

The Role of Communication for Health Development: Implications for Child Development



Education

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ABSTRACT

This paper is an attempt to look into the role of communication in health education and health development/challenges of health communication. Communication is a part of normal human relationship with others. The ability to influence others depends on one's communication skills, which include: listening, speaking, reading, writing, and reasoning. These skills are much needed in health education. Health communication is often used synonymously with health education; health education is the translation of what is known about health into desirable individual and community behaviour patterns by means of communication process. Communication plays a powerful role in national health development programmes through educative, motivation, persuading and counseling people to change, modify health behaviour and make wise choices of health educators they can use, but there is no single communication method that is the best. Health educators should develop their own communication method that can suit their target audience and be able to convey the message in the language they will understand. The message must consider the variant levels of health literacy and education of the audience, as well as demographic values, socioeconomic issues and other factors that may influence effective communication.

Introduction

Communication can be regarded as a two way process of exchanging or shaping ideas, feelings and information. It is more than mere exchange of information, communication is a process necessary to give way for desired change in human behavior; Helsel (2006) reported that communication has developed in recent years with the development of newer methods of communication and information explosion. The mental development of humans according to Helsel has expanded for clear thinking, better social and intra-spectral cooperation.

Communication and education are interwoven. Communication strategies can enhance learning. The ultimate goal of all communication is to bring about change in the desired direction of the person who receives the message being communicated. (Dodor and Kelly, 2009). The authors further noted that communication may be at a cognitive level in terms of increase in knowledge, it may be affective in terms of changing existing patterns of behaviours and attitudes, and it may also be psychomotor in terms of acquiring new skills.

The ability to communicate is part of one's normal relationship with others. The ability to influence others depends on one's communication skills which includes: speaking, writing, listening, reading and reasoning. These skills are very important in disseminating information in health education. This trend has increased the value of effective health communication. The developed countries are now beginning to exploit the current communication revolution, to put today's health information at the disposal of families, to help people to achieve health by their own actions and efforts.

Health Communication

Health communication is the concern of every individual, government, families and every other group. It is an important area of communication. This field is gaining recognition because its emphasis on combining theory and practice in understanding communication processes and changing human behavior (Dodor and Kelly, 2009). Health have a unique opportunity to provide meaningful input in improving and saving lives.

Davis, Smith and Gustafson (2007), stressed that health communication is often used synonymously with health education, which is communication of health knowledge. Health communication is integrated into health education and health promotion. (Helsel, 2006) stated that public health disciplines such as epidemiology, health policy, occupational health, international health and environmental health have come to appreciate the fundamental importance of communication processes and the potential of effective communication to improve people's health.

The need for health communication has increased. The increased interest in health communication is as a result of changes in health issues and new technological advancements in health sector and public demands for more and better quality health information (Becker, 2006). Park (2011) stated that the declaration of Alma-ata 1978 emphasize the need for individual and community participation in health issues. The Alma-ata declaration stressed that health education is a process aimed at encouraging people to want to be healthy, to know how to stay healthy, to do what they can individually and collectively to maintain health, and to seek help when needed (Park, 2011). With this declaration, health communication becomes essential in achieving the aims of the Alma-ata declaration. Health communication assists the individual in passing from the state of awareness and interest to the final stage of decision-making and adoption of the new idea or programme. The expansion of communication channels and health issues on public agenda increase competition for people's time and attention. Now people have more opportunities to select information based on their personal interests and preferences.

Health Education

Donatelle (2009) defined health education as any combination of learning experiences designed to pre-dispose, enable and reinforce voluntary adoption of behavior conducive to health. Contrel; Girvan and Mckenzie (2009) also defined health education as any combination of learning experiences designed to help individuals and communities to improve their health, by increasing their knowledge or influencing their attitude.

