

# [Critical analysis critical thinking examples](https://assignbuster.com/critical-analysis-critical-thinking-examples/)

[Engineering](https://assignbuster.com/essay-subjects/engineering/), [Aviation](https://assignbuster.com/essay-subjects/engineering/aviation/)

## Approaches to Health Promotion

Executive Summary
The purpose of this paper to require the students to be able to critically analyze a recent health promotion program that is in conformity with the Ottawa Charter and the Jakarta Declaration under the supervision of the World Health Organization. The intention of this paper is to be able to present the WHO principles based on the student’s understanding. The analysis will contain the intervention program and to measure its effectiveness in accordance with Ottawa Charter by showing how the WHO principles were implemented. At the same time, the same treatment will be applied to determine if the WHO principles were applied pursuant to Jakarta Declaration and to determine how the equity principles were addressed. Finally, a recommendation shall be provided in order to improve the intervention program to further address all principles in both Charters.

## Executive Summary . 2

Abstract. 4
Introduction.. 5
Discussion.. 5
Conclusion/Recommendation7
References.. 8
Abstract
This paper will present an analysis of the health promotion initiative based on the provisions of the Ottawa Charter and Jakarta Declaration pursuant to the principles of the World Health Organization in connection with a recently published article on health promotion intervention. The article that was chosen was written by Hennrikus, et al., (2009) and the main subject of the study is to determine the effectiveness of a smoking cessation program that using patients who suffer from Peripheral Artery Disease (PAD). After careful analysis of the article, each principle shall be discussed by critical analyzing the interventions in line with the aspects of the Patient Education and Counseling 76 (2009) 16–24. The researcher will provide a detailed presentation of how the aspects of the Jakarta Declaration and equity principles were addressed. Finally, five recommendations will be provided for the purpose of improving the intervention programs to address all principles of both Charters.
Keywords: Ottawa Charter, Jakarta Declaration, World Health Organization, Patient Education and Counseling, and Peripheral Artery Disease (PAD).
Critical Analysis
Introduction
In the article of Hennrikus, Joseph, Lando, and Duval (2009), the main subject of the study is to determine the effectiveness of a smoking cessation program that using patients who suffer from Peripheral Artery Disease (PAD), as the participants. In the article, all the aspects of the Patient Education and Counseling 76 (2009) 16–24 were implemented. Based on the Patient Education and Counseling, it made use of a randomized, active treatment controlled trial, and incorporating mediation analysis to be able to have a clear understanding of the mechanisms that intervenes by confronting the issue on smoking cessation as well as the effects. The method used is by studying 228 participants who had been undetected with the disease (COPD) or chronic obstructive pulmonary disease (COPD), and who were tested using spirometry to discover their illness. The participants were asked to undergo intensive behavioral treatments conducted by a respiratory nurse and conjoined with “ nortriptyline” for smoking cessation (Kotz, Huibers, West, Wesseling & van Schayck, 2009). The other treatment was through confrontational counseling that uses “ spirometry” in comparison to the established health promotion and education.
Discussion
On the other hand, in the study of Hennrikus, et al., (2009), they made use of outpatients with lower extremity Peripheral Artery Disease (PAD) and were identified from the medical records of cigarette smokers. In this study, the participants were assigned to undergo PAD-specific counseling intervention and were also asked to answer the survey questions after a three and six-month follow-up on their progress. The results of the study had shown that majority of the long-term smokers want to start to seriously quit the habit and to be enrolled in intensive cessation smoking programs.
