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Lecture 8

Education of a community about health services will improves the access of this community to these services. (Such as family planning, pregnant clinics and children clinics....etc).

So the knowledge is the base but after the knowledge the change of behavior is required.

Why I should to know the causes of mortality in a given country if I want to make settings for primary health care in that country??

-To know the priorities (for example if the most common cause of mortality in a given country is infectious diseases then I must work on the vaccination or nutrition).

To attract the community to the PHC services and to improves their response to these services we have two important factors to know about and to work on:

- 1- The needs of community.
- 2- The education, social believes and culture of that community.

If we know the causes of mortality, we can put the priorities in order to establishing the preventive services.

In the past time in Jordan: they did not make differentiation between the causes of the death. And the cardiovascular diseases were account 80-90% of causes of death but this is not true because there is another underlying causes that participates in pathology in other organs for example: viral infection can result in many complications and the patient was die from cardiac arrest and they were said that cardiac arrest is the cause of death!! But this is not true, the viral infection is the responsible for death.

The first study in Jordan about the causes of mortality was done in 1979.

In the next topic:

- 1- Do not save any numbers (these numbers for illustration)
- 2- Make comparison between the two studies in 1979, 1991 and 2005
- 3- Focus on the most common causes of death in 2005

Comparison between the causes of death in 1979 and 2005 :

Why this comparison is important ?

To know the changes in the causes of death and as a consequence we change priorities of primary health care services. (Readjustment the priorities)

<u>1-Infectious diseases (respiratory diseases and diarrheal diseases):</u>

1979: infectious diseases were account for 36% (the dr said might be considered 30%) . (Respiratory diseases were the 2nd and diarrheal diseases were the 3rd among the causes of death in this year)

1991 and 2005: infectious diseases were account for 8%. (Respiratory diseases account for 5% and other infectious diseases account for 3%).

Note: there is decrease in infectious diseases and this is due to improvement of vaccinations and nutrition ...etc.

And at the same time there is increase in non-infectious diseases such as the CVD and cancers.

2-Neoplasia:

1979: the cancer was the 6th cause of death

1991 and 2005: the cancer is the 3^{rd} cause of death in 1991 and the 2^{nd} cause of death in 2005

Why the cancer incidence is increased??

1- Environmental factors such as radiation and pollution and lifestyle such as smoking (first cause of cancer).

- 2- Poor or inappropriate nutrition.
- 3- Lack of physical activity
- 4- Increase in the lifespan, because the aging is associates with cancer
- 5- Diagnosis, because with advanced technology there is increase in diagnosis of cancer for example: in the past the diagnosis was based on x-ray which is not accurate but nowadays there is another technologies such as MRI which result in earlier and more diagnosis of cancer).

Note: there is increase in cancer incidence.

<u>3-Cardiovascular diseases:</u>

1979: cardiovascular diseases were account for 23 %

1991: cardiovascular diseases were account for 40% (Dr.Samar said 43% but according to the table is 40 %, again do not save)

2005: cardiovascular diseases still the 1st cause of death (especially coronary heart diseases) and account for 42%

Note: there is increase in cardiac diseases incidence

4-Accidents (include all types of accidents for e.x. drowning, burns ...etc)

Note: accidents mainly they reflecting the traffic accidents.

1979: 4th cause of death

1991: 2nd cause of death

Note: there is increase in incidence of death due to the accidents. ((due to increase in the number of cars as an example)).

What would be the top causes of death in the following categories of countries?

1-low income countries: 44.7% cases of death in the world come from low income countries

1st cause of death is infectious diseases.

50 % they die from lower respiratory infection (which considered the most common cause of death in these countries).

42% they die from coronary heart diseases (which considered the 2nd most common cause of death in these countries).

31% they die from diarrheal* diseases (which considered the 3rd most common cause of death in these countries).

*diarrheal diseases are infectious diseases.

2-middle income countries: 41.5% cases of death in the world come from these countries.

1st cause of death is stroke cerebrovacular disease.

Note that ****: Jordan is considered as middle income countries but the first cause of death in Jordan like that of high income countries which is the coronary heart diseases .and this similarity between Jordan and high income countries is due to improvement in medical services in Jordan.

Lower respiratory infection is the 4th cause of death in these countries.

3-High income countries: 13.8% cases of death in the world come from these countries .

(Jordan is similar to them)

1st cause of death is coronary heart diseases.

2nd cause of death is stroke cerebrovascular disease.

The cancer comes at the end.

In high income countries there is increase in cases of dementia,

(Alzheimer account for more than 50% of dementia, and is the most common cause of dementia).

Alzheimer is the 6th cause of death in the world and high income countries, diagnosis of Alzheimer was mostly at age of 65 year but now there is increase in early-onset Alzheimer's due to the environmental factors, stress and increase in the life span.

How does Alzheimer cause the death if you know that Alzheimer does not result mostly in other organs diseases?

Because Alzheimer associate with lack the take care for self (no attention).

New topic

Jordan is fast growing population because there is increase in population by double in the last 20 years and there is prediction for another duplication in 2029 or 2030.

What is the problem with fast growing population?

-Resources is the problem, more population more consumption for resources and this is may be result in disappearing of limited resources such as the water in the case of Jordan.

