

Defining Effective Health Education Practice

Health Education Practice Conference
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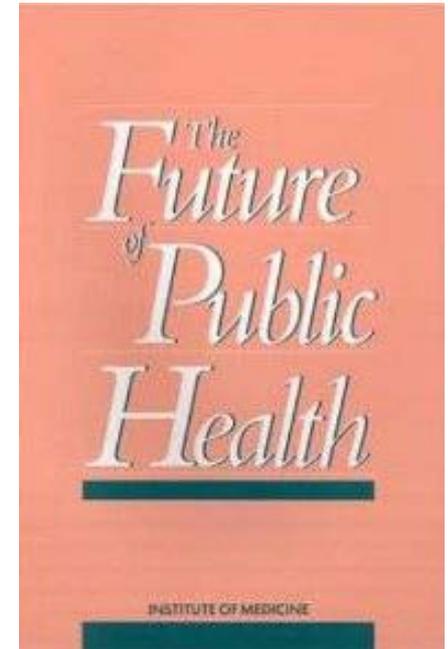
Presentation Overview

- Describe how is health education practice relates to public health practice
- Describe challenges faced by health education practitioners
- Define effective health education practice



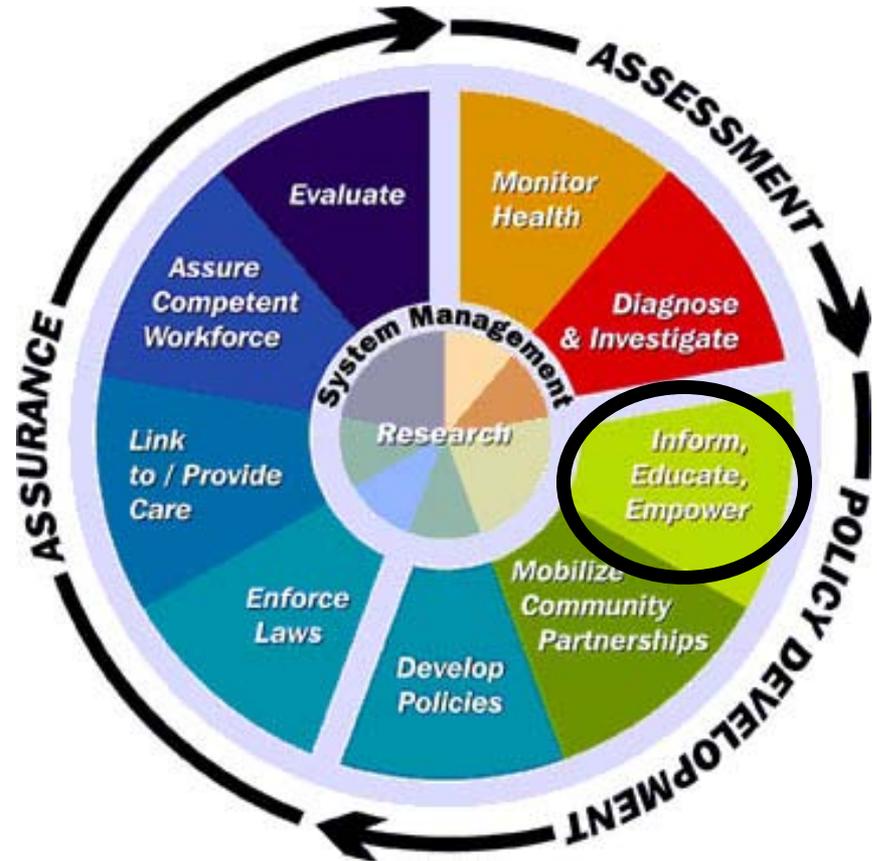
Defining Public Health

- **Assessment**
 - Conduct surveillance to measure the health of the population and determinants; investigate health problems and identify causes
- **Policy Development**
 - Inform leaders and the public about health; develop policy solutions and mobilize support
- **Assurance**
 - Ensure population health by having a competent workforce to enforce laws; medical care available to all; evaluate progress as part of a quality improvement cycle



Defining Public Health (cont)

- **Ten Essential Services**
 - #3: Inform, educate, and empower people about health issues
 - **That is health education**



