

KAP STUDY

NEED FOR HEALTH EDUCATION PROGRAMS: THE HEALTH CARE WORKERS INSIGHT

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ABSTRACT

Background: Sophisticated health education is now become a prime requirement to bring improvements in health profiles of patients and their families. Health care activities play a significant role to keep health education at forefront. The aim of the present study is to determine the health care workers' perception for the need of instituting health promotion and also identify their beliefs about the improvement of community health by conducting health literacy sessions.

Method: A cross sectional study was conducted from April to October 2016 in various districts of Karachi. A total 286 medical care providers including physicians, pharmacists, nurses, dispensers/compounders, academicians and medical officers/quacks belonging to different organizations/institutions were approached. A structured questionnaire was developed containing different close ended items, seems to be necessary to meet objective of the study.

Result: About 82.42% of them felt the need of health promotion services owing to their belief that such counseling would be beneficial in maintaining better health status of population. The lack of information was seen regarding drug-drug (24.12%) and food-drug interactions (25.87%). The most common issue, addressed by health care providers (68.53%) was the improvement in physical fitness via life style modification. The health-care providers utilized various ways for spreading of information; however the role of media was highly encouraged by them.

Conclusion: Institution of health education programs for residents is indeed necessary to reduce the risks of many communicable and non-communicable diseases. Therefore, such activities should be planned on regular basis in various areas of the city to provide maximum opportunities to individuals for participation. Health counseling also played a vital role and considered to be beneficial in the development of healthy community/society.

KEYWORDS: Health education programs, Role of health education, need of health education

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INTRODUCTION

Health education deals with the sets of versatile information for promotion, maintenance and restoration of health status of population¹. Group of professionals involved in setting of educational plans, interventions and health promotions are

acknowledged as health educator. These health specialists have worked together to improve the disability, premature deaths and to ensure physical well-being of individuals, communities, states and the nation^{2,3}. It is imperative to keep the health education front line along with other routine activities particularly in developing countries. It has been

reported that about 130 million people in Pakistan are among the poorest in the world with higher maternal mortality and also the malnourishment of the children under age of 5 years^{4,5}. Multiple contributing factors towards the poor health profiles include improper water access and poor sanitation system leading to escalating burden of infectious diseases⁴. Moreover; ill-literacy adversely affects the occupation, sequentially to low income causing pitiable access to the medical care⁵. In this scenario, health literacy efforts is deemed to be necessary to make people educate against common pathological conditions, aggravating factors and management by life style modifications/ behavioral changes^{6,7}. To obtain better health care outcomes, sets of new educational approaches and skills are required to work between care providers and patients^{8,9}. The objectives of health education are achieved through strategic planning, systems re-design, community needs assessment, and health coaching. This planning has been proved to be helpful in disease management and primary prevention of many communicable and non-communicable infections¹⁰⁻¹². It enhances the quality of life by minimizing disease, risk factors and hospital burden¹³. Various modes of health communication have been utilized including seminars/workshops, flyer distribution, digital media and more recently reminders of medication through short text message¹⁴⁻¹⁶. The aim of the present study is to assess the role of health promotion plans and activities in improvement of community health.

METHOD

A survey based analysis was made from April to October 2016 to evaluate the perception of medical care providers against the need of instituting health education programs. A descriptive cross-sectional study was conducted to identify the opinions of care providers about usefulness of the health literacy efforts in improvement of community health. The tool of investigation was questionnaire, comprised of various items (20 close ended questions) seemed to be necessary with respect to health education along with demographic information of the individuals. Total 300 participants executing health care activities in different organization/institutes (governmental & private sectors) situated in various areas of city Karachi, Pakistan were approached. The group of respondents included physicians, pharmacists, nurses, dispensers/compounding, academicians and quacks/others. However; due to incomplete information 14 questionnaires were removed from the final data assessment (drop rate = 4.6%).

A verbal consent was taken from the participants before administration of questionnaire and confidentiality of their data was assured. Only those care providers were included who had at least two years

of working experience in the related field at the time of study. The collected data was then analyzed and presented in percentages and graphs. Chi square analysis with 95% of confidence interval using SPSS software (version 19.0) was also applied to assess the objective outcomes.

RESULTS

Pharmacists (29.72%), physicians (20.9%) and nurses (17.48%) were included to be the key opinion personals among the rest of participants. **Table I** summarizes all the volunteers who have participated in the study. Table II describes the opinion of the care givers against various health promotion issues. Majority of the respondents (84.26%) endorsed the need of instituting medical education as patients get detailed information about any underlying disease so, could be able to manage himself in much better way ($p=0.001$). Moreover; such health awareness programs are also found to be beneficial in prevention and management of various contagious and non-contagious infections ($p=0.001$). Care givers also experienced improvement in health status of those communities where patients had received appropriate counseling ($p=0.001$).

