himself, and, often times, for his parents, sisters, and brothers.

(b) Middle age is concerned with ever increasing responsibilities to meet obligations for getting ahead with work, for educating children, and for gaining recognition and position in the community.

(c) Old age, in most communities in India, brings undisputed authority and rule to the elders. Their responsibility is great for:

Finance, preserving traditional practices and maintaining the family unit.

Since the older members of the family are usually key people in the community, it is felt that they must accept and promote change before progress can be made toward improving health conditions. They are the “change agents”. If they change a habit—others will follow. The health worker must be alert and enlist the interest and the aid of older people. A class for grandmothers and grandfathers may be the first and most important class to be organized.

D. How adults learn.

1. The first requirement of learning is the desire to learn.

It is thought that a person who comes to a clinic for medical care has a great desire to learn about the cause of his condition, how long it will take to get well, and how recovery can be speeded up. His desire to learn increases when he talks with the doctor and the nurses who give relief to his personal hurt.

Often times a dire calamity, such as the loss of a child, can speed the desire to learn, and open the way for the health worker to introduce needed changes in health practices, for example: during a service of four years in a village, the Public Health Nurse urged the villagers to allow a trained dai to establish practice there. They refused because of loyalty to the untrained dai who had delivered most of the village children. When the son of the village leader died of tetanus five days after birth, the village leader provided a house and asked for the trained dai to come there to work.

2. The second step in the learning process is putting forth effort:

A person learns by actual participation (doing).

The learner must take part in some challenging situation that is related to his own experiences, for learning is an individual matter.

A person learns by a step-by-step process in practising the things he wants to learn.

3. The final step in the learning process is experiencing satisfaction.

Persons learn when there is some reward for learning. In the field of healthful living the satisfaction may be experienced in terms of feeling well after eating a balanced diet; seeing well after wearing properly fitted glasses; or enjoying the approval and commendation expressed by the teacher for a project well carried out.

(To be continued)