

# [What is health promotion health essay](https://assignbuster.com/what-is-health-promotion-health-essay/)

[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/)

\n[toc title="Table of Contents"]\n

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1. [Problems of healthy eating](#problems-of-healthy-eating) \n \t
2. [What is happening in Ireland health promotion?](#what-is-happening-in-ireland-health-promotion) \n \t
3. [What strategies and policies are in place?](#what-strategies-and-policies-are-in-place) \n \t
4. \n

\n[/toc]\n \nWhat exactly is healthy eating? Many people think of healthy eating as cutting calories or reducing fat (Carpenter & Finley, 2005). There is much more to healthy eating than just reducing calories and fat. For example one can have a low fat diet but at the same not get enough milk and calcium-rich foods. This may cause such risks as osteoporosis or other health problems. An over reliance on foods that contain large amounts of saturated fats, salts and sugars, along with a low intake of fruits, vegetables and cereals leads to serious health consequences such as obesity and associated social rejection (NHMRC, 2003). This has lead to many interventions focusing only on nutrient intake. However, a focus on food patterns, food intake, the experience and enjoyment of food may be more likely to develop long lasting positive effects towards healthy eating. A poor diet is an important risk factor for many diseases, including obesity, cardiovascular disease, and diabetes (WBO, 2003)

## Problems of healthy eating

There are many causes for concern about children’s eating. Do children have the knowledge of different food groups? Poor food selection and preferences for only a small number of foodsMeal skipping (especially breakfast)Excessive energy consumption and the increasing prevalence of overweight/obesity among primary school children. Poor nutrition may lead to high absenteeism. The history of health promotion and What is happening in the world of health promotion? A schools regard for health education should be expressed through the school environment, values transmitted by personal example of teachers and other people working in the school. Many aspects of school can influence children. In school there are two curriculums, the hidden curriculum and the taught curriculum. The hidden curriculum is what the children picked up from teachers outside the class room and the taught curriculum is what is taught by the teacher. Health education before the Second World War tended to reflect the medical view of health (Naidoo & Wills, pp284. 2006). It was in the 1950s that saw health promotion been more child-centred and autonomy and responsibility started to develop through discover learning. Research shows promoting health of children through schools has been an important goal of WHO, UNESCO, UNICEF and other international agencies. The (WHO) expert committee on school Health Services noted as long as 1950 that " To learn effectively, children need good health" (WHO, 1997). Sense then the international agencies presented meetings to improve school health which include: Teacher preparation for health education in 1959, planning for health education in schools in 1966 and health education for school aged children 1985. It was in 1984 the World health organisation (WHO) held its first international health promotion conference in Canada and a broad new understanding of health promotion was adopted. It proposed a revolutionary change for health promotion in 1985 (Kickbusch, 2003). The conference was primarily responding to the growing public movement for health promotion around the world. Overweigh and obesity are becoming increasingly prevalent problems worldwide, 1 in 4 UK and Australian children and 1 in 3 US children are overweight or obese (Yin & Quinn et al, 201The concept that schools have a role in promoting health of children and young people is not a new one. For many years schools have been recognised as important settings for health promotion. (Fisher & Mukoma, 2004) stated that health education focused on providing information or developing skills and attitudes to help individuals make healthy choices about lifestyle or behaviour. These approaches, however, failed to demonstrate reductions in health risk behaviour (MacDonald & Bunton, 1992). In the 1980s the World Health Organisation (WHO) changed focus from the behaviour of individuals to the development of healthy settings. During the mid-1980s, health promotion in schools was under-developed and only seen as an ideology taking a back-seat to many other subjects in the curriculum. In the last decade the health promotion schools approach has gained momentum with many countries providing frameworks and guidelines for implementation. Research suggests that provision of nutritious school food enhances not only the child’s health but also allows the child to take full advantage of the education provided by improving attention levels and attention spans (DoH&C, 2003)What is happening in the Uk health promotion? An important development for the UK in the early 1990s was advent of national strategies for health (Ewles & Simnett, pp 123. 2007). Health promotion had a key role in these strategies. The national audit office issued a report concluding that the strategies were making an impact on health but progress was slow. Deaths from heart diseases for example were also cut. Rates of overweight and obesity have roughly doubled every 10 years over the last few decades (Evans, pp34. 2009).

## What is happening in Ireland health promotion?

The creation of health-promoting schools show that people cares about each other’s well-being and the reduction of health problems. Adequate nutrition during childhood is critical to promote optimal growth and development and is essential for realizing good health in adulthood (Sharlin & Edelstein, 2009). Studies looking at the children’s food consumption indicate that considerable problems still exist. Research from the " Health behaviour in school-aged children survey 2006" reported daily fruit consumption for children aged eleven in Ireland. Reports show that 47. 9% of girls and 37. 7% of boys consumed fruit daily, (WHO) The World Health Organisation (2006) also presented findings for daily vegetable consumption. Figures showed that 46. 5% of females and 35. 5% of boys reported eating vegetables at least daily. Daily sweet consumption for girls was 31. 4% and boys were 27. 2%. Findings showed that 16. 9% of girls and 18. 5% of boys reported daily soft drink consumption (WHO, 2006). Although these figures show that more females consume fruit and vegetables than males, it also shows that more females consume sweets than males. Research shows 87. 4% of girls and 80. 3% of boys are overweight in Ireland (WHO, 2006)

