

Health promotion education



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Health promotion or education strategies are applicable to all health problems and are not restricted to any particular health issue or particular group of behaviours. World Health Organization (WHO) (1986) explains that health promotion entails the processes which make possible people to enhance their understanding and control their health in order to improve their health. For a person to attain a state of full physical, psychological as well as social happiness a person or a group has to be able to recognise and understand goals, to satisfy their wants, and modify or deal with the environment as well as illness. Thus, health is viewed as a resource for daily life, and not the goal of living. More so, health is a constructive aspect stressing social as well as personal resources together with physical abilities. Consequently, health promotion or education is not only the duty of health sector, except it entails much more than a healthy life-style. This essay seeks to address the role that health education/promotion can play in empowering patients to take more responsibility for their own health.

A lot of present day and tomorrow's main causes of disease, disability and even death are issues which can be greatly reduced through preventive attitudes which are learned through health promotion or education in earlier ages and build through social as well as political strategies and stipulations.

However as Naidoo and Wills (2000): observes, Health promotion programs need to be harmonized through effective collaboration across all sectors, professions as well as health agencies, And should be conveyed in way which is sensitive to the culture of the people. Naidoo and Wills (2000) underscore the 1997 WHO Jakarta declaration which outlined five main approaches for effective health promotion /education.

- Formulating a healthy public strategy
- Creating a supportive atmosphere
- Strengthening community action plan
- Development of personal skills and abilities
- Reorientation of health services

Partnership working

Health promotion delivery can be highly improved through creation of partnership working as noted by the WHO. Widening the foundation of health intervention approaches implies tackling socio-economic together with environmental aspects, improvement of accessibility to health services, reduction of inequalities in addition to targeting health education to each and every group regardless of age, gender, and status or age differences.

Addressing health inequalities

In order to formulate an effective health promotion strategy, health inequalities has to be addressed and taken as part of formulation of education plan (Braun et al, 2000). Professions in all health bodies have a duty of delivering successful local health interventions in order to decrease inequalities. In addition to that, all professions in health agencies have a duty to address health promotion or education and preventative measures which aim at reducing effects caused by sore throat

A lot of suggestions put forward by Braun et al (2000) can be undertaken within a local set-up, for instance raising the intake of advantages within a suitable group, formulating health education in schools, promoting waking <https://assignbuster.com/health-promotion-education/>

and making sure that all the requirements from all groups of people even the ethnic minorities are considered when formulating health policies.

Frameworks

There are a number of models which have been formulated in order to help in health promotion, these models are basically grouped into two main groups which are:

- Health promotion concepts which describe health promotion as a scope of interventions (formulated by, Tannahill (1985); French and Adams (1986); Beattie (1991))
- Health promotion model which analyse health determinants and suggest responsive measures (Laframboise (1973); Raeburn and Rootman, (1989); Hancock, 1993)

In these two main classes of health promotion models, Naidoo and Wills (2000) explains that, the health practitioners are viewed as leaders (figures with power) or as facilitators of activities (negotiators)

Beattie's model of health promotion

According to this model, there are four main aspects entailed in health promotion. These main aspects are:

- Health persuasion
- Personal counselling
- Community development
- Legislative action

These four main aspects contribute in attaining a full picture when formulating a local health promotion action strategy for partnership collaboration. Ajzen, (1991) clearly observes that, all health promotion models measures require understating by the patient's own intent to change his/her behaviour. The concept of intended behaviour by Ajzen (1991) is among a number of behaviour modification outlined in health promotion main steps. According to this concept, there are three main steps regarding an individual's intended behaviour these are:

- A person's attitude is determined his/her thinking regarding the consequences
- The expectations from other people
- The person's supposed control and values in their capacity to change

Every agency or persons involved in health promotion is highly encouraged to apply these concepts in supporting their individual initiatives whilst formulating a multi-partnership long term plan.

Nurse practitioners

Nurse practitioners have more experience which they gain through extra training they get which gives the ability to see patients who have various minor illnesses as well as injuries. This entails going through the history of the illness, undertaking a physical analyses, instigating blood tests or performing any other test as it may be indicated. In addition to that the nurse practitioner has a duty of carrying out a diagnosis as well as giving treatment options to the patient. It is against this background that makes these nurse practitioners to be in a better position of performing health

promotion/ education in order to empower patients with knowledge on how to manager a number of minor illness which are common but not alarming. As such nurse practitioners are in a central position of empowering patients on sore throat management.

