

KENYA MEDICAL TRAINING COLLEGE

LECTURE NOTES

Health Promotion

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Health Education

Author:

K'Ombija A. Henry

Revised Edition

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I. Concepts and Principles of Health Promotion – 10 Hours

II. Health Education – 10 Hours

CONTENT

I. HEALTH PROMOTION – COURSE OUTLINE

1. Definition
 2. Philosophy
 3. Concepts/Approaches
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 6. Intervention areas
 7. Determinants of Health
 8. Key elements (components)
 9. Methods of health promotion
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 11. Process of Health Promotion (Strategies)
 12. Background activities
 13. Framework for Health Promotion
 14. Community dialogue
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HEALTH PROMOTION

Assignment Subject: Health Promotion

Teaching and Learning Hours: 10 Hours

Date sent: 15th May 2020

Deadline for Submission:

Class: Sept. 2019, KRCHN Class

Method of Teaching and Learning: Online study – individual and group discussions, and with lecturer. Use the teaching and learning objectives to enhance your study and understanding and also as questions to test your understanding of facts.

Media Platforms: WhatsApp and E-mail

Teaching and Learning Objectives

1. Define the following:
 - a) Health promotion
 - b) Health
 2. Explain/state the following concepts:
 - a) Physical health
 - b) Mental health
 - c) Social health
 - d) Disease
 - e) Illness
 - f) Sickness
 3. State the five aims of health promotion.
 4. State the five intervention areas for health promotion.
 5. Outline the five approaches of health promotion.
 6. State the seven principles of health promotion.
 7. State the intervention points in Health Promotion.
 8. List the nine pre-requisites for health by Ottawa declaration (charter).
 9. Explain the three key determinants of health.
 10. Outline the three key elements of health promotion.
 11. Name seven methods of health promotion.
 12. State the three disease prevention and control methods.
 13. Using a well labelled diagram, illustrate the process of health promotion.
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14. Outline the five major strategies of health promotion.
 15. Explain the three core activities of health promotion.
 16. List seven areas comprising the framework of health promotion.
 17. Define community dialogue.
 18. State the importance of community dialogue – (10 points).
 19. Name ten places for hosting community dialogue.
 20. Name nine conveners of community dialogue.
 21. State six ways of hosting community dialogue.
 22. Outline the nine steps in the preparation for community dialogue.
 23. Describe the six key steps in conducting community dialogue.
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HEALTH PROMOTION

DEFINITIONS

I. HEALTH PROMOTION

(a). **Health Promotion:** “Is the process of enabling people to increase control over and to improve their health” (Ottawa Charter WHO 1986); or,

(b). **Health Promotion:** Involves the facilitation of skills and change in individuals, families and communities in environments which impact positively on health” (VicHealth 2005).

NB: Health promotion is a positive concept focusing on individuals and the whole population, using a number of interventions simultaneously and supports people to make a ‘healthy’ choice for a healthy living. It encompasses: Preventive, curative, palliative and rehabilitative care and services.

II. HEALTH

Is a dynamic state of complete physical, mental, spiritual and social well-being and not merely the absence of disease or infirmity (WHO 1998).

- 1. Physical health** – refers to anatomical integrity and physiological functioning of the body.
To say a person is physically healthy, therefore:
 - All the body parts should be there.
 - All of them are in their natural place and position.
 - None of them has any pathology.
 - All of them are doing their physiological functions properly, and.
 - They work with each other harmoniously.
 - 2. Mental health** - ability to learn and think clearly. A person with good mental health is able to handle day-to-day events and obstacles, work towards important goals, and function effectively in society.
 - 3. Social health** – ability to make and maintain acceptable interactions with other people.
E.g. To feel sad when somebody close to you passes away. The absence of health is denoted by such terms as disease, illness and sickness, which usually mean the same thing though social scientists give them different meaning to each.
 - 4. Disease** is the existence of some pathology or abnormality of the body, which is capable of detection using, accepted investigation methods.
 - 5. Illness** is the subjective state of a person who feels aware of not being well.
 - 6. Sickness** is a state of social dysfunction: a role that an individual assumes when ill.
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AIMS OF HEALTH PROMOTION