## What strategies and policies are in place?

SPHEFood and drink are a vital part of our daily lives. They play the essential role in the development of the human being (Healthy food for all 2012). For children and young people to achieve their full potential, it is necessary that they eat healthily. Children may carry lifestyles into adult life and it is schools that lay the foundations for them. Initially led by the health sector, a partnership between health and education has enabled the more widespread acceptance of school-based approaches to health maintenance and improvement (Gabhainn, O’Higgins & Barry 2010). Ireland was one of the first to adopt the Health Promoting Schools (HPS) approach. (NCCA) set out the curriculum for primary schools in Ireland in 1999. A compulsory subject known as social, personal and health education (SPHE) was introduced. SPHE provides particular opportunities to foster the personal development, health and well-being of a child, to help them to create and maintain supportive relationships and become active and responsible citizens in society (NCCA, 1999). Through the SPHE programme children can develop a sense of personal responsibility for their own health and for the decisions and the choices they make now and in the future. The ways in which children live and behave in primary school may have a significant influence on their health and well-being in future years. SPHE is divided into three strands: Myself, Myself and others and Myself and the wider world. Each of these strands are subdivided into a number of topic areas. The NCCA (1999) state that In fifth and sixth class the child should be enabled to:

Food and nutritionappreciate the importance of good nutrition for growing and developing and staying healthyrealise and accept some personal responsibility for making wise food choices and adopting a healthy, balanced diet, Exploring and examining the food pyramidrecognise some of the important nutrients that are necessary in a balanced diet and the food products in which they are foundmacro-nutrients: protein, carbohydrate, fatmicro-nutrients: vitamins and mineralsexplore the factors that influence food choices such as cost, advertising, demand, peer pressure, advertising and packaging, value for money, time for shopping and for cooking, ideal body imagesexplore and examine some of the illnesses particularly associated with food intake or special health conditions such as coeliac, diabetic, anorexia, bulimia, the dietary needs of different age groups and individualsbecome aware of the importance of hygiene and care in the preparation and use of food using before sell-by date, reading contents, not chopping cooked foods and uncooked foods on the same board. The Irish Governments National Health Promotion Strategy was set in place between 2000 and 2005. Its aims are to have every school promoting healthy eating habits and healthy body image among school-going children and young people. Every school had to facilitate the implementation of health education and health promotion programs. Promotion of healthy heating in schools is important to ensure that children can choose a healthy diet now and later in life (Health promotion department, 2005). The national council for curriculum and assessment (NCCA) states that Developing health-promoting practices through his/her time in school can encourage the child to take increasing control over his/her own health and help to establish and maintain healthy behaviour from an early age (reference). Healthy eating and health promotion can have a major impact on children, in the present day, in their future lives, and indeed their family’s lives. Consequently, one seeks to find out the children’s current knowledge of healthy eating and compare this to the recommendations of the State. The Irish Heart Foundation (2011), state that maintaining a healthy weight involves balancing the energy taken into the body (consumption) with the energy used by the body (activity). The lack of this nutritional knowledge often leads to unbalanced dietary patterns, with excesses of fat and sugar (Thomas, 2007)An effective school health promotion programme can be one of the most cost effective investments a nation can make to improve education and health (WHO, 2013)Healthy eating determines children’s energy levels and physical performance. Their brains are also hungry for energy and nutrients so healthy eating is vital for optimising their mental performance, too (Bean, 2002). On the other hand, eating the wrong foods may reduce their physical and mental performance. Insel, Turner & Ross (2010) state as a child’s environment expands, more and more external factors influence their food choices. They also state that It is estimates that children spend more time watching television than doing most other activities. Children spend a considerable amount time in school between the ages of three and sixteen. Therefore school is as an important context for health promotion because it reaches great proportion of the population. However, children are not in school for ever. Schools are constantly competing against commercial interests like fast food and convenience foods. There should be a steady progression towards a more detailed knowledge and understanding of the workings of the body and responsibility for one’s health at the age of ten to twelve. Young people’s experiences in school influence the development of their self-esteem, self perception and their health behaviours (Naidoo & Wills, pp283. 2006)It offers opportunities for, and requires commitments to, the provision of a safe and health-enhancing social and physical environment (World health organization 1993)It has been demonstrated that longer television watching is linked to a higher consumption of salted and sugary snacks in children (Hofman, 2012)There is evidence that many obesity-promoting behaviours including unhealthy eating habits that are learned during childhood, track to adulthood (Hofman, 2012). Parent’s lifestyle’s has a significant role to play in the development of a healthy diet in children. It is clearly makes more sense to encourage young people to adopt healthy lifestyles than to attempt to change unhealthy behaviour patterns in adulthood. A nutritious balanced diet provides children with the daily energy they need to play, explore, experiment, learn and form relationships with others, while building the foundations for future physical health and wellbeing (Underdown, 2007). Effective education about health is important, children need to know how their bodies work, and how best to look after them (Pike & Forster, 1995)Although children possess innate abilities to regulate energy intake based on their needs, children tend to lose this ability as they age and become responsive to environmental influences and increasingly take their behavioural cues from their surroundings (Sharlin & Edelstein, 2009).