Defining Health Education

- Health education is...
 - A social science that draws from the biological, environmental, psychological, physical, and medical sciences
 - Any combination of theory-based, planned learning experiences that provide individuals, groups and communities opportunities to get information and skills needed to make quality health decisions



Defining Health Education (HE) Practice

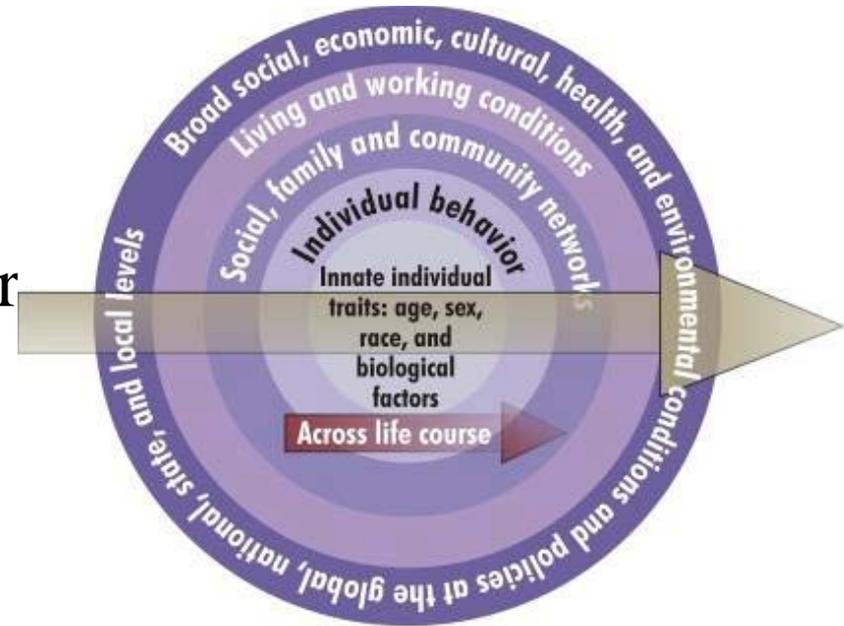
Seven Areas of Responsibility

1. Assess individual & community needs
2. Plan HE strategies, interventions, & programs
3. Implement HE strategies, interventions, & programs
4. Conduct HE evaluation & research
5. Administer HE strategies, interventions, & programs
6. Serve as a HE resource person
7. Communicate and advocate for health & HE

