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## Health education as an effective element of prevention carried out by medical staff - review work

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### Summary

**Introduction:** Health as an irrational value requires continuous multidimensional activities to maintain it. Their implementation is based on building self-awareness in the individual through health promotion strategies consisting in shaping the desired behavior among patients. This is a chance that health promotion through implemented health education puts before the patient.

**Aim:** The aim of the study is to present the beneficial effects of health education on the functioning of the patient.

**Material and methods:** Literature analysis based on articles and books containing the aspect of health education.

**Conclusions:** Daily choices create an individual lifestyle, thus not remaining neutral to health. Awareness of responsibility for one's own health shapes an individual approach to the issue of health. This awareness can be achieved through properly implemented health

education assumptions. Undertaken actions are a unifying direction of modern medicine and man in the pursuit of achieving positive health indicators. Through them, it is possible to observe mutual benefits, thanks to which health protection reduces expenditures, thus saving any funds generated by the patient, and the patient himself can be healthy in complete satisfaction, striving for self-fulfillment. Only jointly implemented preventive actions controlling the potential risk are able to achieve the unifying goal, which is constantly improving the quality of life.

**Keywords:** health; prevention; medical staff; patient; education.

### **Introduction**

Currently occurring population problems have set the direction of activities implemented as part of health promotion. The strategies developed included a multi-faceted approach to real world health. One of them concerns the educational approach assuming the implementation of activities to increase the knowledge of the population in the field of correct health behaviors with the possible modification of undesirable behaviors. Awareness of the impact of health determinants is necessary when determining the individual potential of each individual. Health fields developed by Lalond illustrate the range of factors affecting human health, where the largest share, as much as 53% has a lifestyle, 21% the environment in which we live, 16% are genetic factors and 10% health care [1]. On their basis, it can be unequivocally stated that the impact of lifestyle significantly determines our state of health, enabling the reduction of the potential risk of disorders in human homeostasis. This awareness makes it possible to take control of modifiable health determinants, whose change may positively affect functioning in an individually respected manner. When analyzing the predominant share of lifestyle as a determinant of health, it should be emphasized that it belongs to individual concepts. Is understood as a total of activities specific to a particular unit. Thus, belonging to modifiable factors, it is influenced depending on upbringing, education, socio-demographic variables, views and experiences.

Activities based on health promotion strategies aim to make people aware of the positive or negative impact of factors and / or behaviors on health. Self-awareness shaped in this way, included in the assumptions of a healthy lifestyle, is also a starting point for health education. Developing it through the individual's interest in issues related to the functioning of the body together with the development of a reliable assessment of the current state of health and lifestyle leads them to take responsibility for their own health, or makes the operator aware of preventive actions about deficits in education in the patient. Thus defining the areas of health education activities. Taking into account the role of self-awareness in influencing individual well-being, the role of individual lifestyle components, i.e. proper nutrition, avoiding the use of stimulants, conducting balanced physical activity, respecting the principles of personal hygiene and sleep, avoiding stress, proper mental health care and optimistic attitude to reality. It is worth noting that these factors must oscillate within the normal range for their interaction to be considered favorable [2,7].

### **Prevention in terms of population**

Population health depends on the total activities carried out by the health system. All actions taken as a priority take the reduction in the number of deaths with simultaneous elimination of disability while increasing and extending the quality of human life [3]. The obligation to provide a high level of health care services enforces the authorities implementing health services with a multidirectional approach to the issue of health. This led to changes in the field of health policy aimed at preventing the occurrence of diseases, which, based on long-term epidemiological data, more and more clearly emphasized the effectiveness of undertaken activities related to the prevention and promotion of health. Despite the fact that the issue of preventive medicine has been known for a long time, it was not until the 1980s that it intensified as part of programs on an increasingly large scale. The role of health education was appreciated, which, along with preventive behavior, called for taking responsibility for health on individuals. However, the behaviors developed with varying effectiveness undergo modifications, which results from their deep rooting in the process of socialization [4]. For this reason, any interference is subject to the risk of failure, which is why it is so important to start implementing education and promoting health from an early age. In addition, the analysis of health behavior is also very helpful in determining the risk of developing the disease and the anticipated consequences of the disease. If the patient's behavior is consistent or slightly different from the therapeutic assumptions, the external interference in it is small, it applies only to modification with consolidation of newly acquired skills. On the other hand, if the behaviors differ significantly from those desired, this is a challenge for healthcare professionals. The most common anti-health behaviors include malnutrition, physical inactivity, risky sexual behavior, deficit in coping skills, occupational exposure or stimulants that directly or indirectly affect health, leading to its deterioration [1,7]. Unfortunately, in most cases they are not undertaken consciously, moreover they result from ignorance and lack of awareness from the consequences of their own conduct. This situation at the same time creates a field for action for health education, which, by raising awareness and promoting appropriate behaviors, is able to modify the patient's current health situation. The fact that self-awareness characterized by the lack of universality and even distribution in society does not facilitate the implementation of the assumed activities [8, 4]. It is worth emphasizing that analyzing the financial aspect, conducting prevention through a population cross-section is much less costly than conducting a therapeutic process. As a consequence, many countries have undertaken actions aimed at conducting screening in order to detect earlier mainly oncological diseases, which usually bode well in the early stages [5].