The role of media campaign was found to be highly beneficial (34.65%) not only to motivate residents to attend any health program but for conveying health information as well, other effective modes are also shown in Figure 1. About 60.1% health workers experienced that pursuing of health education for females was more difficult than males probably due to their cultural bounding, dependence and other family engagements. Respondents (54.45%) also emphasized that both public and private sectors must work together to make people aware at least against various common medical complaints to improve the health structure of community.

DISCUSSION

In the present work, all the health practitioners participated in the study actively. Majority of the health workers have identified the need of health education in communities. While few of them were thought that such programs seems to be least effective in improving physical fitness of the public. Proper and co-workers conducted a study in Dutch town of Enschede to investigate the effectiveness of health counseling on physical fitness. Findings confirmed the positive effects of health counseling on quality of life as the underlying complaint were found to be reduced¹⁷. Over the last few decades, pharmacy organizations and academic training programs around the world have promoted pharmaceutical care and standard of provision for patient care. It is also

believed that community setup can make a great contribution to the primary care and the public health, especially in developing countries^{18,19}.

Various other factors were also determined to assess the quality of care and medical standards being provided in local setting. The consistent visits or patients' follow up was considered to be one of the core parameter for their patients' wellbeing. Unfortunately being a poor economical country, we have been facing many health care crises. Particularly, medication counseling and dispensing practice is going unsatisfactory and majority of patients are handled by non-educated personnel^{20,21}. However, physicians and other paramedical staff must develop strong professional relationship with the patients to contribute effectively and also to minimize fatal error.

In the current survey, the medical counseling regarding drug-drug and food-drug interactions were found to be addressed seldom by allied professionals. Although in clinical practice, health care professionals must ensure the awareness of drug interactions to reduce potential side effects, drug loss and treatment failures in patients. It was reported in past study, that the care providers especially the physicians must refresh the information regarding potential drug interaction after every 3 months to provide effective patient treatment²² (Bennie *et al.*, 2012). Furthermore, clinical pharmacists should also have to educate nurses and other para-medical staff to improve quality of life, patients' satisfaction with services²³ and therapeutic loss by multiple drug interactions²⁴.

Health organizations are performing different activities including educational plans, patients counseling, health literacy, family patterns/planning, and life style modification to improve the various disease conditions. These programs also seem to be effective in reducing prevalence of diseases especially in those individuals being on poly-pharmacy based prescription²³. The role of physicians, pharmacists, nurses and other paramedical staff has been well established in providing health facilities through clinical assessment, documentation, health training, therapeutic reconciliation, staff management, and quality enhancement leadership²⁵. In United Kingdom, most of the general physicians are involved in various prevention and health promotion tasks and they experienced 79% of disease management through the patient's counseling by dietary control, physical exercises, smoking cessa-

tion and stress level reduction. Another study also declares 35–55% improvement in patients' profile by health counseling sessions²⁶. In the relevance of mentioned past studies, presently majority of health care providers were also believed in disease control through life style modifications particularly the diabetes mellitus, hypertension, obesity, depression, atherosclerosis, angina pectoris and many others. Furthermore, they were also noticed the reduction in the risks associated with common communicable and non-communicable infections many folds by conducting disease awareness and prevention sessions.

Different strategies have been planned by governmental and non-governmental organization for medical awareness and knowledge. The common ways of spreading information are through using flyers, news papers, organizing seminars/workshops and radio/televisions. In this study, media was found to be a most attractive channel among other mentioned modes to create consciousness and alertness against any medical issue (see figure 1). It is also well documented that media campaigns through television, broadcasting and journalist are extensively used to represent optimistic changes in health status across large inhabitants²⁷. Provision of services such as medical care as well as nursing and financial support is the principle responsibilities of non-governmental organizations (NGO's) and their social participation affirm the strength of health system²⁸. Various analyses suggested modified dietary pattern and lifestyle changes may prevent risk of coronary heart diseases, stroke and diabetes²⁹. Hence fundamental public health programs, development of health promotion policies, health assessment for prevention and protection are standard contributor in the context of wellbeing within society and if utilized efficiently will lead to positive health outcomes.

CONCLUSION

Health care professionals should realize the need of health promotion programs in society that played a significant role in improvement of the physical well-being of population. Health education and counseling shall be beneficial in management of many diseases through life style modifications. People have shown their interest in attending health activities but Government and non-Governmental organizations should made these programs accessible, cost free, and convenient for general public.