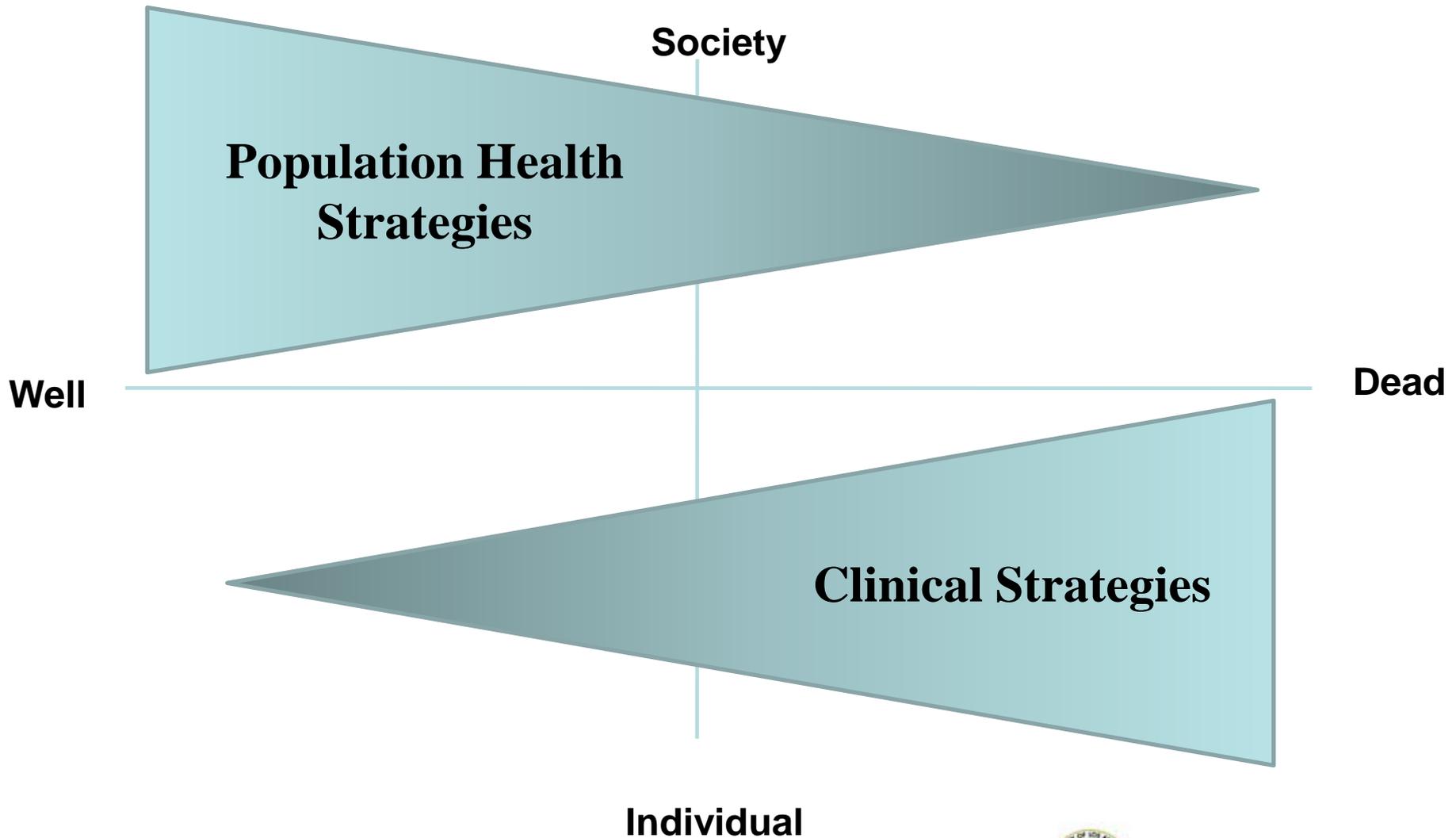


Health Education is Key to Public Health

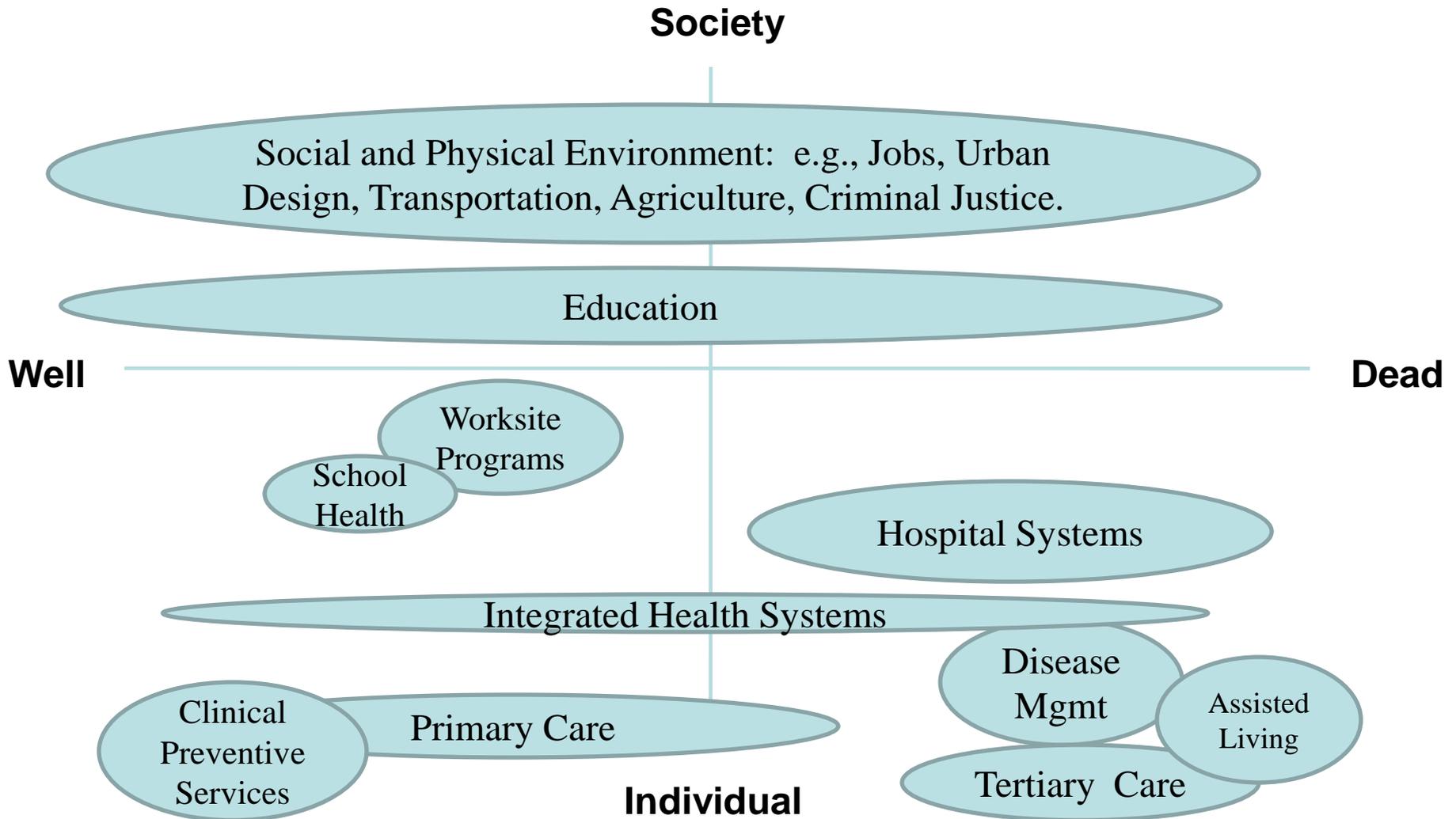
- Plays a beneficial role in each of the public health core functions
- Addresses institutions and social conditions that impede or facilitate achieving optimum health
- Aims to tackle social and physical determinants of health
- Facilitates upstream public health practice