- 1. To raise awareness or consciousness on health issues (health awareness):** through talks, group work, media, displays, exhibitions and campaigns.
 - 2. To provide information (knowledge improvement):** through one-to-one teaching, displays and exhibitions, written materials, mass media campaigns and group teaching.
 - 3. To improve self-awareness, self-esteem and decision making (self-esteem improvement):** through group work, practising decision making, value clarification, social skills training, simulation, gaming and role play, assertiveness training and counselling.
 - 4. To change life styles of individuals (attitudes and behaviour change):** through group training, skills training, self-help groups, one-to-one instruction, group or individual therapy, written materials and advice.
 - 5. To change the physical and social environment (societal or environmental change):** through positive action for underserved groups, lobbying, pressure groups, community development, community based-work, advocacy schemes, environmental measures, planning and policy making, organizational change and enforcement of laws and regulations.
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CONCEPTS OF HEALTH PROMOTION

The key concepts of health promotion are:

1. Health
2. Health Promotion
3. Empowerment
4. Healthy Communities
5. Determinants of Health
6. Health Literacy, and
7. Quality of Life

Discussion:

Health

- Is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.
- The normal physical state, that is, the state of being whole and free from physical and mental disease or pain, so that the parts of the body carry on their proper function.
- Health is therefore seen as a resource for everyday life, not the objective of living.
- Health is a positive concept emphasizing social and personal resources, as well as physical capacities.

Health Promotion

- Health promotion is the process of enabling people to increase control over, and to improve, their health: (WHO, 1986).
 - In the health promotion domain, health is equivalent to healthiness and is related to concepts of resilience and capacity.
 - It refers primarily to mental and physical dimensions of healthiness, has strong experiential and social aspects, and is determined by many internal and external factors, including those of a personal, collective, environmental, political and global nature.
 - Health promotion is a strategy “aimed at informing, influencing and assisting both individuals and organizations so that they will accept more responsibility and be more active in matters affecting mental and physical health.
 - It is the implementation of efforts to foster improved health and well-being in all the four domains of health, that is, physical, social, psychological and personal.
 - It also refers to the maintenance and enhancement of existing levels of health through the implementation of effective programs, services, and policies.
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- Health promotion is the advancement of wellbeing and the avoidance of health risks by achieving optimal levels of the behavioural, societal, environmental and biomedical determinants of health.

Empowerment

- Empowerment is the mechanism by which people, organizations and communities gain mastery over their lives.
- It is a process of helping people to assert control over the factors which affect their lives.
- It is a state where people are unambiguously in control and self-determining.
- Psychological and Community Empowerment: Psychological empowerment refers to a community's feeling of greater control over own lives which individuals experience following active membership in in groups or organizations.
- Community empowerment includes a raised level of psychological empowerment among its members, a political action component in which members have actively participated, and the achievement of some redistribution of resources or decision-making favourable to the group or community in question.

Healthy Communities

- A healthy community works to improve its environments and share its resources so that people can support each other in achieving their highest potential.
- A Healthy Communities approach integrates four key building blocks: community involvement, intersectoral partnerships, political commitment and healthy public policy.
- A healthy city is not a finished product created at one point in time; it is a dynamic place where citizens and government have established relationships and processes that allow them to collaborate in tackling any problems that arise.
- The healthy city approach calls for collective action, in which all the sectors— local government as well as community, religious and other groups and individual citizens—work together for a common purpose.

Determinants of Health

- These are factors that enhance the health and well-being of the overall population.
 - These factors include conditions in which people are born, grow, live, work, age and the economic and social conditions that shape the health of individuals, communities and jurisdictions as a whole.
 - In their turn, poor and unequal living conditions are the consequence of poor social policies and programmes, unfair economic arrangements, and bad policies.
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Health Literacy

- This refers to the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand, and use information in ways which promote and maintain good health.
- Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.
- It is the degree to which people are able to access, understand, appraise and communicate information to engage with the demands of different health contexts in order to promote and maintain good health across the life-course.

