After completing this practical, you should be able to:

- describe the importance of health education in paediatrics;
- discuss principles of health education; and
- identify the area and conduct planned or incidental health education in various settings of child welfare agency.

In previous practicals of this Section you have learnt about administration of medication. Now we move on to most important component of preventive paediatrics i.e. health education which forms basis of any effective care.

As you know forty per cent of India's population constitute children under 15 years of age. From the moment a baby is born, he is plunged from the safety of its mother's womb into a world full of danger of diseases and infection that can lead him to life long disability and in some cases even death. They are at high risk of developing certain childhood diseases which tend to leave behind some of sequelae which would sometime handicap the children for the rest of their lives. Health is not only everyone's right but everyone's responsibility. Knowledge about health matter should be freely shared by trained health professionals to others. People with clear and simple information can prevent common health problems. As nurses our one of the important job responsibility is to help people learn about prevention of illness and ways of healthy living. In this practical, you will learn about the importance of health education in paediatrics and basic principles of health education. You will further develop skill in identifying the areas of health education and planning health education sessions. An example of health education related to a topic on introduction of solids is presented for your reference.
11.2 PAEDIATRIC NURSING AND HEALTH EDUCATION

Parent education, family health promotion and health maintenance have been the concern of yesterday’s and today’s nurses. Florence Nightingale over a hundred years ago claimed that the art of family health nursing of which parent education is a part, is as important as the art of sick nursing. Paediatric is by its nature a family oriented speciality. Families have the most powerful enduring influence on children. Parents have the major responsibility for promoting children’s growth and development. Parenting is a challenging, long standing and gratifying experience. All families experience periods of stress, confusion and frustration. During these times many families look to others for comfort and guidance. Parents are increasingly turning to paediatric nurses and paediatricians for advice and support for wide variety of medical, emotional, developmental and behavioural concerns. Your responsibility as a paediatric nurse is to help the families, develop their own competence and to find their own enduring solutions, but as the needs of families grow in complexity and number, you have a crucial role to play in caring children and helping the families. Parent education specifically is seen as a vehicle for giving consumers power and competence in making educated and creative decisions related to family life. Parent education offers you an opportunity to use your knowledge of family system theory, growth and development, communication skills, group process, leadership, assessment, problem-solving, teaching and learning theories and parenting. You as a health educator have to focus on parent education as a means to foster meeting, satisfying relationships among family members, as well as to promote the development of a productive future generation of adults.

Health Education to Hospitalised Child

You have unique opportunity for teaching and reinforcing good hygienic care while the child is hospitalised. Clean hair, nails, clothing as well as good grooming are essential to a pleasing appearance. You as a nurse should inform parents and children about diagnosis and medical treatment. Encourage children to clarify doubts/concepts regarding illness.

The results of various research studies conducted by nursing personnel have shown that complications of many diseases could be prevented if the parents are aware of symptoms of various diseases, identified and provided timely medical attention to their children.

11.3 BASIC PRINCIPLES OF HEALTH EDUCATION

Health education is a concrete structured type of communication. It involves translating information related to health matters/directed toward providing knowledge of health and influencing habits, attitudes and conduct, in relation to health.

As you are aware about the process of communication which consists of i) sender (S); ii) the message (M); iii) the channel (C); and iv) the receiver (R). Refer Block 4 of BNS-109 (Nursing Administration) for details.

Health education model has goals, content, channels, audiences.

Now we shall explain the above points.
**Goals:** Goals are stated in terms of expected behavioural outcome e.g. if the health education is regarding prevention of dehydration in children. The goals are stated as: Mothers/care givers will be:

i) aware of causes of dehydration;

ii) able to identify the features of dehydration; and

iii) able to skillfully supplement the fluid.

**Content:** The content of educational matter is the actual message which covers various components of child care and childhood diseases.

A list of topics for health education could be:

- Care of neonate.
- Technique of breast feeding.
- Balanced diet for infant/toddler/preschooler/school age children.
- Introduction of solids.
- Prevention of diarrhoea/URI.
- Toys and plays for children.
- Prevention of home hazards.
- Growth and development of infants/neonates.

**Channels:** The channels take into consideration the medium of communication e.g. teaching aids, utilising modern and traditional media.

Health education to school children can be provided by means of integrating health information in school subjects, such as:

- Sources and importance of nutrients composing daily diet.
- Good food habits
- Good breathing habits
- Control of pollution — tree planation.
- Menstrual hygiene
- Oral hygiene

- Organisation of special activities:
  - Mid-day meal programme
  - Films/health mela
  - Role modelling

**Audiences:** This refers to the target group to be reached e.g. community, postnatal mothers, school children, parents/care providers. The number of audience may vary. It can be individual health education/group education (8-10)/mass education.

The message should:

- be complete, brief and simple, and
- relevant to the needs/problems of audience.
Essential Features of Health Educator

The health educator should:

- be confident about the subject matter,
- be able to converse skillfully in the language which is understood by audience,
- consider the individual differences/cultural beliefs and values of audience,
- provide calm and quiet environment and suitable seating arrangement to audience and active participation of audience,
- use suitable teaching aids effectively, and
- clarify the doubts of audience.

11.4 HEALTH EDUCATION PLAN

For learning the skill of planning the health talk we shall take some hypothetical situations to explain this concept.