Spectrum of Health and Strategies to Improve It



Spectrum of Health and Strategies to Improve It



Challenges Facing Health Education Practice

- Much is expected of health education practitioners to effectively initiate and sustain behavior change
 - Address a growing number of health topics
 - Engage diverse stakeholders that may have competing priorities
 - Work at multiple levels of intervention
 - e.g. changing policy, organizational, and individual health behaviors
 - Employ different behavior change strategies
 - e.g. group intervention, individual counseling, new communication and information technologies



Effective Health Education Practice

1. Prioritize health education efforts
2. Access effective strategies
3. Apply theory to everyday practice
4. Use plain language in messages
5. Employ innovation to address local needs
6. Disseminate results and lessons learned



1. Prioritize Health Education Efforts

- Programs are most likely to succeed when:
 - Determinants of a health problem are well understood
 - Needs and motivations of the target population are addressed
 - Context in which the program is implemented has been taken into account
- Decisions are not based on intuition but are based on the best available evidence
 - DPH prioritization tool
 - Literature reviews and evidence based interventions



Benefits of Applying Prioritization Criteria

- Higher likelihood of implementing successful programs and policies
- Greater workforce productivity
- Increased accountability and efficiency in the use of public and private resources
- Larger body of effective, high-quality information



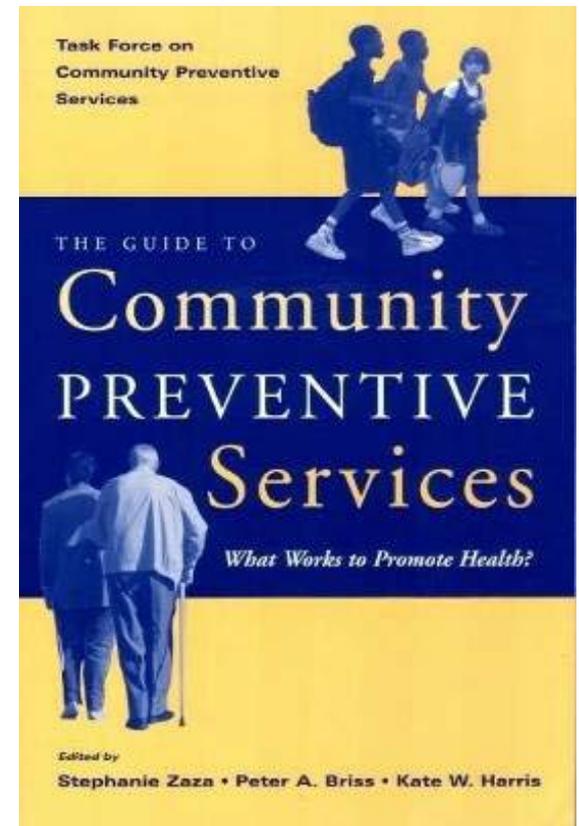
2. Access Effective Strategies

- Many evidence based practices exist
- Implementing these strategies save time and money and improve outcomes because they have already determined the following:
 - Do they work?
 - How well?
 - For whom?
 - When are they appropriate?
 - What do they cost?
 - Do they provide value?
 - Are there barriers to their use?
 - Are there any harms?
 - Are there any unanticipated outcomes?



Possible Benefits of Implementing Evidence-Based Recommendations

- Decreased burden of disease and injury
- Increased healthy behaviors and reduced unhealthy behaviors
- Increased implementation of effective or more-cost-effective interventions
- Phased out widely used less effective interventions
- Increased level of interest among providers and decision makers
- www.thecommunityguide.org



Other Evidence-Base Resources

- Cancer Control Planet
cancercontrolplanet.cancer.gov
- Center for Health Improvement
www.cchi.org
- Cochrane Health Promotion and Public Health Field
www.vichealth.vic.gov.au/cochrane
- The Community Toolbox
ctb.ku.edu/en/default.aspx
- Diffusion of Effective Behavioral Interventions
www.effectiveinterventions.org
- Guide to Clinical Preventive Services
www.ahrq.gov/clinic
- National Library of Medicine
www.hstat.nlm.nih.gov
- National Guideline Clearinghouse
www.guideline.gov
- Partnership for Prevention
www.prevent.org
- Promising Practices Network
www.promisingpractices.net



Examples of Community Guide Interventions

- **Media:**
Mass media campaigns to reduce alcohol impaired driving
- **Education/Information:**
Education programs to increase use of child safety seats
- **Counseling/skill-building:**
School-based programs to prevent violent behavior
- **Incentives:**
Reward workers for participating in smoking cessation programs



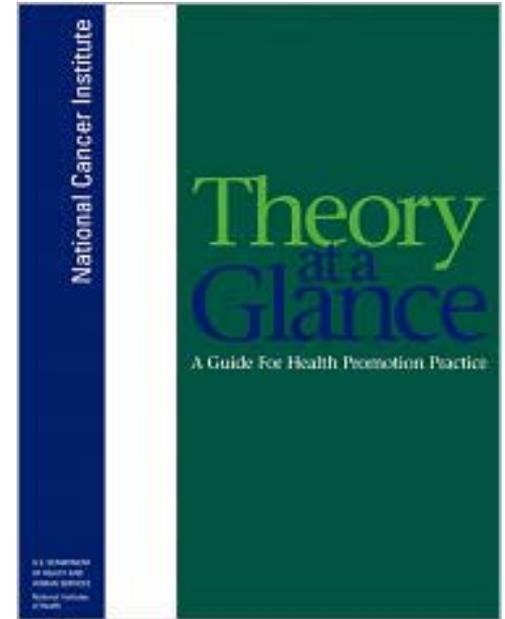
Examples of Community Guide Interventions

- **Built Environment:**
Urban design and land use policies that support physical activity
- **Social Environment:**
Early childhood home visitation programs
- **Healthcare System Change:**
Provider reminder systems to increase delivery of preventive services
- **Policy:**
Smoking bans and restrictions



3. Apply Theory to Everyday Practice

- Can lead to more powerful effects than interventions developed without theory
- Can help tailor interventions to specific population needs
- Presents benefits from strengths
 - e.g. effective in individuals
- Opportunity to address theory's limitations
 - e.g. less effective in populations and diverse communities
- Provides framework to evaluate the impact of the intervention