Quality of Life (QOL)

- This is the degree to which a person enjoys the important possibilities of his or her life.
 - Standard indicators (dimensions, domains or indicators) of the quality of life include wealth, employment, the environment, physical and mental health, education, recreation and leisure time, social belonging, religious beliefs, safety, security and freedom.
 - However, the three broad domains of physical, psychological, and social wellbeing that make up the basis for most approaches to health-related QoL assessment.
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DETERMINANTS OF HEALTH

- The factors which influence (determine) health are normally multiple and interactive, both within and outside an individual's control and may be modifiable or non-modifiable.
- Modifiable determinants are those that can be altered/rectified/prevented, for example, cigarette smoking, alcohol consumption, unsafe sex, eating habits, bathing habits, exercise etc.
- The non-modifiable determinants are those that cannot be altered/rectified, for example, biology and genetics.
- According to **Ottawa Charter (1986)** the pre-requisites (the fundamental conditions and resources) for health:
 1. Peace
 2. Shelter
 3. Education
 4. Equity
 5. Food
 6. Income
 7. A stable eco-system
 8. Sustainable resources
 9. Social justice.
- The core activities of health promotion according to the Ottawa Charter Strategies are:
 1. Advocate
 2. Enable
 3. Mediate

Discussion:

Advocate

- To make political, economic, social, cultural, environmental, behavioural and economic conditions favourable for health. Good health is a major resource for social, economic and personal development and an important dimension of quality of life.
- Political, economic, social, cultural, environmental, behavioral and biological factors can all favor health or be harmful to it. Health promotion makes these conditions favorable through advocacy for health.

Enable

- People to achieve their fullest potential and addressing issues of equity.
 - Health promotion focuses on achieving equity in health. Health promotion action aims at reducing differences in current health status and ensuring equal opportunities and resources to enable all people to achieve their fullest health potential.
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- This includes a secure foundation in a supportive environment, access to information, life skills and opportunities for making healthy choices.
- People cannot achieve their fullest health potential unless they are able to take control of those things which determine their health. This must apply equally to women and men.

Mediate

- With govt and non-govt agencies, industry and media etc to get coordinated action
- The prerequisites and prospects for health cannot be ensured by the health sector alone.
- More importantly, health promotion demands coordinated action by all concerned: by governments, by health and other social and economic sectors, by nongovernmental and voluntary organization, by local authorities, by industry and by the media.
- People in all walks of life are involved as individuals, families and communities. Professional and social groups and health personnel have a major responsibility to mediate between differing interests in society for the pursuit of health.
- Health promotion strategies and programmes should be adapted to the local needs and possibilities of individual countries and regions to take into account differing social, cultural and economic systems.

The major determinants of health

These are three, namely:

1. Social determinants
2. Economic determinants
3. Environmental determinants

The Social Determinants

- These are conditions in which people are born, live, work, age and access to health services.
- These conditions are a predictor of individual and population health and are shaped by economics, social policies and politics. They include:
 - Social gradient, the rich vs poor
 - Stressful living conditions or experiences
 - Early life experiences/exposures
 - Social exclusion
 - Working conditions
 - Unemployment
 - Lack of social support
 - Addiction to substances and drugs
 - Lack of good food
 - Poor transport infrastructure

The Economic Determinants of Health

- The economic determinants of health have been widely recognised as crucial factors affecting health.
- Economy is a complex system made up of underlying approaches, regulation from institutions, markets, finance, labour, the public-private balance as well as production and distributional effects, which collectively impact on health through the effect of moderators.
- The macro-economic factors, strategies, policies and interventions that affect health outcomes and health inequalities are thus important to consider.

Environmental Determinants

- An environmental determinant of health is, in general, any external agent (biological, chemical, physical, social, or cultural) that can be causally linked to a change in health status.
- Environmental factors influencing health include: temperature, food, pollutants, population density, sound, light, and parasites and other microbes.

KEY ELEMENTS OF HEALTH PROMOTION

- The key/major elements of health promotion are:

1. Good Governance for Health

- Health promotion requires policy makers across all government departments to make health a central line of government policy.
- The government must factor health implications into all the decisions taken and prioritize policies that prevent illness and injuries.
- These policies must be supported by regulations that match private sector incentives with public health goals. For example, by aligning tax policies on unhealthy or harmful products such as alcohol, tobacco, and food products which are high in salt, sugars and fat with measures to boost trade in other areas.
- Legislation must support healthy urbanization by creating walkable cities, reducing air and water pollution, enforcing the wearing of seat belts and helmets.

2. Health Literacy

- People need to acquire the knowledge, skills and information to make healthy choices, for example about the food they eat and healthcare services that they need.
- People need to have opportunities to make those choices and be assured of an environment in which people can demand further policy actions to further improve their health.

