

Essay on community teaching work plan proposal

[Health & Medicine](#), [Diabetes](#)



Planning Before Teaching:

Epidemiological Rationale for Topic

Obesity and diabetes were found to rate high compared to the State averages in South Orange Village Township. The obesity and diabetes rates stand at 25.3% and 9.4% respectively against the state's, 23.3% for obesity and 8.3% for diabetes. There is secure food availability, provided by many grocery stores; 3.95/10,000 populations, compared to 2.90/10,000 populations for New Jersey State. There are also full-service restaurants, which serve the needs of the population (City-data.com, 2012). In respect of this, the group shall teach the community about the causes, effects, and levels of obesity and diabetes in South Orange Township. This has been deemed important because the data by the city-data.com has not been accessed by a significant number of South Orange Community members. The group will also teach about the interrelationship between obesity and diabetes. In addition, the group will teach the community about the available primary prevention options that every household would find easier to practice, and importance of health promotion shall be emphasized.

Nursing Diagnosis:

Nursing diagnosis shall be drawn from health promotion diagnosis perspective, because these health conditions: diabetes and obesity are attributed to poor feeding habits. From the findings, it could be concluded that there is general good health in South Orange Community because health issues have been well articulated.

Readiness for Learning:

The group will assess the level of readiness for learning among South Orange Community members by observing the level of attendance and participation among the community members. The community will be involved in discussion of the topic: their views will be collected and assessed to find out whether they match healthy living. Our group will also assess the degree of willingness by individuals to take home health information given by the CLC group.

Learning Theory to Be Utilized:

The learning process will involve interaction between the CLC team and the community members. The group will lay out the guiding principles of interaction during the teaching work, where we shall take the guiding role, while the community members shall participate by contributing on the topic and seeking for clarifications. The goals for devising this method of interaction is to allow for participatory learning process; where the community members can feel comfortable to share information on health issues, and develop willingness to absorb new information. The key issues that will be discussed entail nutrition issues, with focus on developing healthy feeding patterns; this would help to reduce the rates of obesity and diabetes among the children and adults.

Goal: Healthy People 2020 Objectives

D-1: Reduce the annual number of new cases of diagnosed diabetes in the population.

D-14: Increase the proportion of persons with diagnosed diabetes who

receive formal diabetes education.

D-16: Increase prevention behaviors in persons at risk for diabetes with prediabetes.

NWS-9: Reduce the proportion of adults who are obese.

NWS-10: Reduce the proportion of children and adolescents who are considered obese.

The HP2020 objectives will be used as goals for the teaching because the focus on the reduction of diabetes and obesity rates by encouraging healthy feeding patterns.

How Does This HP2020 Objective Relate to Alma Ata's Health for All Global Initiatives Both HP2020 Objective and Alma Ata's Health for All Global Initiatives champion for non-discriminative primary health care, and vest the role of achieving health goals upon the world governments. In this sense, all the governments have taken the responsibility of ensuring proper health of their citizens by articulating health issues in the state policies and programmes.

Develop Behavioral Objectives (Including Domains), Content, and Strategies/Methods:

Creativity:

Our group will devise teaching skills that would encourage interactive sessions with the community members. The group will incorporate question and answer sessions to allow room for making clarifications. Comments and recommendations from the community members will be welcomed for consideration in the policy making process.

Planned Evaluation of Objectives (Outcome Evaluation):

D-1: Reduce the annual number of new cases of diagnosed diabetes in the population- Annual percentage of diabetes rates by computing the diabetes figures against the community population and comparing with the previous rates.

D-14: Increase the proportion of persons with diagnosed diabetes who receive formal diabetes education- Education level by analyzing the number of health education programmes within the community.

D-16: Increase prevention behaviors in persons at risk for diabetes with pre-diabetes- Feeding patterns by observing the food menus for identified families.

NWS-9: Reduce the proportion of adults who are obese- The number of adult individuals who have improved from their conditions by checking percentage reduction in weight.

NWS-10: Reduce the proportion of children and adolescents who are considered obese- The number of children and adolescents who are obesity-free by checking the present versus the previous percentage rates of obesity.

- Planned Evaluation of Goal:

- The overall effectiveness of the teaching plan will be evaluated after four weeks. This will be identified by analyzing the feeding patterns of the community members. Whether they are observing healthy feeding or have maintained the unhealthy feeding.

- Planned Evaluation of Lesson and Teacher (Process Evaluation):

The teacher and the lesson will be evaluated by observing the level of

community participation induced in the community members. Low level of community participation would indicate lack of interest, and poor score for the teacher; information not well delivered to the community.