### **Holism in the perception of health and human**

Referring to the current definition developed by the World Health Organization (WHO), we understand health as bio-psycho-social well-being. Comparing the issue with the previous version assuming that health is the absence of a disease or disability clearly illustrates changes in the perception not only of health, but also of the individual being a human being [6]. Changes in definitions included broadening both issues, paying particular attention to factors that could determine health. Defining health limited to determining the presence or absence of disease. The updated model clearly emphasizes the multidimensionality of the individual, noting that the implementation of tasks and responsibilities entrusted to man enables a

satisfying life [2]. In addition, the approach to the patient was changed, taking into account his subjectivity and the impact of external influences on his condition.

### **Changes in the care of patients**

There has been a modification of the care provided in the scope of therapeutic cooperation between the patient and medical staff consisting in increasing the patient's participation in the therapeutic process, but also enabling the patient to decide in terms of himself. Analyzing individual components of the therapeutic process, patient education is an extremely important element of the entire therapeutic process. Through it, the patient can receive information not only about the disease entity or the further course of treatment. The recommendations that after leaving the therapeutic entity, as intended, should be introduced into everyday life. The role of health education is invaluable - it makes a motivated patient take on the challenge of taking responsibility for his own health, thus becoming a conscious person of his own health.

### **Health education as a tool for health promotion**

The presence of health education can be seen at every stage of preventive measures. However, its main goal is to make the population aware of the relationship between health and lifestyle, and dependence on environmental influences. Initially, it helps to shape beliefs that are beneficial to health, which then transformed into attitudes will be used to implement decent behaviors for health. An important goal of education is to develop self-awareness into the knowledge that changing living conditions and existing behaviors is able to protect us from most diseases. International institutions play a fundamental role in carrying out preventive actions, which setting the directions of their activities oblige them to implement them. An example is membership of the European Union, which forces you to join selected health programs [5]. In addition, in Poland, the obligation to provide healthcare education services has been included in the Act on the profession of a doctor, nurse and midwife. Health education should reach everyone, not just people with diseases or in high-risk groups. In healthcare institutions, education most often takes place during medical or nursing advice and the implementation of specific services, which does not always allow the patient to focus attention on the recommendations provided by the healthcare professional. The education process itself is a multi-stage process, the results of which can be observed only after some time. Education also has a decisive role in maintaining the desired therapeutic process, because in the case of insufficient education of the patient there is a high risk of deterioration of the patient's condition. Therefore, the measure of the effectiveness of health education cannot be the number of patients reporting a desire to improve their lifestyle or the number of issues transferred, but the quality of the communication process, preferably when it is enriched with visual materials [9]. The decision regarding the willingness to introduce health activities in one's own life is partly taken in the institution in which the patient resides, medical staff transmitting recommendations for the treatment of a particular disease unit plays a big role here. Education in health care facilities should be planned in detail, because skipping any stage may reduce its effectiveness. It should be emphasized here that long, monotonous lectures are not conducive to the patient's willingness to cooperate. It is also important to choose the place where the patient will be educated, it is preferable to ensure peace and discretion during the conversation by limiting the risk of third parties. In terms of

body language, it is recommended to avoid expression, gazing into the eyes and closed body posture. It is worth starting education by asking what the patient knows about the disease or what are their expectations, not forgetting about the fear. Based on the answers, the patient's knowledge is assessed. Based on the obtained data, the employee knows in which direction to focus health education. In addition, educational models leading through a team assigned to a given patient consisting of a doctor, nurse, physiotherapist, dietitian and psychologist are much more effective. This group, complementing each other, divides the scope of responsibilities among themselves so that education is interdisciplinary. A larger number of people are able to notice even a small progress of the patient, and praise by stimulating - they mobilize to take on more demanding challenges [10]. This leads to the moment when the patient's functioning improves and is a reward in itself. A patient prepared in such a way after hospitalization has a greater chance of having a real impact on his own health by introducing health behaviors communicated and demonstrated in practice. A patient deprived of constant challenges posed by medical staff after leaving the facility can react in two ways: to give up and return to previous habits, which in consequence will also cause rehospitalization or make changes in their current life. In summary, an extremely important aspect is the patient's independent and conscious decision regarding the desire to change their lifestyle, because without it, despite support from the Primary Health Care, the implementation of tasks posed as part of health education ceases to be of significance for benefits in the context of individual health [9,11].

### **Summary**

The lifestyle imposed by highly developed societies is undoubtedly the cause of many diseases. In order to minimize the adverse effects on the body, all activities should focus on factors that are modified. However, for the society to be aware of their negative impact, health promotion should definitely enter, because having health education as a tool is able to significantly affect the individual health behavior of each individual unit. However, it should be remembered that health promotion has some limitations, which is why its effectiveness is not always effective. Implementing healthy lifestyle principles, improving self-observation skills while passing on risk factors and how to avoid them is critical when implementing preventive measures. It is extremely important to carry out preventive and educational activities as early as possible, because behaviors recorded in the course of life are subject to slight modifications, as they are already habits. Health awareness effectively reduces adverse mortality or morbidity rates for specific disease entities. However, for it to be educated, it is necessary to conduct a long-term preventive health care process, which should be implemented in every health care entity. It is necessary at the initial stage of education to learn the patient's current knowledge, because it is often enough to modify your knowledge. We are able to significantly affect the state of our health only thanks to concentrated actions aimed at general preventive healthcare. Carrying out effective preventive healthcare is a huge challenge for healthcare professionals in terms of active counseling, implementation of educational programs and, above all, raising qualifications resulting from their professional roles. All of the actions taken will not only enable the transfer of knowledge at a satisfactory level, but also the ability to use methods that improve patients' health.

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