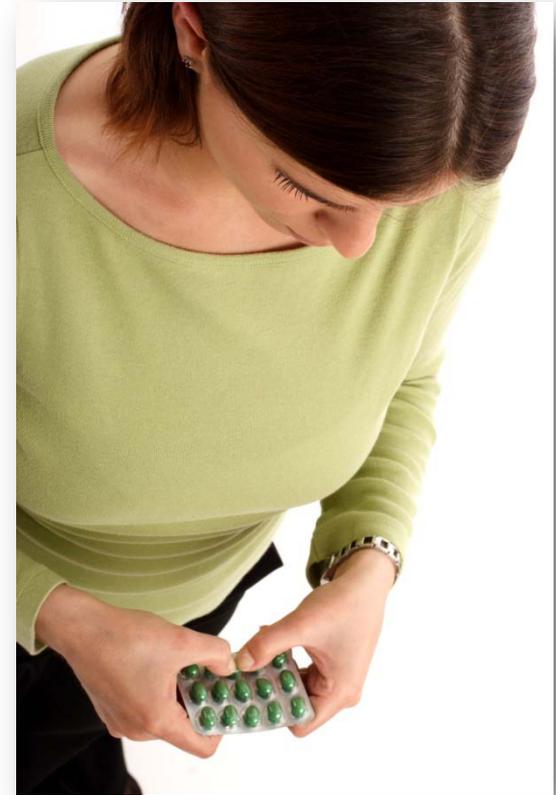
Theory Resources

- Glanz, A., Rimer, B., & Viswanath, A. (2008). Health behavior and health education, theory, research, and practice. (4 ed.). San Francisco: Jossey Bass Inc Pub.
- Nutbeam, O., Harris, E., & Wise, M. (2010). Theory in a nutshell. (3 ed.). Sydney: McGraw-Hill Book Company Australia.
- Health Behavior Constructs, Theory, Measurement, and Research
dccps.cancer.gov/brp/constructs
- Theory at a Glance
www.cancer.gov/cancertopics/cancerlibrary/theory.pdf
- Using What Works: Adapting Evidence-Based Programs to Fit Your Needs
cancercontrol.cancer.gov/use_what_works/start.htm



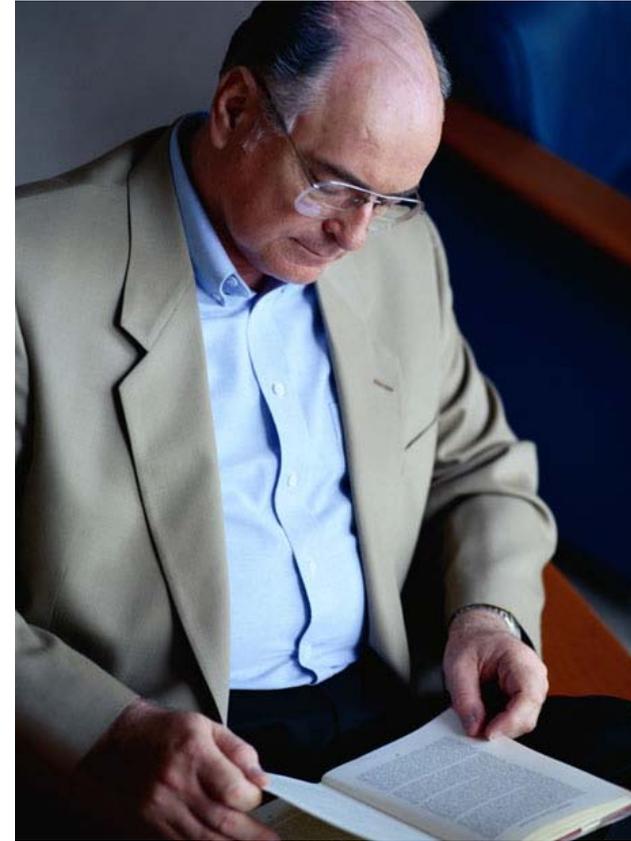
4. Use Plain Language in Messages

- In the U.S., most adults read at or below an 8th grade level.
- In LA County, 53% of working-age adults have low literacy levels.
- Low literacy affects a person's health literacy, limiting their ability to:
 - Locate health information
 - Evaluate information for credibility and quality
 - Analyze risks and benefits
 - Calculate dosages
 - Interpret test results



