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Health Education Programs and Their Importance for Disease Prevention and Health Promotion



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Abstract

Health education programs are an instrument for disease prevention and health promotion. The objective was to reflect on the importance of health education programs, the bibliographic search method was applied and the inductive-deductive method were used. The result was that there is evidence of the importance of health education programs in disease prevention, health promotion and thus the preservation of the population's health.

Keywords

education programs; health education; health promotion; planning;

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1 Introduction

The World Health Organization (WHO) develops global health education programs, as the center of health promotion, as stated at the first International Conference on Health Promotion (World Health Organization, 1986; González Sarría et al., 2021). Which are undertaken by the different countries, mainly from the corresponding Ministries of Health, through the defined structures and the public health services that are offered, although non-governmental organizations, associations of health personnel (nursing, for example), among other groups. Whatever the official structure of the personnel involved (specific in each country), these are prevention and citizen awareness programs, strategies are developed to be able to collaborate efficiently and thus obtain the best results. The ideal would be for health career students to join these programs and projects, but unfortunately this is not the case in all countries and there are several authors who suggest the need and the preponderant role of these (Gómez-Clavel et al., 2018; Calderón Flores et al., 2021).

2 Materials and Methods

A bibliographic search related to the health education programs were carried out, in addition to the inductive, deductive and analytical methods. A bibliographic search was carried out in the Scielo, PubMed, Dialnet and Science Direct databases. The search was limited to articles written in English and Spanish, using only those articles that have been published from 2018 to 2022. To complete the search, the website of the World Health Organization-WHO was consulted. The descriptors were used. Health Education, health education, health education programs, following the review process according to PRISMA (Liberati et al., 2009).

3 Results and Discussions

Fields of action

Depending on the specific health needs of each region, country and citizens, health education programs are usually broad, varied and differentiated, depending on the reality of each locality, thus we find programs aimed at the general population (sexual and reproductive health, prevention of adolescent pregnancy; prevention of infectious diseases, among many others) and for the sick population, within this, they are carried out above all for chronic non-communicable diseases, which greatly affect the world population (diabetes mellitus, arterial hypertension, obesity); In addition, educational programs related to smoking and alcoholism are developed, among many other topics, with the main focus being the causes of the disease and how to avoid them (Pérez-González et al., 2020).

Communication as a strategy

So that education programs for health to be successful, it is necessary for the health personnel involved to efficiently develop communication techniques (Korthagen et al., 2006; Rovai & Downey, 2010). For this, the programs include prior training for these people, providing them with techniques, resources and means to communicate the desired message. However, interferences or obstacles are described that hinder communication between people, and even prevent it, being essential to identify these situations and learn to manage them. Among these situations, the inappropriate start of the conversation, inappropriate use of technical terms in the field of health, which are incomprehensible to the general population, have been identified; not listening and understanding the interlocutor; intolerance and little flexibility; showing hurry or truncating the conversation due to lack of time, among others (De Groot, 2006; Eliasson, 2000).

The planning of health education programs

Coordinated health planning on a global scale is promoted by the WHO, which is why it is based on the guidelines provided by this organization that each country, government, ministry of health, adapts to their reality and needs the various health education programs (Zeichner & Wray, 2001). To carry out a health education program, it is necessary to structure it into a PLAN, which is the highest level of organization, it is designed carefully, logically and in coordination with various actors, it is addressed to a large number of people and, in general, it is made up of several programs and lasts several years (Whitehead & Russell, 2004; Haigh & Hardy, 2011; Ryan et al., 2010). A PROGRAM, which is the second level of organization, presents more defined objectives than in a plan, and consists of a structured and integrated set of strategies that are part of the same plan and that usually has a duration in time less than the plan. At the lowest level we find the PROJECTS, each one will address a specific topic within the planning, each program is made up of one or several projects. Health education is structured in three levels: the plan, the program and the project, as shown in figure 1.

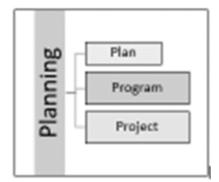


Figure 1. Levels of planning of health education programs

As can be seen in the health programs, there is planning so that teachers and students know how the activities will be carried out. An aspect of special interest is that the students, at the end of their preparation, are capable of carrying out a project in order with the topic dealt with, demonstrating with them that they have acquired the most important elements

4 Conclusion

Health education programs play a role of special interest to teachers and students at any level they attend, mainly in university education. Regardless of the health education program that is developed, all have shown to have a significant role in preserving the health of the population. There is evidence of the role of education on the health front and its role in disease prevention and health promotion, as a way to guarantee the quality of life of the population (Engbers et al., 2005; Brotons et al., 2005).

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