Health education is an essential tool of community health; every

branch of community health has health educational aspect and every community health worker is a health educator. The Center for Disease Control and prevention, (CDC) 2013 reported that a great deal of ill health in the world was due to ignorance of simple rule of hygiene, or indifference to practical application of healthy living. However, as health is of greatest importance and an indispensable factor in life and without which man becomes a burden to others and useless to him. Gottrel et.al (2009) opined that health is the basis of individual and social welfare. Much attention is being paid to the education for total health. Good health is a pre-condition for good education. Education cannot be acquired without the proper frame of mind, and proper frame of mind cannot be possible without proper health and hygiene.

Communication in Health Education

Communication has an essential role in any action that aims to improve health. It is difficult to imagine how a message could be delivered to promote healthy choices if people could not communicate. Communication in health can be defined in much the same way as communication has generally been defined: a transactional process; the main difference in communication in health is that, the focus is not a general one but one specific to health information, and in health information, communication is a planned process (Flora, Maibach and Maccoby, 2009). The effectiveness of this planned process comes to fruition when the audience has received, acted on or responded to the message, and this would only be achieved through the help of a health educator.

Flora, et al (2009) developed three (3) main types of tools or media available for the purpose of health education, they are:

- Traditional media
- Print media
- Mass media

Traditional media according to Flora et al include media which passes information from one generation to the next usually through spoken words or visual art (The Business Communicator, 2006). Media such as storytelling, drama, fables, songs, poems and proverbs; and other visual arts such as paintings, carving, and pottery figures could be considered familiar ways of communicating ideas. The most important and popular characteristics of traditional media is its entertainment value which creates a more congenial atmosphere for effective learning as traditional media are particularly useful for addressing issues affecting people's day to day lives such as marriage, religion, health and disease, and family life (Silverman, 2007).

Print media include posters, newspapers, leaflets, photographs, and banners (Beato and Telfer 2010). Mass media is made up of channels such as televisions, radio, and video tapes (Rice, 2001). A great characteristic of mass media is its ability to reach many people quickly and at the same time. As media are generally credible sources of information and can provide continuing reminders and reinforcement of messages to encourage maintenance of behavior change; and is useful for raising awareness and bringing new ideas to people's attention. Despite the channel of communication used, Rice (2001) outlined reason why communication may not be effective during a health education programme and they include;

- Characteristics of the audience, age, gender, cultural background and educational level;
- Timing which may be favourable as some women may be busy with domestic tasks;
- Communicate skill of the health educator which may be poor; and also;
- The intellectual level of the health educator which deter-

mines his knowledge of a particular issue.

Health Communication

Health communication is widely considered a major aspect of any public health campaign. Health communication plays a vital role in public health campaigns designed to prevent infectious diseases especially in the developing world. Effective and successful uses of health communication will utilize multifaceted approaches in order to best reach intended audiences with comprehensive interventions and messages that will ultimately protect public health outcomes (Donatelle, 2009).

Outcomes of health communication can include increasing audience knowledge and awareness of a health issue; demonstrating healthy practices; showing benefits of behaviour changes to public health outcomes; advocating a position on a health policy or issue; increasing demand of health services; and arguing myths and misconceptions related to health (Freimuth, Vicki & Quinn, 2004). Thompson and Parrott (2003) opined that the goal of effective health communication is to create a higher level of health literacy within the society.

Health communication is a recently blooming field of study, with official recognition as a subset of communication, first coming from the international Communication Association in 1975, and formal recognition from the American Public Health Association in 1997 within the Public Health Education and Health Promotion Division. Careers in the field of health communication range widely between the public, private and volunteer sectors. Professionals of health communication are distinctively trained to conduct communication research, develop successful and repeatable campaigns for health promotion and advocacy, and to evaluate how effective these strategies would be for future campaigns (Telfer, 2010). In each instance of health communication, there must be careful deliberation concerning the appropriate channel for messages to best reach the target audience, ranging from face-to-face interaction to television, internet and other forms of mass media (Schiavo, 2007).