Minor illness: Sore throat

Many of minor illness such as sore throat can be mainly be managed through O. T. C (over the counter) non prescriptions drugs which are able to offer relief to the symptoms. Nevertheless, it is Robbins et al (2003) notes that all minor illnesses have a possibility of turning out to be serious. Patients should be advised that they should seek for the services of a doctor or a nurse in case the symptoms of such an illness are sore throat turns to be severe or in case there is sudden change of symptoms upon taking the OTC drugs, or when they are not working. Robbins et al (2003) observes that, patients with sore throat can be advised not to sure any outdated drug or antibiotics which they used in the past, this information are also pertinent to patients with other minor illness.

Sore throat management

Sore throat is among the most common minor illnesses which affect persons of all ages all over the world. However, children have been known to suffer from sore throat more than adults, on an average it has been established that children suffer from sore throat five or six times every year (Health Development Agency, 2004). In UK, about 90 of children in pre-school age group are known to look for consultation form a doctor at on point or another, mainly for symptoms which are associated with sore throat. Sore

throat is among top ten common illnesses which patients come for consultation in primary care, whereby children seek consultation than any other group. More so, about one child in every 7 children who consult because of sore throat will again seek for consultation for sore throat after some time (Health Development Agency, 2004). These numbers have changed just slightly over the years. Adult Patients on the other hand on many occasions show anxiety as well as hopelessness when dealing with sore throat. Such problems and worries can be effectively addressed through the provision of reliable clear information about health, through health promotion activities. (Health Development Agency, 2004)

Nursing practitioner can use health promotion to increase the ability of patients to manage sore throat. Sore throat management in general nursing practice and advancement to tonsillectomy in some cases lead to noteworthy use of health care services resources. In many cases, sore throat condition is comparatively minor and also self restrictive. Sore throat has got very little if any lasting adverse health consequences. Nonetheless, a considerable proportion of patients undergo undesirable morbidity and inconveniences caused by sore throat. Due to this many patients seek health practitioners who may keenly treat them, using antibiotics of substantial costs and questionable efficiency. (Health Development Agency, 2004)

Basing on data from national health care records, sore throat is ranked as the eighth very common appearance in primary health care for many people (NSH, 2000). This translates to about 1 person in every 30 people. National Health Services (NHS) has averaged that annually, there are 0. 1 consultations carried out concerning sore throat. Assuming that each

consultation made cost 10 sterling pounds, then it cost the National Health Services (NHS), about 60 million sterling pounds every year, before adding any other cost of investigating or treating sore throat. Hence, health promotion becomes very important in reducing these costs and in empowering people on how to manage sore throat.

In addition many of sore throat illness gain exceptionally little from treatment through using antibiotics (Schalock 2000) Yet again; the use of these antibiotics continues to be common with many patients with sore throat receiving antibiotics. But, unnecessary prescription of antibiotic only results in wasted health care resources, results in a cycle which promotes additional consultations in future for same sore throat illness and as well contributes a lot to the antibiotic resistance problem.

Factors which influence people to take a decision to seek consultations comprise concerns, beliefs, knowledge and also expectations. Patients often dread any illness, and they mainly worry that they may not be capable of recognizing symptoms of a grave ailment (Ajzen 2002). Some patients get anxious of 'bothering' their normal practitioners with sore throat illness. At the same time these patients do not have knowledge about how best to treat a sore throat. Patients might have certain belief regarding the causes of sore throat illness (Ajzen, 2002), the implications of the sore throat symptoms and also the effectiveness of drugs to treat sore throat.

Lazenbatt et al (2001) explains that, offering patients with information which is written regarding sore throat illness may assist to decrease the anxiety these patients suffer and improve the patient satisfaction as well as

enablement. More so, the use of these written information can reduce consultations rates and use of antibiotics to cure sore throat.