-Also reduction in good services.

What is the most sensitive indicator that reflects the health in Jordan?

- Is infant mortality rate.

The number of health centers is not that much important as the quality of the services of these centers (how much they are better), and maybe we have a large number of health centers but their health services are bad.

Lifespan expectancy (now 73) and infant mortality (now 17% and before this time it was 29%), This is meaning there is improvement in health services in Jordan.

How we can improve the primary health care services:

1-Decenterization: the health services must not be only present in the centers but also they must be distributed everywhere for example: in hospitals, in order to make these services more accessible.

2-making a programs about non communicable diseases: such as cardiac and oncology programs (because now they are our major concern since there is increase in their incidence).

Health life style is the most important in prevention of non-communicable diseases. For example: reducing the weight is very important in prevention of diabetes.

3-Health educations:

Is 1st line of prevention and 1st contact with members of community and the skeleton of primary health care and essential for health promotion.

The health education must be associates with change in behavior for example: if you know that the smoking causes the cancer you must change your behavior.

(Knowledge only is not enough).

Health literacy: is knowledge about the factors that affect the health

Many peoples they know that smoking is bad and can cause the cancer and obstructive pulmonary diseases but they do not change their behavior!!

So what we can do if peoples know about the smoking and its effect on health and they do not change their behaviors???

The polices is the solution and they are very important in changing the behavior if you have already the knowledge.

And no polices means the education might not be associated with change the behavior for example: if you look to certain countries there is polices in which the smoking is forbidden in public places, hospitals and restaurants ...etc.

What is the most important two factors in health promotion?

- 1- Health education.
- 2- Polices: are required for changing the behavior

If we have the knowledge and we change the behavior, we reduce the risk factors. The cardiovascular diseases, cancers and diabetes, all associate with risk factors. And there is no 100% cause of such diseases instead of that there is multiple factors known as a risk factors that cause the disease. For example:

Risk factors of hypertension:

- 1- Family history
- 2- Lack of Physical activity
- 3- Hypercholisteremia
- 4- Stress.

And many others.

Knowledge about these risk factors -----> change the behavior by avoiding these factors -----> decrease the incidence of hypertension

And as I mention in literacy: is to access health services and understand them and then change the behavior.

Health literacy is outcome of effective health education program.

-the main goal of Health education is to improve the quality of life in all aspects (socially, economical and psychologically).

Health education and polices are the main determinant of health.

-Prevention is not only to prevent the occurrence of a disease but also to prevent the complications.

For example: if someone has hypertension then I must control it by treatment and advice the patient to change his or her lifestyle in order to prevent its complications such as cardiac disorders which might be leads to the death of that patient.

What is the most important thing to prevent the complication of pregnancy?

-Is the prevention of excessive weight.

Prevention leads to health promotion.

Who is the health educator?

There is specialist for health education but is not only limited to them, all the community must be involve in health education especially who is always in a contact with community members such as the mother and the teachers.

Health education in Jordan is under the responsibility of ministry of the health.

Health education programs differ from one community to another according to:

- 1- The education level of that community.
- 2- Needs of that community.
- 3- Culture of that community.

Health education must be associates with the knowledge then change in the behavior of each member of the community and the result is change in a society as a whole.

The response to health education is differing from one age to another.

For example: the response of elderly is not like the response of young who is between 20 to 40 years (because there are difficulties in giving the information to the elderly).

Approaches of health education in Jordan:

1-Medical media: is the most common in Jordan.

In Jordan the doctors are primary source for health education but the doctors do not have enough time so the health education must be given by others

In Jordan also nurses, counselors ..etc.

(((((Educators must not be limited to medical media only but they must to distribute among the community members)))))

2-educational approach: by help from ministry of education.

By entering of subjects about the health in the students books in the schools and universities not only for medical students. (Knowledge is the base)

3-Behavioral approaches: is advanced step in health education and it needs more work.

We can aid in changing the behavior by putting the polices

4-Changing society instead of only the personality:

By change certain wrong believes in society.

For example: the pregnant women who thinking that she must eat a large quantity of food for herself and her baby but this is wrong (remember excessive weight is one of the major causes of complications during pregnancy)

There are certain target groups which they need a special programs of education:

Most important is: women especially pregnant women, children ((very early style of life is important to provide the health educational programs to them)). Obese adults, diabetic patients, educational students...etc.

Sorry for any mistake please refer also to the slides

Done by : Jamil ennab.

رسالة من أعضاء الكوريكشن تيم

السلام عليكم

نرجو من جميع الطلاب الالتزام بالهدوء التام أثناء إلقاء المحاضرة لما نواجهه من مشاكل ، فكاتب الشيت يتعب فقد يصعب عليه أحياناً سماع بعض الكلمات لارتفاع صوت الطلاب و كذلك الأمر لمصحح الشيت و أيضاً لما قد يترتب عليه من مشاكل مع الدكتورة فهي مصرة على عدم إعطاء السلايدات لمادة هذه المحاضرة و ستستبدله ب هاند آوت و أنتو شفتوا الهاند آوت تبعونها ، و لتفادي أي مشاكل قادمة مع الدكتورة .

شكراً لكم و كل التوفيق