3. Healthy Cities

- Cities have a key role to play in promoting good health. There must be strong leadership and commitment at the county level is essential to healthy urban planning and to build up preventive measures in communities and primary health care facilities.
- From healthy cities evolve healthy countries and, ultimately, a healthier world.

PRINCIPLES OF HEALTH PROMOTION

- The World Health Organisation Principles of Health Promotion are:
 1. **Empowerment** - a way of working to enable people to gain greater control over decisions and actions affecting their health.
 2. **Participative** - where people take an active part in decision making.
 3. **Holistic** - taking account of the separate influences on health and the interaction of these dimensions.
 4. **Equitable** - ensuring fairness of outcomes for service users.
 5. **Intersectoral Collaboration** - working in partnership with other relevant agencies/organisations/government ministries.
 6. **Sustainability** - ensuring that the outcomes of health promotion activities are sustainable in the long term.
 7. **Multi Strategy** - working on a number of strategy areas such as programmes, policy.

METHODS OF HEALTH PROMOTION

- The various methods used in health promotion include:
 1. **Audio visual aids:** Involves the use of teaching and learning aids that the audience can hear, read and see.
 2. **Role plays:** Comprise dramatizing scenes with health messages.
 3. **Songs:** Songs with specific health messages are used to provide health information.
 4. **Barazas:** These may include the Chief's Baraza where people congregate. It provides an opportunity to share health messages to the community members.
 5. **Schools health:** Specific programmes are designed to provide health promotion activities to school children. These may include health education, nutrition, immunization, infection control etc.
 6. **Women and men groups:** These are integral in health promotion activities as the change in the group is likely to influence bigger change or transformation in the whole community.
 7. **Youth groups:** The youth friendly health promotion services are necessary to positive behaviour change for healthy community.

INTERVENTION AREAS IN HEALTH PROMOTION

- The points (target) of intervention in health promotion are:
 1. **Individual level:** The individual characteristics that influence behaviour (knowledge, attitudes, beliefs, personality traits).
 2. **Interpersonal level:** The interpersonal processes and primary groups, including family, friends, and peers, that provide social identity, support, and role definition.
 3. **Organizational level:** The rules, regulations, policies, and informal structures that may constrain or promote recommended behaviours.
 4. **Community level:** The social networks and norms or standards that may be formal or informal among individuals, groups, or organizations.
 5. **Public policy level:** The local and state policies and laws that regulate or support healthy actions and practices for prevention, early detection, control, and management of disease.

COMMUNITY DIALOGUE

DEFINITION

- Is an organized and goal directed conversation involving five or more members of the community at a designated time and place.

WHY COMMUNITY DIALOGUE

- It is necessary to create a healthy community, that is, a dynamic state of renewal and improvement.
- It builds a culture that supports healthy life choices and a high quality of life. It aligns its practices, policies, and resource allocation to sustain:
 - Engaged citizenry
 - Diversity
 - Ethical behaviour
 - Courage
 - Quality education systems
 - Childhood development
 - Vibrant economy
 - Strong families and Safe neighbourhoods etc.
 - Support networks
 - Livable wages
 - Voluntarism
 - Adequate and affordable housing
 - Accessible transportation
 - Openness to change
 - Responsiveness
 - Innovation, and
 - Patience
 - Governance
 - Dynamic faith
 - Recreation
 - Clean air
 - Safe Water
 - Continuous improvement

IMPORTANCE OF COMMUNITY DIALOGUE

- Expand the base of constituencies and voices (i.e. youth, business, the faith community, grassroots leaders)
- Reach common ground by integrating the workings of more formal institutions and partnerships with the leadership from neighbourhoods and grassroot groups.
- Surface common issues and the resources to address them by helping to identify barriers to positive change and uncover innovative ideas.
- Ensure sustained on-going community discussion between the many groups and partnerships in a community.
- Build the capacity of the group/community to act on its ideas for improvement.
- Launch new initiatives and strengthen the impact of existing community improvement partnerships.
- Focuses corporate and organizational investment towards community benefit by aligning communities' policies and resource allocation with what creates health.
- Breaks through community "turf wars" and connect fragmented resources by building public consensus and commitment necessary to generate action for better outcomes.
- Stimulates action and tracking progresses for accountability.
- Generates local media attention for adequate publicity.
- Help leaders of all sectors to see their roles in building healthy, sustainable communities.
- Helps to be a part of vocal and visible nationwide healthy communities' movement.