TABLE 1: Distribution of Health Care Provides

Care providers Groups	Number of respondents (n=286)	Percentage (%)
Physician	85	29.72
Pharmacist	85	29.72
Nurses	50	17.48
Dispensers/Compounders	23	8.04
Academician	32	11.18
Quacks and Others	11	3.85

TABLE 2: INSTITUTION AND BENEFITS OF HEALTH EDUCATION PROGRAMS: HEALTH CARE WORKERS INSIGHT(n=286)

No.	Items/Stem	Health care providers (n=286)	
		Yes (%)	No (%)
1	Need for the health education	241 (84.26%)	45 (14.33%)
2	Willingness of patients to attend/listen health notes	220 (76.92%)	66 (23.07%)
3	Response of healthy individuals towards health promoting programs	169 (59.09%)	117 (40.90%)
4	Patients' Knowledge about consequences of underlying disease	179 (62.58%)	107 (37.41%)
5	Provision of information for use & storage of medicine	136 (47.55%)	150 (52.44%)
6	Provision of information for food-drug interaction	74 (25.87%)	212 (74.12%)
7	Provision of information for drug-drug interaction	69 (24.12%)	217 (75.87%)
8	Instructions for general hygiene/nutrition	103 (36.01%)	183 (63.98%)
9	Provision of information for Pre-natal care during every pregnancy	96 (33.56%)	190 (66.43%)
10	Provision of information for family Planning	159 (55.59%)	127 (44.40%)
11	Family health status of medical care providers	196 (68.53%)	90 (31.46%)
12	Patients' benefit from health counseling	203 (71.0%)	83 (29.02%)
13	Effectiveness of Health education on improvement of health status of community	227 (79.37%)	59 (20.62%)
14	Management of disease via life style modification	196 (68.53%)	90 (31.46%)
15	Management of communicable & non-communicable diseases by health education	119 (41.60%)	167 (58.39%)
16	Believe in patients' follow up through progress notes	49* (81.66%)	11 (18.33%)
17	Implementation of latest ways of health education methodology	126 (44.05%)	160 (55.94%)
18	Role of governmental and non-governmental organization in health promotion	156 (54.54%)	130 (45.45%)
Mean		157 (56.37%)	122.4 (45.53%)
S.E.M		53.5 (19.2%)	58.9 (19.34%)

n=60 (this question was only asked by physicians)

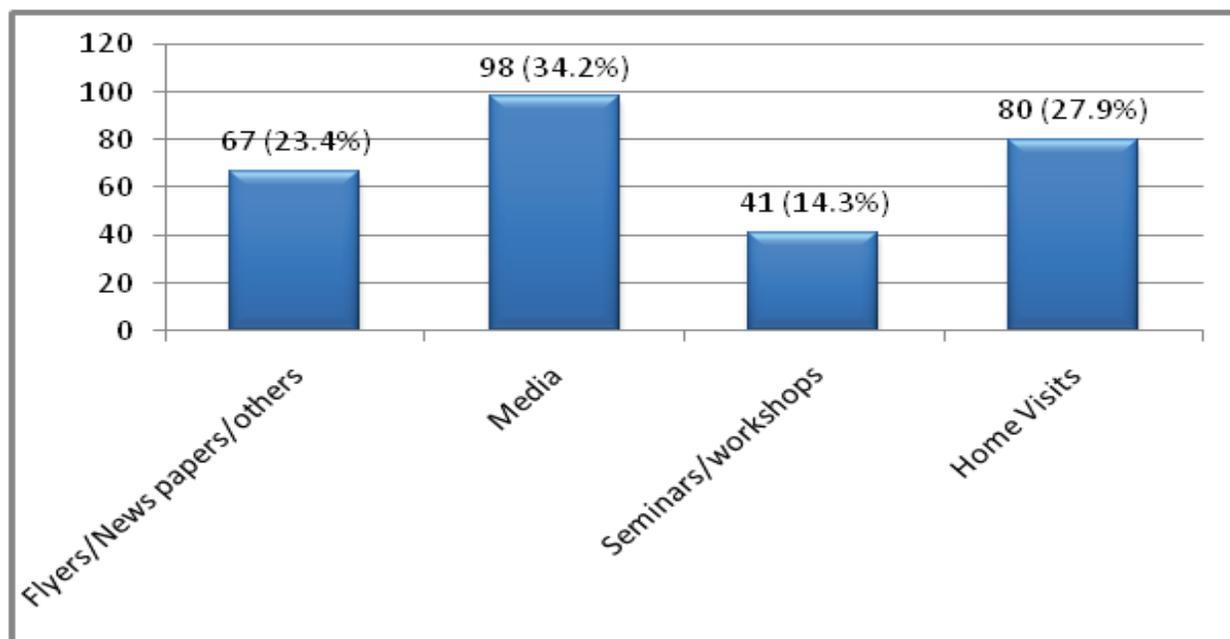


Figure 1: Modes of Health Promotion n(%)

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