

HEALTH SKILLS DEVELOPMENT IN YOUTH



Social Science

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ABSTRACT

Youth is defined as any member of society between the ages of 15 and 34” - World Health Organization. August 12th was declared as International Youth Day by The United Nations.

As we all are aware about the popular saying, “Health is Wealth”. Now is the time we need to look into the health skills of the present generation youth. Many research results indicate that the present generation youth are into many deviating habits or behaviors. They are addicted to drugs, alcohol, panparag, cigarettes, ganja ect which would result in health related hazards.

India in 2020 will be having more than 70% of its population, who will comprise of the youth. If the youth of our country are not going to take care of their health at this moment, then it would be too late to address this issue. It's a burning issue that the youth needs to be educated and streamlined with proper health skills to help them handle future more tactfully and meaningfully.

Not all people have benefited equally from worldwide improvements in health status, health coverage and access to health services. The socioeconomic–health gap between nations and within them is widening daily. Clearly, the world's health challenges cannot be met by one organization alone. These challenges call for urgent action on behalf of the international community. Hence, Advancing health and quality of life through youth development is necessary.

Introduction:

“WE CANNOT ALWAYS BUILD THE FUTURE FOR OUR YOUTH; BUT WE CAN BUILD OUR YOUTH FOR THE FUTURE”.

FRANKLIN D. ROOSUELT

“Youth is defined as any member of society between the ages of 15 and 34” - World Health Organization. August 12th was declared International Youth Day by The United Nations.

“Youth... those persons between the ages of 15 and 24 years.” - United Nations General Assembly.

“...youth ... comprises persons between the age of 15 and 24. It is used by ... the World Bank” - World Bank.

“This world demands the qualities of youth: not a time of life but a state of mind, a temper of the will, a quality of imagination, a predominance of courage over timidity, of the appetite for adventure over the life of ease.”

- Robert Kennedy.

All youth experience a range of challenges as they transition into adulthood, but youth in care face a unique set of circumstances. They haven't had the same opportunities, experiences and role models as youth in the general population. Youth in care have poorer health, especially mental health, and have limited education and employment options as they grow older.

CHARACTERISTICS OF YOUTH

- PHYSICAL CHARACTERISTICS
- PSYCHOLOGICAL CHARACTERISTICS
- SOCIAL CHARACTERISTICS
- INTELLECTUAL CHARACTERISTICS

Definition of Health

Definition of Health as given by World Health Organization:

Health is a state of complete physical, mental and social well-being and not merely absence of disease or infirmity.

Definition of Skills

- The ability to do something well arising from talent, training, or practice.
- Special competence in performance; expertness; dexterity.
- A craft, trade, or job requiring manual dexterity or special training.

Definition of Health Skills

Health skills are fundamental skills that a person develops over their lifetime that determines the quality of life.

Health skills are basic skills that individuals learn and adopt in their life time to maintain good health conditions.

“Skills-based health education”:

This term is used to describe life skills education that aims to prepare individuals to make decisions and take positive actions to change behaviours and environments to promote health and safety and to prevent disease.

Skills-based health education is an approach to creating or maintaining healthy lifestyles and conditions through the development of knowledge, attitudes, and especially skills, using a variety of learning experiences, with an emphasis on participatory methods(WHO Definition).

Good health promotes development-Development promotes health:

- WHO represents the culmination of efforts at international health cooperation that began almost 150 years ago. Nations joined forces to combat common threats such as plague, yellow fever, cholera, smallpox and typhus.

- Some of these diseases are still with us, others have been or are in the process of being eliminated as public health problems or eradicated.

- Many achievements would have been impossible without a dedicated international effort.

- Yet, today we live in a world which seems to lack the commitment and resources to create a healthier future, and whose unremitting destruction of its environment will continue unless human behaviour changes.

International population movements of refugees and migrants, overpopulation, uncontrolled urbanisation, economic development, pollution, changes in patterns of land use, deforestation, desertification, the depletion of the ozone layer, and poverty, all have an impact on health.

Many of the most powerful antibiotics have been rendered impotent, in part because of careless treatment practices. At the same time, too few new drugs are being developed. Health technology advances in the industrialized world do not always trans-

late into an improved quality of life and are often beyond reach for developing countries.

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These challenges call for urgent action on behalf of the international community.

Hence, Advancing health and quality of life through development is necessary.

Advancing health and quality of life through development

To advance health and quality of life through sustained development, WHO has identified four policy orientations for world action:

1. Integrating health and human development into public policies
2. Ensuring equitable access to health services
3. Promoting and protecting health
4. Preventing and controlling specific health problems

The purpose of development is to improve all people’s quality of life, including their health.

On the other hand, it has become evident that the capacity to develop is itself dependent on health.

Promoting and protecting health

Many of the major health problems in developing and developed countries are related to individual behaviour, such as tobacco and drug use, dietary habits, unsafe sexual practices, violence, or simply inadequate exercise. To make healthy choices, people need supportive environments, access to information, life skills and opportunities.

Health protection and promotion

- Tobacco Free Initiative
- Ageing and health
- Occupational health
- Emergency and humanitarian action
- Safety promotion and injury control
- Safe motherhood
- Monitoring of the environment
- Chemical safety
- Urbanization
- Nutrition
- Food safety
- Oral health
- Prevention of blindness
- Rehabilitation

- Reproductive health
- International agency for research on cancer (IARC)

HEALTH BELIEF MODEL

The Health Belief Model (HBM) is a tool that scientists use to try and predict health behaviours. Originally developed in the 1950s, and updated in the 1980s, it is based on the theory that a person’s willingness to change their health behaviours is primarily due to the following factors:

- **Perceived Susceptibility**
People will not change their health behaviours unless they believe that they are at risk.
- **Perceived Severity**
The probability that a person will change his/her health behaviours to avoid a consequence depends on how serious he or she considers the consequence to be.
- **Perceived Benefits**
It’s difficult to convince people to change behaviour if there isn’t something in it for them.

- **Perceived Barriers**
One of the major reasons people don’t change their health behaviours is that they think that doing so is going to be hard. Sometimes it’s not just a matter of physical difficulty, but social difficulty as well. Changing your health behaviours can cost effort, money, and time.

The Health Belief Model, however, is realistic. It recognizes the fact that sometimes wanting to change health behaviour isn’t enough to actually make someone do it, and incorporates two more elements into its estimations about what it actually takes to get an individual to make the leap. These two elements are cues to action and self-efficacy.

Cues to action are external events that prompt a desire to make a health change. They can be anything from a blood pressure van being present at a health fair, to seeing a condom poster on a train, to having a relative die of cancer. A cue to action is something that helps move someone from wanting to make a health change to actually making the change.

Self-efficacy looks at a person’s belief in his/her ability to make a health related change. It may seem trivial, but faith in your ability to do something has an enormous impact on your actual ability to do it. Thinking that you will fail will almost makes certain that you do. In fact, in recent years, self-efficacy has been found to be one of the most important factors in an individual’s ability to successfully negotiate condom use.

Conclusion:

Health skills development for youth is essential. They need to develop positive attitude towards building health skill. Youth by remaining healthy can contribute exorbitantly to the nation’s development. Health is wealth. We need to begin right from the grass root level to create awareness relating to health, hygiene and importance of health skills.

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