VENUES FOR COMMUNITY DIALOGUE

- An organized community dialogue may take place at any of the following venues:
 - At school
 - At village/home tables
 - In the workplace
 - At community centres
 - In neighbourhoods
 - In places of worship
 - At service / club meetings
 - In meetings of existing partnerships
 - In board rooms
 - In the halls of government

PARTICIPATION IN COMMUNITY DIALOGUE

- Every citizen has a role to play in building community and creating health, hence, eligibility to participate in community dialogue.
- The vitality of our communities and democracy relies upon the active participation of every person in community dialogue.

- Anyone can participate in a dialogue. Seek diversity. Reach across lines of race, culture, class, and local to gather participants for health promotion.

CONVENERS OF COMMUNITYB DIALOGUE

- Anyone can convene and host a "healthy community" conversation, namely:
 - ✓ Neighbourhood leaders
 - ✓ Youth
 - ✓ Business people
 - ✓ Faith leaders
 - ✓ Senior citizens
 - ✓ Homemakers
 - ✓ Educators
 - ✓ Community organizers
 - ✓ Public health and medical care professionals.

METHODS OF HOSTING COMMUNITY DIALOGUE

- There is no one best way to host a dialogue. It depends upon what you want to accomplish through the community dialogue. So, use an approach that works best for your objectives, setting, participants, time, and capacity. For example:

1. Mature Partnership or Coalition

- The group's goal may be to focus and deepen their current work on health and quality-of-life issues.
- It may also be to attract new and more diverse participants or to reflect on and highlight learning or bring media attention to their efforts on health improvement.

2. Mobilizing Youth

- A youth group at school, in a club setting or in the community might want to make sense of their community dynamics or address the pressures and support they find in the community. It is to identify key issues and become active on something important to them and their future.

3. Faith Group

- Faith leaders (in a church, mosque or synagogue group) may want to engage the congregation in service to the neighbourhood on a key issue. They may want to increase membership by taking action in the community.

4. Estate/Home/Village Group

- You might just want to invite a few neighbours over to enhance neighbourhood cohesion or talk about a few rough issues. It could help build bridges across lines of race and class to work on something collaborative for health improvement.

5. Community Organization

- A membership organization or service club (i.e. Chamber of Commerce, Lions, Rotary, neighbourhood association, civil rights organization) may want to identify opportunities for stimulating positive change in the community at a regularly scheduled meeting.

6. On Campus

- At the college or university, students, faculty, administrators, staff and community residents may get together to listen and learn from each other and discover some possible ways to work together. This may follow community health activities, for example, community diagnosis.

PREPARING FOR A COMMUNITY DIALOGUE

The following steps are necessary:

1. Build a dialogue team to host the event
2. Determine your own goals for the dialogue
3. Determine the group of participants and engage them
4. Select and prepare your facilitator
5. Determine the resources that are needed
6. Set a place, date, and time for your dialogue
7. Create an inviting environment
8. Invite participants and the media through appropriate channel
9. Plan to record the proceedings through a secretariat.