Health Literacy

- Poor health literacy is a stronger predictor of a person's health than age, income, employment status, education level, and race ¹
- Recent studies on health literacy and heart failure patients indicate:
 - Low health literacy to be significantly associated with higher all-cause mortality ²
 - Patients with inadequate health literacy are at increased risk of poor self-care and negative outcomes ³
 - E.g. Hospital readmission



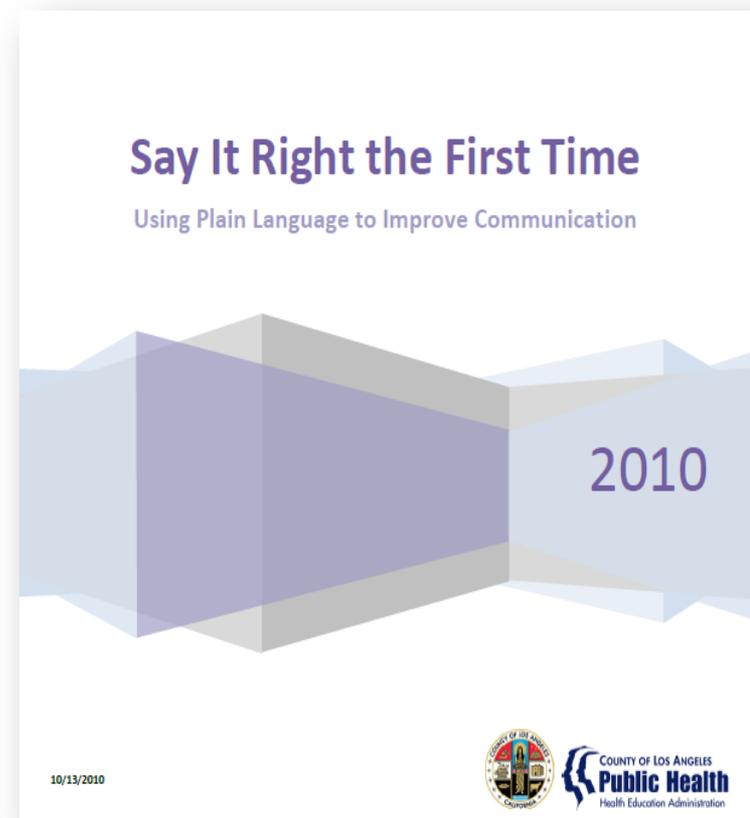
Plain Language Benefits

- Readers:
 - Increases message comprehension after first reading
 - Increases likelihood of completely reading the document
 - Increases message retention
- Organizations:
 - Increases customer satisfaction
 - Increases staff productivity
 - Reduces costs
 - Reduces liability



Plain Language Resources

- Public Health *Say It Right* Manual
<http://tinyurl.com/2bghfee>
<http://lapublichealth.org/hea/>
- LA County Quality & Productivity Commission – Plain Language Initiative
<http://qpc.co.la.ca.us/pl.asp>
- Federal Plain Language Guidelines
www.plainlanguage.gov
www.centerforplainlanguage.org/
<http://www.impact-information.com>



5. Employ Innovation to Address Local Needs

- Evidence, theories and models provide a roadmap
- Health Educators' knowledge of local needs and preferences are important
 - Demographics
 - Communication preferences
 - Access to technology
- Use new tools to reach intended audiences
 - Technology (web, mobile, Facebook, LinkedIn)
 - e.g. “I Know” home STD testing program for young women re-launched in SPA 6



Social Marketing

- Multi-media tools

ChooseHealthLA.com

- 1 minute teaching videos
 - Sugar loaded beverages
 - Build my plate
 - Sodium reduction “Salt Shocker”
- DVDs are being developed and will be available to health educators

CHOOSE!
HEALTH LA!