Expectations with which patients come at consultations rooms may have an impact on the way patients may be treated. There is no doubt that a patient who walks into a consultation room being expected to be treated with antibiotics may end up being prescribed by an antibiotic particularly from a drug store. But, studies have indicated that patients value getting a thorough assessment, explanations, assurance and guidance or advice more than receiving prescriptions. Such revelations show the importance and the value of these patients being offered health education regarding the management of their illness, in this case sore throat. (Lazenbatt et al 2001)

Health promotion

The present scope of nursing does acknowledge the key role of nurse practitioners in health promotion /education, prevention of diseases and treatment of these diseases, sore throat management through medications as well as through non medication treatment. The public frequently seek out nurse practitioners as their main source of health advice and also care for a number of minor illnesses since nurse practitioners are easily assessable. In 2001 a report by Department of Health (2001a) underscored the importance of nurse practitioners in health promotion and highlighted the advantages of using these practitioners in health promotion at the same time calling for them to collaborate with other professions in health promotion/ education regarding minor illness.

Sore throat

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A number of measures have been formulated which nursing practitioners can use to in promoting health education regarding sore throat. National Health Services (NHS) recommends that the following steps should be followed by the practitioners in health promotion:

- Throat swabs need not to be done as a routine in sore throat examination
- Practitioners should not rely on clinical examination to distinguish between bacterial and viral sore throat
- Do not perform rapid antigen routine in the case of sore throat, but it is suggested that research has to be carried out through the use of antibody titres.

Patients need to be told by nurse practitioners that the common cause of sore throat is a virus or bacteria, though some other causes can also lead to sore throat. But, when one gets a sore throat it is possible to manage the sore throat by undertaking the following steps.

- Taking of pain killers, in specific soluble analgesia, dissolve two tablets and take them three times each day, it has been proved to be highly effective
- Rest your voice when having sore throat as much as you can
- keep off smoking if you smoke and avoid smoky surroundings
- Increase the amounts of fluids you take, keep your self warm and try going to sleep early.

- Take antibacterial lozenges only or together with throat sprays which contains anaesthetics to get pain relief.

When a patient takes these steps, a lot of sore throat cases will be treated without necessary going to the get a doctor or seeking other health practitioners' services. However if a person takes the above mentions steps and still feels the following, then he/she needs to see the doctor.

- Relentless sore throat
- Having problems in swallowing or having severe pain when swallowing
- Experiencing fever or chill
- Wheeze for those patients who suffer from asthma or having difficulties in breathing
- Experiencing lethargy

Sore throat Management

- Paracetamol is successful and efficient in treating symptoms related to sore throat when administered within 48 hours.
- Patients can also use ibuprofen effectively to manage symptoms related to sore throat if they take it within the 48 hours.
- Patients need to take paracetamol as a medication of analgesia caused by sore throat, putting in consideration the high dangers which are related to other analgesics

When using antibiotics patients, it is important the nursing practitioners as well educate the general public and patients in particular on management of

sore throat in relation to antibiotics. In particular these information needs to be delivered:

- Penicillin seems to have a crucial (though small) advantage against analgesics/antipyretics specifically in initial lessening of symptoms in patients who have harsh symptoms of sore throat. Nevertheless, antibiotics must not be taken routinely to bring about symptomatic relieve in cases of sore throat.
- Sore throat need not to be treated using antibiotics particularly to avert the rheumatic fever development or severe glomerulonephritis development
- Using antibiotics can avert cross infection of sore throat within the group A beta haemolytic in situation where institutions are closed for example boarding schools or barracks. However, the antibiotics must not be routinely applied to avert cross infection of sore throat within the common community. (Roberts, et al, 2002)

To prevent suppurative complication in sore throat infection does not imply specific sign for antibiotic treatment.

Preventing sore throats

It is not possible to fully prevent sore throat; however the nurse practitioners have to educate the patients on how to reduce the risks and the manner in which to take care so that one can avoid getting sore throat as much as it's possible. The following steps are important preventative measure which needs to be undertaken by each individual:

- Taking a well balanced and healthy meal with lots of vegetables and fresh fruits
- Getting enough sleep in the night and enough rest
- Not smoking
- Avoiding surroundings which are smoky as much as one can manage

Indications of tonsillectomy in sore throat

In cases where tonsillectomy develops as a result of sore throat, then patients have to know that the following aspects may occur:

- They may suffer five or extra cases of sore throat each year, or may have sore throat symptoms through out the year.