CONDUCTING COMMUNITY DIALOGUE

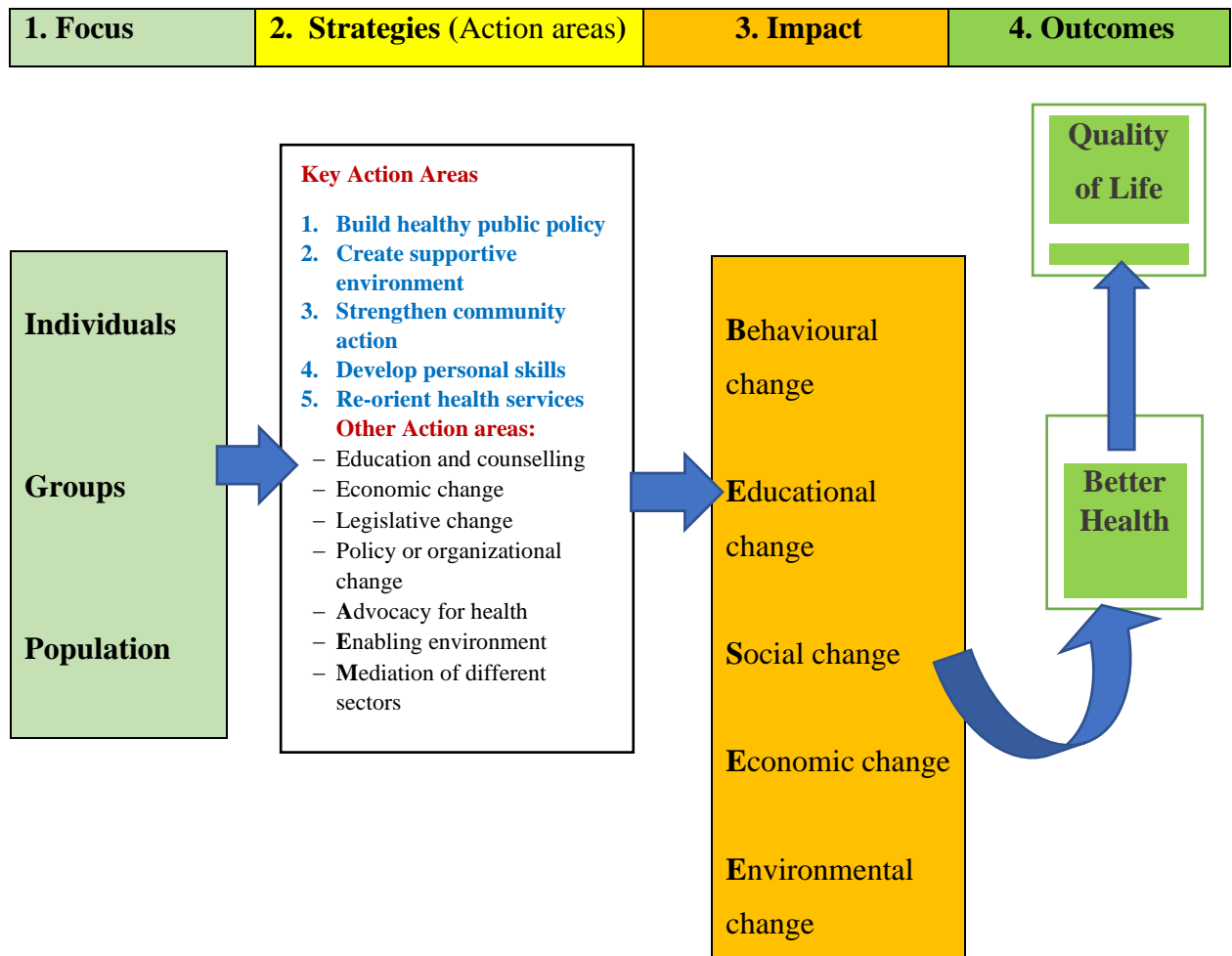
- 1. Greet participants.** It is important for the facilitator to greet participants as they arrive to develop rapport prior to the dialogue. This will help put guests at ease and encourage them to speak up.
- 2. Introduction.** The facilitator should introduce her/himself and thank the participants for attending. A brief introduction, stating the purpose of the dialogue and the importance of asking the community for their opinions should follow. If the group is small, the facilitator may ask each participant to introduce herself or himself.
- 3. Initiate the dialogue.** These seven primary questions with a series of sub-questions are ideas to stimulate and guide the group's conversation. Not all sub-questions need to be asked. You should tailor the dialogue to the community's needs.
- 4. Engage the community appropriately and document the event.** Ensure involuntary and full participation of the community in the dialogue for ownership of the process and outcomes.
- 5. Engage the media and document the event.** Some groups will want to have local media present to report on the dialogue and its findings. Take a few photos or video clips of the event.
- 6. Concluding the dialogue and next steps:** At the end of the dialogue, remind the group that simply taking the time to share ideas and personal values with fellow citizens is important. The group recorder may verbally summarize the dialogue and plan to send the notes to the participants.