- Barriers:

The barriers that the CLC group would likely face in the community include difficulty in accessing the community members, insufficient time for teaching work, language barrier, bad weathers, and lack of willingness to participate by the community members. It was found out that in South Orange Township, the working population is very large; this would mean difficulty in assembling the community for teaching work because these people are so much involved in work. South Orange Village Township is fairly larger; therefore, much time would be needed to conduct a comprehensive health promotion education in the entire Village Township. The racial composition indicated that there is a mixture of people from different origins; this would create an element of language barrier, more so at the local level. South Orange is located at the boundary between humid continental and humid subtropical climate; this gives an impression that weather patterns would fluctuate at different times, thus affecting the smooth flow of the teaching process. In addition, certain individuals would not feel comfortable to participate in the health promotion education, especially the victims of the poor health conditions like the obese and diabetic persons, for fear of being ridiculed.

Therefore, the CLC group will organize the teaching activities both during the day and in the evening to cater for all. We will carry out health promotion/primary prevention education in areas of larger populations, and

network to reach those who reside in areas of sparse population. This would allow for proper coverage of the Village Township. The group shall also assign interpreters to enable the dissemination of information to all and sundry. The teaching work will be conducted during good weather times to avoid hitches. The group will conduct public awareness campaign to enhance participation process. Members of the public will be informed about the education programme; they will be asked to feel free to participate in the programme, and emphasis will be laid on the importance the teaching programme.

- Communication:

Each teacher will begin with a song that calls for every community member to participate in the learning process. Then the presentation will end with seeking for comments and questions from the community members and clarifications from the student-teachers. The nonverbal techniques the group would use involve demonstrations; using charts and posters, and pointing at the members for questions and comments.

References

Asda. com. (2009). Foods High in Fat and Sugar. Retrieved August 2, 2013, from health. asda. com: <http://health.asda.com/nutrition/food/foods-high-in-fat-and-sugar.aspx>

Buschman, H. (2011, August 15). How fat and obesity cause diabetes.

Retrieved July 19, 2013, from beaker. sanfordburnham. org: [http://beaker.sanfordburnham.org/2011/08/how-fatty-diets-cause-diabetes/?gclid=](http://beaker.sanfordburnham.org/2011/08/how-fatty-diets-cause-diabetes/?gclid=COvOz_iJu7gCFQ5b3godWkAAfw)

[COvOz_iJu7gCFQ5b3godWkAAfw](http://beaker.sanfordburnham.org/2011/08/how-fatty-diets-cause-diabetes/?gclid=COvOz_iJu7gCFQ5b3godWkAAfw)

Community Gatepath. (2010). Growth and Nutrition. Retrieved July 19, 2013,

<https://assignbuster.com/essay-on-community-teaching-work-plan-proposal/>

from abilitypath. org: <http://www.abilitypath.org>.

<http://www.abilitypath.org/health-daily-care/health/growth-and-nutrition/?gclid=CLLSst6Ju7gCFQYd3godhT0AgA>

Eduardo Missoni. (2009). Thirty years after Alma Ata: the development of global health policy. Guglielmo Pacileo, 26-31.

Healthypeople. gov. (2013). Healthy People 2020 Objective Topic Areas and Page Numbers. Retrieved August 2, 2013, from healthypeople. gov: <http://www.healthypeople.gov>.

<http://www.healthypeople.gov/2020/topicsobjectives2020/pdfs/HP2020objectives.pdf>

Meg , C. (2013). 5 Main Food Groups. Retrieved August 2, 2013, from healthy eating. sfgate. com: <http://healthy eating.sfgate.com/5-main-food-groups-3976.html>

Schulze , B. M., & Hu, B. F. (2005, April). PRIMARY PREVENTION OF DIABETES: What Can Be Done and How Much Can Be Prevented? Retrieved July 19, 2013, from annualreviews. org: <http://www.annualreviews.org/doi/abs/10.1146/annurev.publhealth.26.021304.144532?journalCode=publhealth>

Southorange. org. (2013). TOWNSHIP OF SOUTH ORANGE VILLAGE VOLUNTEERING DIRECTORY. Retrieved July 11, 2013, from southorange. org: <http://southorange.org/forms/misc/volunteeringdirectory.pdf>

Washingtonpost. com. (2005). The New Food Pyramid. Retrieved August 2, 2013, from washingtonpost. com: http://www.washingtonpost.com/wp-srv/nation/daily/graphics/diet_042005.html