Based on the health promotion initiatives in terms of the Ottawa Charter and Jakarta Declaration, the agenda of the policy makers were intended to create laws to include health as part of the public policy in terms of legislation, fiscal measures, organizational change and taxation. This includes encouraging the public to change to active lifestyle, both in work and leisure. It is a concerted effort of the government and the community to intensify programs for promotion of health by making it as a key investment and part of the basic human right. The Ottawa Charter for Health Promotion enumerated the fundamental factors to achieve a healthy nation, which are: 1.) Establish healthy public policy; 2.) Produce encouraging environments; 3.) Reinforce community action; 4.) Advance the personal skills; and 5.) Intensify health services (WHO, 2013). At the same time, the Jakarta Declaration has promoted social responsibility in order to prevent harm/risk in the health of the community. At the same time, it encouraged adding more investment for health advancement. This will be able safeguard the environment and use sustainable resources. It also recommended the expansion of partnerships for health promotion. At the same time, limit the production and trading of harmful goods and substances including cigarettes and tobacco is one way to promote the health of the public (WHO, 2013).
The article of Hennrikus, et al., (2009) was able to comply with the provisions of Ottawa Charter for Health Promotion and Jakarta Declaration since the researchers made use of outpatients with lower extremity Peripheral Artery Disease (PAD) and identified the participants based on the available medical records of cigarette smokers. The study was carried out by asking the participants to undergo PAD-specific counseling intervention. The equity principles were addressed by providing mediation analysis and treatment interventions as part of health promotion. The PAD-specific counseling intervention was able to help the long-time smokers to initiate to quit the habit of smoking seriously quit the habit by enrolling themselves in intensive cessation smoking programs.
Conclusion/Recommendation
In order to improve the intervention programs to reduce smoking in a certain target group as discussed in both Charters, there eight recommendations to be made and they are: 1.) The PAD-specific counseling intervention must strive to encourage the target group to seek treatment by confronting the issue on smoking cessation; 2.) All the participants of the program should be well-informed about the negative effects of smoking and how the intervention program can prolong their lives; 3.) The intensive cessation smoking programs should be continuously strive to look for more efficient ways to ensure that the participants will no longer go back to the same habit after treatment; 4.) The health promotion systems must focus on good governance in order to ensure efficiency of intervention programs; 5.) There must be transparent and publicly known criteria that will be used to assess the efficiency of the intervention program; 6.) There should additional funding from the government to support the intervention program, particularly to increase the awareness on the harmful effects of cigarettes and tobacco; 7.). There must be clear definitions on the outputs and outcomes to the accurate data on performance and results collected based on the improvement of those enrolled in the program; and 8.) Public officials must be encouraged to report on the specified outputs and outcomes of the intervention programs to apprise the public of the efficiency of the program.
References
Bartholomew, L. K., Parcel, G. S., Kok, G., Gottlieb, N. H. and Fernandez, M. E. (2011). Planning
Health Promotion Programs: An Intervention Mapping Approach. California: Jossey-
Bass.
Cole, P. (2012). ‘ The Cost is Too High’. The Wall Street Journal. Web. Retrieved from
http://online. wsj. com/article/SB10001424052702303425504577352031401783756. html.
Hennrikus, D., Joseph, A. M., Lando, H. A. and Duval S. (2009). Effectiveness of a Smoking
Cessation Program for Peripheral Artery Disease Patients. Journal of the American
Hernandez, B. (2011). Foundation Concepts of Global Community Health Promotion and
Education. Sudbury, MA: Jones and Bartlett.
Kotz, D, Huibers, M. J., West, R. J., Wesseling, G. and van Schayck, O. (2009). What mediates
the effect of confrontational counselling on smoking cessation in smokers with COPD?
Patient Education and Counseling, 76, pp. 16–24
Lakoff, A. and Collier, S. J. (2008). Biosecurity Interventions: Global Health and Security in
Question. New York: Columbia University Press.
Lewis, M. and Pettersson, G. (2009). Governance in Health Care Delivery Raising Performance.
The World Bank. Web. Retrieved from
http://elibrary. worldbank. org/content/workingpaper/10. 1596/1813-9450-5074.
Morse, J. (2009). Preventing Patient Falls: Establishing a Fall Intervention Program, 2nd ed.
New York: Springer.
Morrison, E. (2009). Health Care Ethics: Critical Issues for the 21st Century: Critical Issues.
Sudbury: MA: Jones and Bartlett.
Pratt, J. (2010). Long-Term Care Managing Across the Continuum, 3rd ed. Sudbury, MA: Jones
and Bartlett.
World Health Organization (WHO) (2013). Jakarta Declaration on Leading Health Promotion
into the 21st Century. Web. July 17, 2013, from
http://www. who. int/healthpromotion/conferences/previous/jakarta/declaration/en/index1. html.
World Health Organization (WHO) (2013). The Ottawa Charter for Health Promotion.
Web. July 17, 2013, from
http://www. who. int/healthpromotion/conferences/previous/ottawa/en/index4. html.