For groups that want to do something more, here are a few possible next steps:

- The group may be excited about a particular idea it would like to take action on and agree to meet again to develop some action plans.
- The group may decide to have a more in-depth conversation and involve some missing voices and perspectives from their neighbourhood (or to involve their elected representatives and the local newspaper).
- The group may decide to have additional dialogues on other subjects of importance to them.
- The group may share information about existing community efforts that could benefit from volunteers and additional leadership.
- Facilitators may wish to direct interested members to learn about other successful community efforts around the nation.

PROCESS OF HEALTH PROMOTION

– The process of health promotion consists of the follows:



– The diagram shows the *focus*, *strategies*, *impacts* and *outcomes* of health promotion.

KEY STRATEGIES (ACTION AREAS) FOR HEALTH PROMOTION

The strategies for health promotion by the Ottawa Charter and Jakarta Declaration are:

1. Building healthy public policy
2. Create supportive environments
3. Strengthening community action
4. Developing personal skills
5. Reorienting health services towards primary health healthcare.

– Other action (strategies) areas to consider are:

1. Promote social responsibility for health
2. Increase investment for health development to address social inequalities leading to poor health and disease.
3. Consolidate and expand partnerships for health improvement.
4. Strengthen communities and increase community capacity to empower the individuals.
5. Secure an appropriate infrastructure for health promotion.

Discussion of the major (key) strategies/Action Areas of Health Promotion

1. Build Healthy Public Policy

- Both within and outside the health sector (NB: social determinants of health). Approaches such as legislation, fiscal measures, taxation and organisational change. Council by-laws, school health programme. Policy to influence culture e.g. bullying.

2. Create supportive environments

- Create environments (work, home and leisure) that support healthy living e.g. food choices, sun-care, smoke and alcohol free etc.

3. Strengthen community action

- Enable and empower communities, provide resources so they actively participate in health decisions which leads to better health outcomes.
- They can apply those skills to other situations themselves need to determine what their needs are and how they best can be met. Community development and Capacity building.

4. Reorient health services

- Aim for a balance between health promotion and treatment services. How can we work with other sectors whose work impacts on health include health promotion in job descriptions, a designated role.

5. Develop Personal Skills

- Provide information, education and skills. Those who gain skills are often the least likely to need them to improve health.
- So be creative and reach others e.g. display or health screening or other activity – those who you need to reach may not attend/be able to read etc.
- Build skills at all levels - support others to work in a health promoting way.

6. The health promoting way of working

- Work with the community to identify priorities. Support local initiatives. Find out what is already happening. Find out what people know and what they think is important.
- Share information and assist with skills development. Assist with research & information collection. Plan community action and provide or assist to locate resources if needed.

7. Spectrum of health promotion interventions

- Strive to develop a mix of evidence-based health promotion interventions with a balance of interventions at both an individual and population level that meet the priority outcomes.
- Support these with capacity building strategies (skills and organisational support)
- These include:
 - a) Screening, individual risk assessment and immunisation
 - b) Social marketing/health information
 - c) Health education and skill development
 - d) Community action
 - e) Settings and supportive environments

FRAMEWORK FOR HEALTH PROMOTION ACTIVITIES

- The framework is concerned with areas of health promotion activities, specifically:
 1. Preventive health services (Primary, secondary, tertiary)
 2. Community-based work
 3. Organizational development
 4. Healthy Public Policy
 5. Environmental health measures
 6. Economic and regulatory activities
 7. Health education programmes

ROLES OF A NURSE IN HEALTH PROMOTION

- Health promotion's purpose is to positively influence the healthy behavior of people and societies as well as the living and working conditions that impact their health.
- Nurses are best able to perform health promotion tasks by enhancing the quality of life for all people through assessment of individual and community needs, education, identification of resources, and evaluation and implementation of programs to help reduce premature deaths and reduce costs in both the financial and human terms for all entities.
 1. Receive, take history, plan care, give care, support, educate and document the patients and clients.
 2. Model healthy life style behaviours and attitudes.
 3. Facilitate client involvement in the assessment, implementation and evaluation of health goal.
 4. Teach client health care strategies to enhance fitness improve nutrition, manage stress and enhance relationships.
 5. Assist individuals, families and communities to increase their levels of health.
 6. Educate client to be effective health care consumers.
 7. Assist clients, families, and communities to develop and choose health promoting options.
 8. Guide clients' development in effective problem solving and decision making.
 9. Reinforce clients personal and family health promoting behaviors.
 10. Advocate in the community for changes that promote a healthy environment.