While working in paediatric ward you must have come across malnourished infants and toddlers. If you take history of these children you will find that dietary history of these children reveal lack of knowledge of mothers regarding feeding requirement of infancy. Children may be weaned only on top milk and biscuits. Majority of mothers think milk is whole diet for their child. Depending upon the problems indentified, you plan to conduct health talk on introduction of solids. Before you plan the health talk carefully go through the following example of health talk plan.

Name of the health educator — Miss Meena

Topic : Introduction of solids
Subject : Paediatric Nursing
Language : Hindi/Regional language
Duration : 20 minutes
Group : Group of postnatal mothers
Place : Well baby clinic in health centre/Underfive clinic/
        Paediatric ward

Date of Presentation :

General Objectives

- To educate mothers regarding importance of introduction of solids.
- To develop awareness in the group regarding food items to be provided in various stages of infancy.
<table>
<thead>
<tr>
<th>Time</th>
<th>Specific Objective</th>
<th>Content</th>
<th>Teaching Learning Activity</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 min</td>
<td>To introduce topic</td>
<td><strong>Introduction:</strong> For the growth and development of your baby, it is important that along with breast milk other food items should be added when baby attains six months of age.</td>
<td>Announce the topic: Today we will discuss about the 'Introduction of Solids'</td>
<td>What do you understand by term introduction of solid.</td>
</tr>
<tr>
<td>2 min</td>
<td>To define the term introduction of solids</td>
<td><strong>Definition:</strong> It is a process of gradually changing diet pattern of a infant from breast milk to other liquid substitutes followed by semisolids and solid food items.</td>
<td>Health Educator explains the term</td>
<td></td>
</tr>
</tbody>
</table>
| 2 min | To enumerate the purposes of introduction of solids | **Purposes:**
- To meet the nutritional requirement of growing infant.
- To prevent deficiency diseases.
- To develop taste of different food items. | Explains with flash card | Why solids should be introduced as the baby grows. |
| 4 min | To list the points to be remembered while introduction of solids | **Points to be remember:**
- Wash hands before handling the food items.
- Food item should be cooked in clean container. | Explains with flash card | What points you will keep in mind while feeding the baby. |
- Do not give feed in hurry.
- Never feed forcefully.
- Avoid spicy food.
- Give feed when baby is hungry.
- Never express disliking towards a food item.
- Start introduction of solids only after six months of age. Continue to breast feed the baby.
- Offer small and frequent feed.
- Gradually increase the consistency of feed.

### Specific Objective

<table>
<thead>
<tr>
<th>Introduction of Food Items According to Age Food Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>To discuss various food items to be given in different age groups of infancy.</td>
</tr>
<tr>
<td>4-6 months Clear fluid, fruit juices, seasonal vegetable soup, dal soup</td>
</tr>
<tr>
<td>6-7 months Mashed banana, boiled potato, suji, gruel Porridge, curd</td>
</tr>
<tr>
<td>7-8 months Boiled egg, khichri, bread/chapati dipped/soaked in milk, biscuits</td>
</tr>
<tr>
<td>9-12 months Well cooked vegetables, pulses, rice, chapati, well cooked meat/fish</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Teaching Learning</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health educator will display food items of different age groups by charts or actual</td>
<td></td>
</tr>
<tr>
<td>List the food items which you will start at the age of 7 months</td>
<td></td>
</tr>
</tbody>
</table>

**To describe one day menu for 1 year old child 6 8 a.m.**

- 1 cup milk with one spoon sugar
- 1 slice of bread/1-2 chapati with one cup

**To start introduction of solids only after six months of age**

- Continue to breast feed the baby.
- Offer small and frequent feed.
- Gradually increase the consistency of feed.
Health Education

11 a.m.
- milk/porridge
- One fruit/curd/boiled
egg/boiled potato
- Khichri/rice and dal/
  chapati with vegetable

1 p.m.

Summary conclusion

Summarise the topic by asking questions mentioned in evaluation column. I hope that you will follow the schedule of introduction of solids for your babies to help them grow healthy.

Check Your Progress 1

List any five essential points to be remembered by a nurse as health educator for conduct of health education.

Activity

i) Enumerate the topics for health education in the following settings:
   - Health centre
   - Under five clinic
   - Paediatric wards
   - Schools — Primary school
     — Middle school

ii) Conduct health education for a group of hospitalised children on Maintenance of Personal Environmental hygiene.
Fig. 11.1: Individual Health Teaching

Fig. 11.2: Group Health Teaching
Health Education Plan

Name of the Health Educator : 
Topic : 
Subject : 
Language : 
Duration : 
Group : 
Place : 
Date of Presentation : 

General objectives

<table>
<thead>
<tr>
<th>Time</th>
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<th>Content</th>
<th>Teaching learning acting</th>
<th>Evaluation</th>
</tr>
</thead>
</table>

11.5 LET US SUM UP

You have learnt that educating the parents and children regarding various components of child care and prevention of diseases is prime responsibility of paediatric nurse. It is the foundation of preventive paediatric and indispensable component of paediatric nursing. This practical acquainted you with planning a health talk and how to deliver the planned teaching based on identified health education needs of the child and the parents.

11.6 ANSWERS TO CHECK YOUR PROGRESS

The nurse as a health educator should remember the following points.
— consider the individual differences, cultural beliefs, effectively used.

11.7 FURTHER READINGS