It is recommended that patients should take six month duration being watchful of any symptoms before tonsillectomy in order to establish strongly the manner of the symptoms and permit patients to take into account the entire implications of having an operation.

The moment a decision is reached to perform tonsillectomy, then the operation should be performed as quickly as possible, in order to maximise the duration of benefit prior to natural resolution of symptoms occurring (without having performed tonsillectomy).

The health practitioners should know that sore throat which is related with respiratory problems or stridor is an utter warning for a patient to be admitted. But, at the same time practitioners have to be aware of the basic psychosocial influences among patients coming to seek medication because of sore throat (Morrell et al, 2000).

Health promotion evaluation

In order to make any program more effective it is important that it should be evaluated. Nurse practitioners are advised to put into consideration all measures which have been taken. Planning processes, implementation of the program and evaluation of whole processes are all important elements of health promotion. As Whiteland, (2001) notes, planning and implementation phases of any specific health associated programme are essential for making sure that the program is successful. Have an effective plan and implementation process allows the practitioners to anticipate for proper evaluation processes. When carrying out health promotion/ education many nurse practitioners do not normally put into consideration every element of the program processes. In many cases planning stage is the one that is emphasized. Whiteleand (2001) adds that it is not common to see a proof of evaluative measures in health promotion. But:

- Evaluation is important since it offers the crucial tool for health promotion practitioner
- Knowledge base which shows various health promotion evaluation methods as well as approaches are need to effectively implement a successful health promotion.

Without carrying out an evaluative processes, there are reservations that health promotion program may not achieve its objective, and may fail to settle those funding the program. According to Schalock, (2000); South and Tilford (2000): there are a number of reasons as to why it is imperative that health practitioners undertake evaluate health promotion programs. For

example, practitioner has to evaluate the level and degree to which the promotion program has and is attaining its objective. In addition to making sure that the program is cost-effective.

In accordance with the above mention reasons to appraise health promotion plan, are the rising rationalisation programs of health services. The present economic situation in UK's National Health Services (NHS), together with latest deep-seated quality related changes, has resulted to increased attention of examining health promotion (South and Tilford, 2000; Raphael, 2000). In addition to that, Tones (2000) highlights two major classes of evaluation, these are, assessing what has been attained and assessing the manner in which the objectives have been attained. Thus, nurse practitioners may use a number of available evaluation methods such as evidence-based, cost-effective or performance management (Lazenbatt et al, 2001; Morrell et al, 2000) to assess how effective health promotion regarding sore throat management is.

The long-standing viewpoint

Tones (2000) observe that, health promotion programs should incorporate socially empowerment as well as enabling activities. The program discussed here regarding sore throat was aimed at empowering patients to effectively control sore throat and reduces costs incurred in sore throat through promoting healthy lifestyles among measures encouraged. However, for health promotion program to be more effective, it should involve the whole community. The Beattie health promotion discussed earlier in this paper puts emphasis on building relations which last longer, and making sure that public

health promotion/education, prevention, and protection are undertaken by the whole community, and not only nurse practitioners.

For the health promotion program to be more effective, Bakley (2001) proposes that health promotion /education has to create a healthy public strategy, create supportive atmosphere, foster personal or group abilities and skills, enhance community action program, and re-orient health services.

Conclusion

Health promotion/education is programs carried out in order to enable people increase their control and improve their state of health. The aim is to make people to attain complete physical, psychological and social welfare. A person or a community must be in a position to identify and acknowledge aspirations to satisfy the needs as well as modify or manage the environment, or illness. Health is taken as daily a resource which needs to be maintained. There are a number of models which have been formulated that by different health experts who are used in health promotion strategies, and Beattie, (1991) health promotion model is commonly used. As it can be seen, sore throat is a minor illness which should not cause any alarm to a patient yet many people when suffering from sore throat end up with a lot of anxiety and using expensive antibiotics which is not really necessary. Thus, health promotion becomes more important in sensitising people on how not only manage sore throat but any other minor illness. But, for any health promotion program to be effective and successful, it should be monitored and evaluated to measure its achievements and ensure that it attains its goals and objectives.

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