**YOU WOULDN'T EAT 22
PACKS OF SUGAR*. WHY ARE
YOU DRINKING THEM?**

*Sugar is a 20 cc. soda

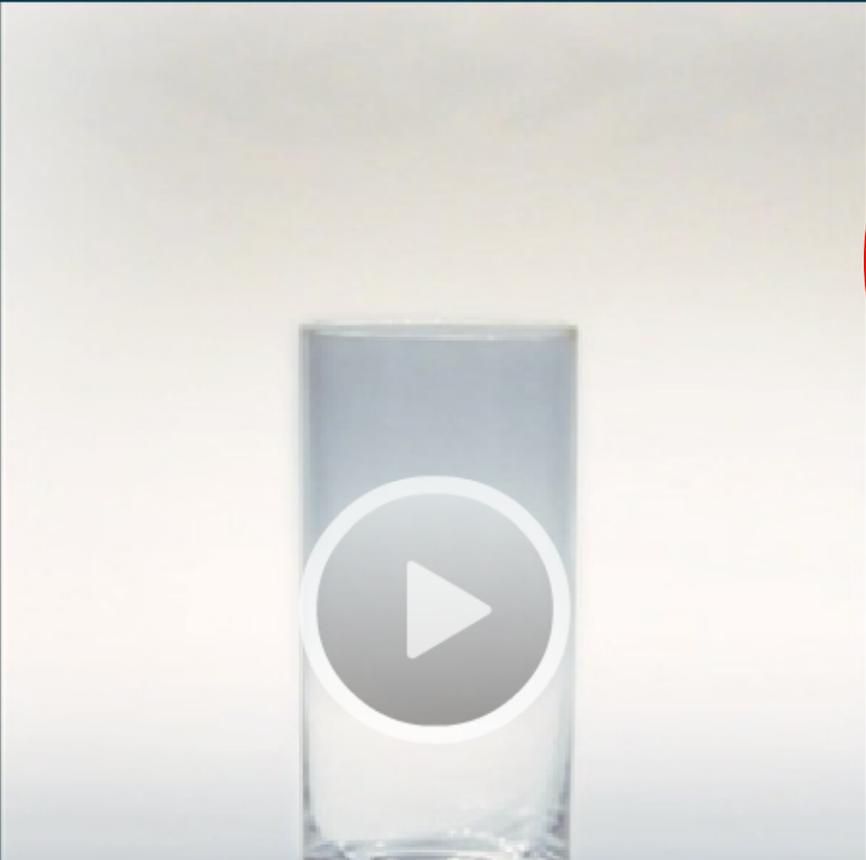
CHOOSE!
HEALTH LA!
COM

Extra calories in sugar-loaded drinks may lead to obesity, diabetes, heart disease and some cancers.

Message Dissemination by Consumers

SENDABLES

How Many Packs of Sugar Are You Drinking?



Share This Sendable

FACEBOOK TWITTER

EMAIL SHARE THIS

Sugar-Loaded Drinks By The Numbers:

- **22 packs**:** Amount of sugar in the average 20-oz. bottle of soda, which also contains 240 calories.
- **16.2 ounces:** Average serving size of a soda sold in the U.S. today - more than double the 1950s average of 6.5 oz.
- **60 percent:** Increase in a child's risk for obesity with every additional daily serving of soda.



Technology Resources

- Centers for Disease Control and Prevention (CDC) Tools:
 - Social Media Data Briefs
<http://www.cdc.gov/socialmedia/Data/Briefs/index.html>
 - The Health Communicator's Social Media Toolkit
http://www.cdc.gov/socialmedia/Tools/guidelines/pdf/SocialMediaToolkit_BM.pdf
 - Social Media Tools, Guidelines & Best Practices
<http://www.cdc.gov/SocialMedia/Tools/guidelines/>
- National Cancer Institutes
 - Making Health Communications Programs Work
http://www.cancer.gov/cancertopics/cancerlibrary/pinkbook/Pink_Book.pdf



6. Disseminate Results and Lessons Learned

- The best theory is likely to be grounded in real lessons from practice; sharing is key
- Peer-reviewed publications, professional meetings, and conferences are great forums
- Great way to garner support from the public or other stakeholders



Conclusions

- Health education practice is critical to public health practice
- Health education practitioners are expected to effectively initiate and sustain behavior change despite varying challenges
- Effective health education practice includes...
 1. Prioritizing health education efforts
 2. Accessing effective strategies
 3. Applying theory to everyday practice
 4. Using plain language in messages
 5. Employing innovation to address local needs
 6. Disseminating results and lessons learned



Questions?



Health Education Award Presentations

- Department of
Public Health