Health communication can increase demand for appropriate health services and decrease demand for inappropriate health services. It can make available information to assist in making complex choices, such as selecting health plans, care providers and treatment. Health communication can be used to influence the public agenda, advocate for policies and programs, promote positive changes in the socio-economic and physical environments, improve the delivery of public health and healthcare services encourage social norms that benefit health and quality of life.

The practice of health communication has contributed to health promotion and disease prevention in several areas among which dissemination of health messages through public education campaign according to Maibach and Parrot (2005) seek to change the social climate to encourage healthy behaviours, create awareness, change attitudes, and motivate individuals to adopt recommended behaviours for a better healthy life style.

Health improvement activities are taking advantage of digital technologies such as CD-ROM and the World Web that can target audiences, tailor messages, and engage people in interactive, ongoing exchanges about health. The recent explosion of the new internet communication technologies particularly through the development of health websites such as Medline Plus, health finder, WebMD; Web Portals, tailored information systems, telehealth programs; electronic health records and social networking means that the potential media are ever changing. The social and cultural contexts in which health communication occurs are widely diverse and can include, but are not limited to homes, schools and workplaces. The messages must consider the vari-

ant levels of health literacy and education of the audience, as well as demographic values, socioeconomic issues and many other factors that may influence effective communication.

Stages of Health Communication

In health education and health promotion, you communicate for a special purpose-to promote, improve or change health through the modification of factors that influence behaviour. To achieve these objectives, successful communication must pass through several stages. These stages are: reaching the intended audience, attracting the audience's attention, understanding the message, acceptance of change, producing behavior change and improvement in health (Maibach 2008).

Communication cannot be effective unless it is seen or heard by its intended audience. A common cause of failure at this stage is preaching to the "converted" (Worchel, 2008). An example of this would be if posters asking people to attend for antenatal care are placed at the clinic itself only, or talks on the subject are only given at antenatal clinics. These methods only reach the people who are already motivated to use the service. However, the groups you are trying to reach may not attend clinics, nor have radios or newspapers. They may be busy at the times the health education programmes are being broadcast on the radio. Communication should be directed where people are going to see or hear the messages. This requires careful study of the intended audience; to find out where they might see posters or what their reading and listening habits are

Worchel (2008) proposed that any communication method that people will listen to; and read the information must attract attention. Once a person pays attention to a message, He/she will try to understand it. For example, two people may hear the same radio programme or see the same poster and interpret the message quite differently from each other and differently from the meaning intended by the sender. Worchel further stated that person's interpretation of a communication will depend on things such as: complex language, and unfamiliar or technical words used, pictures containing unfamiliar and strange subjects. Communication should not only be received and understood, it should be believed and accepted. It is usually easier to promote a change when its effects can be easily demonstrated. Communication may result in a change in beliefs and attitudes, but still not influence behaviour or action to bring improvement in health which will only take place if the changed behaviours have been carefully selected so that they really influence health. If your messages are based on outdated or incorrect ideas, people could follow your advice, but their health would not improve.

Using the entertainment industry as a platform for advocating health information and education is a communication strategy that has become increasingly popular (Backer 2006). The most utilized strategy is for health educators to create partnerships with storyline creators so that public health information can be incorporated into the plot of a television show. The centers for Disease Control and Prevention has formed a strong partnership with Hollywood, Health and Society at the University of Southern California Norman Lear Center, to continue to produce new storylines on television and in film studios that will help to promote public health information (Centers for Disease control and Prevention, 2013). Some of the resources provided with this partnership include comprehensive "tip sheets" to provide writers with easy-to-access and trustworthy information on health issues as well as meeting and panels to discuss new information and resources (CDC, 2013). Interesting statistics on the effectiveness of this strategy, such as that over half they have learned something about health promotion or disease prevention form a Television show.

