

20' Health Education

Health Education is a term commonly used by health professionals. It is a process by which individuals and groups of people learn to behave in a manner to promote, maintain and restore the health.

Alma Ata Declaration- 1978

Approach to Health Education.

- 1) Regulatory approach
- 2) Service approach
- 3) Health education approach
- 4) Primary health care approach.

Models of Health Education.

- 1) Medical model
- 2) Motivational model
- 3) Social intervention model
- 4)

Contents of Health Education.

- 1) Human Biology
- 2) Nutrition
- 3) Hygiene
- 4) Family health
- 5) Disease Prevention & Control
- 6) Mental health
- 7) Prevention of Accidents.
- 8) Use of health services.

Principles of Health Education.

- 1) Credibility
- 2) Interest
- 3) Participation
- 4) Motivation
- 5) Comprehension
- 6) Reinforcement
- 7) Learning by doing
- 8) Known to unknown
- 9) Setting an example
- 10) Good Human relations
- 11) Feedback
- 12) Leaders.

Practice of Health Education.

- 1) Audio-visual aids
- 2) Methods in Health Communication

Practice of Health Education

1) Audio-Visual aids

- Nothing is complete without A-V aids. It helps to simplify unfamiliar concepts, bring understanding when words fail.

① Auditory aids - Radio, Tape recorder, microphone, earphones.

② Visual aids -

No Projection - Chalk board, leaflet, posters, charts, models, exhibition; specimen.

Projection - Slides, film strips.

③ Combined AV aids - TV, Cinema.

2) Methods in Health Communication (X)

① Individual approach

② Group approach

③ Mass approach

① Individual approach

- During personal interviews in the consultation room - or during health visits

- to the home.

- Diet, Cause, Prevention, Hygiene are said.

- A hint from a doctor is more long lasting effect than volumes of printed word.

- The patients listens more readily,

allow them to talk as much as possible and be friendly.

Advantage - i) Ask about behaviour change

ii) Can ask questions:

Disadv → Can reach only less number of people

2) Group approach

- We have so many groups, children, mother, workers etc.
- We should not talk about TB to a pregnant women or child care to TB patients.
- So we have select the group correctly.

I) Chalk and talk (Lecture)

- Chalk as a visual component and talk as a auditory component.
- The group should be > 30 people.
- Duration - 15-20 mins.
- It is made effective by combining this with.

i) Flipcharts

- Series of charts/posters.
- Illustration of the topic.

- Each chart is flashed before group.
- Designed to hold attention of group.

ii) Flannelgraph

- Rough flannel fixed over wooden frame.
- Used for displaying cutouts, pictures.
- They have rough surface at back and self adhere to flannel.
- It helps to maintain continuity and a very cheap method.

iii) Exhibits - Objects, models, specimens etc.

iv) Films and charts.

Advantage \rightarrow Economical, lesser resource

Disadvant \rightarrow Learning is passive, Does not stimulate thinking, Health behaviour of listener not affected.

2) Demonstrations

- Prepared presentation to show how to perform a skill or procedure (Eg. lumbar puncture).
- It is carried out by step by step, and they ascertain that audience understands.

Advantage → Arouses interest, "Seeing is believing"

Learning by doing, Highly Motivational.

- Useful in ORS practice, construction of sanitary latrine, Installation of Hand pump.

3) Group Discussion

- Face to Face contact.
- Group size: 6 to 12 members.
- one group leader to initiate discussion.
- Prevent side conversation, to sum up.
- one recorder to record everything.
- Participants sit in a circle, visible to each.
- They arrive at a decision as a group not one.

Advantage → Very effective, Helps take decisions.

Disadvantage → Shy people not participate,

Dominating people, they may deviate from topic.

4) Panel discussion

- 4-8 qualified persons sit and talk about the topic, in front of large audience with a moderator.
- The chairman opens the meeting, with welcoming introducing the panel speaker, topic, and inviting the speaker.
- There is no specific agenda, or order.

- After the panel speakers over, the audience are asked to take part.
- The discussion should be spontaneous and natural, if difficult they may meet before and prepare the presentation.

5) Symposium

- Series of speeches on a selected subject.
- Each expert presents one briefly but no discussion among them like panel.
- Audience raise questions in end.
- Chairman summarizing whole session at end.

6) Workshops

- Consists of series of 4-5 meetings.
- Divided into small group and the individual work, solve a part of problem through their personal effort.
- They leave the workshop with plan of action for a problem.

7) Role Playing

- Socio-drama dramatized by a group.
- They enact a scenario observed on experience.
- The audience is not passive but actively involved.
- Followed by discussion, Group size 25.

8) Conferences and Seminars

- Commercialized CMEs.
- Usually held at large scale (National, State or regional).
- 1/2 day to one week, single topic or broad comprehensive.

3) Mass Approach → Mass Media

- Meant to Educate whole community.
- Useful in transmitting messages to people even in remote areas.
- Number of people reached is millions.
- One way communication, inadequate in changing behaviour.
- Can raise health consciousness of people.

- ① TV → Most popular, one way channel, creating awareness and forming opinions.
- ② Radio → Broader reach than TV in developing countries, cheaper than TV, Doctors can speak on WHO in online. Emails, online chat.
- ③ Internet → Fast growing, Information from WHO in online. Emails, online chat.
- ④ Newspapers → Reach only literate, low readership in rural areas.
- ⑤ Printed material → Magazines, pamphlets, can be shared within themselves, Detailed info.
- ⑥ Direct mailing → New in India. Sent directly to leaders like panchayat, village readers.
- ⑦ Posters, Billboards → Intended to catch eye, simple and artistic, Humour or fear are introduced to hold attention, Places where people spend more time (Bus stop, Railway).
- ⑧ Health museums and exhibitions → Printed literature are distributed, Persons explain each item.
- ⑨ Folk media → Keerthi, Katha, Folk song, Puppet shows, Roots in our culture.