Media advocacy encompasses the utilization of strategic mass

media tools combined with widespread organization in order to advocate for healthy public policies or lifestyles. This can include the use of text messaging and Email to spread messages from person to person, as well as using social Networking sites such as Facebook, Twitter and Instagram to promote health information to a wide ranging audience. As technologies expand, the platforms for health communication through media advocacy will undoubtedly expand as well. Edgar and Hyde (2004) stressed that health communication grew significantly along with new computer based interactive technologies that allow consumers to search for and access detailed and specific information, control how the information is presented to them, and ask and respond to questions at their own discretion. These technologies include online health and medical website (for example, Web-MD) and on line support groups and chatrooms. One important aspect of this method of health communication is that it is extremely important in overcoming the barriers of low literacy, in that it creates a platform for personalized information easily accessed by people of all literacy and education levels.

Challenges of Health Communication

Health communication faces many challenges. While the problems can be attributed to many factors, some of the most essential issues have to do with the gap between health literacy and health communication, flaws in communicating through the mass media, and a lack of trained professionals.

One of the most pertinent challenges health communication faces is the gap between the population's health literacy and the use of health communication (Viswanath & Finnegan, 2006). While the goal is that health communication will effectively lead to health literacy, issues such as the use of unexplained medical jargon, ill-formed messages, and often a general educational gap have created a serious gap in health communication.

Mass communication is used to promote beneficial changes in behaviour among members of populations. A major criticism of the use of mass media as a method of health communication is the unfortunate ability for false and misinformed messages to spread quickly through the mass media, before they have the chance to be disputed by professionals. This issue may generate unwarranted panic amongst those who receive the messages and be an issue as technology continues to advance. An example of this may be observed in the ongoing distrust of vaccinations due to the publication of numerous (MMR) vaccination with the development and onset of Autism. The speed with which this message spread due to new social networking technologies caused many parents to distrust vaccinations and therefore forgo having their children receive the vaccine. Although this panic has been ferociously labeled as fictitious, many still harbor a lingering suspicious towards vaccinations and refuse them, which has caused an immediate public health concern. Another example that happened recently in Nigeria about ebola virus which spread so fast and created a lot of anxiety among public that ebola can be prevented if one bath with salt or drink salt water. This message spread so fast through texting and networking which many people believed and acted upon.

As jobs and opportunities in health communication continue to increase, the field is met with an immediate challenge for a lack of trained professionals. As an academic study, there are only a handful of graduate programs that offer a focused study of health communication and therefore, not enough professionals are produced in order to sufficiently fill the jobs that are being created. Health communication professionals are specifically trained in methods and strategies for effective communication of public health messages, with qualifications in research, strategic development and evaluating effectiveness (Beato, et al, 2010). However, in many instances, trained professionals are not consulted before a message is produced and distributed to audience.

es. This is partially because of lack of professional to fill jobs, but also may be credited to the fact that other professionals tend to discredit the necessity of health communication professionals, and therefore by pass their help and release messages based on their own knowledge of communication.

Implications of the study:

The researchers have succeeded in exposing the need for health educators to encourage healthy communications through the translations of what is known about health into desirable individual and community behaviour patterns by means of communication process. The message of health development must be started at the basic level of education for the interest of the child from where it disseminates to other levels. Strategies employed by health educators should rely on interpersonal relationship in order to influence health choices /decisions and for improved national development.

Conclusion

Health communication has much to contribute in national health development through educative, motivation, persuading and counseling people to change, modify health behaviour and make wise choices of health issues.

Communication is gaining recognition in part because of its emphasis on combining theory and practice in communication processes and changing human behaviour. This approach is pertinent at a time when many of the threats to Global public health are rooted in unhealthy behaviour. Health communication can increase demand for appropriate health behaviour and services and decrease demand for inappropriate health behaviour and services. Health communication should rely on interpersonal communication in order to influence health decisions in media, print media and mass media, but which ever strategy that is being used should suit the target audience and be able to convey the message in the language they will understand.

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