



# ON CALL

Lay Community Health Advisors

## UNIT 2

# Health Literacy



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## Introduction

The theme of this unit is Health Literacy. Health Literacy has been defined as 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.

The promotion of Health Literacy is critical to active and informed participation in healthcare issues and is identified as a key action to reduce health inequalities within the European Union by the European Centre for Disease Prevention and Control (ECDC).

Levels of Health Literacy within the EU remain cause for concern as highlighted in a 2012 European Health Literacy Survey, which included all three levels of Health Literacy – functional, interactive and critical Health Literacy – and found that almost every second respondent showed limited Health Literacy.

There are considerable social and economic impacts resulting from limited Health Literacy. Research has shown that poor Health Literacy is consistently associated with poor health behaviours and outcomes. A report by Public Health England (2015) stated that limited (functional) Health Literacy predicts poor diet, smoking and a lack of physical activity independent of risk factors including age, education, gender, ethnicity and income, and is associated with an increased risk of morbidity and premature death in older adults independent of age, socio-economic position, cognitive function and pre-existing illness. People with long-term conditions including depression, diabetes, and heart, kidney and musculoskeletal disease are also more likely to have limited Health Literacy. People with low Health Literacy, compared with the general population:

- are 1.5-3 times more likely to experience increased hospitalisation or death, and are more likely to have depression;
- are more likely to struggle with managing their and their family's health and wellbeing, and are thus at increased risk of developing multiple health problems;
- use fewer preventive and health promotion services, such as cancer screening and flu vaccinations, and have less recall and adherence to medical instructions and healthcare regimes;
- find it more difficult to access appropriate health services, make more use of accident and emergency services and have longer in-patient stays;
- have less effective communication with health and social care practitioners and are less likely to engage in active discussions about their health options, potentially leading to their health needs being hidden.

Although Health Literacy affects everyone, evidence suggests that some groups are more at risk of experiencing low Health Literacy than others:

- Those experiencing social and economic disadvantage;
- Migrants and ethnic minorities;
- Older people;
- People with long term health conditions;
- Disabled people.

Therefore Health Literacy as a key determinant of health is strongly related to health inequalities.

Health Literacy means more than being able to read pamphlets and successfully make appointments. By improving people's access to health information and their capacity to use it effectively, Health Literacy is critical to empowerment.

Health Literacy is influenced by the language we speak; our ability to communicate clearly and listen carefully; and our age, socioeconomic status, cultural background, past experiences, cognitive abilities, and mental health. Each of these factors affects how we communicate, understand, and respond to health information.

A key aim of the ON CALL project is to improve Health Literacy within areas of social and economic disadvantage by adopting an asset-based community development approach. This involves the development of this bespoke training programme for community-based lay health, peer-support workers who on completion will be deployed within their community to promote and improve Health Literacy.

A community-based peer-support programme like this is more likely to promote Health Literacy and health equity as the peer-support workers will have things in common with participants, allow participants to engage in discussions about topics wider than health and encourage participants to be involved in social networks where problems, concerns and tips can be shared.

The Health Literacy Unit will comprise of 3 Subunits of training in the following areas:

- i. Mental Health
- ii. Diet and Nutrition
- iii. Preventative Health Promotion

On completion of the Unit participants will have developed knowledge in the following areas:

**Mental Health:**

- Fundamental knowledge of mental health issues
- Fundamental knowledge about the causes of mental health issues
- Fundamental knowledge about how to live well with mental health issues
- Fundamental knowledge on supporting people with mental health issues

**Diet and Nutrition:**

- Fundamental knowledge of the effect food and nutrition have on health
- Fundamental knowledge on the importance of healthy eating and what constitutes a healthy diet

**Preventative Health Promotion:**

- Fundamental knowledge of health education related to disease prevention, screenings, and healthy behaviours – e.g., chronic disease prevention; nutrition; physical activity; smoking cessation; stress management, and health screenings
- Fundamental knowledge of the social determinants of health

On completion of the training programme participants will also have developed skills in the following areas:

### **Mental Health**

- Identify the main features of different types of mental health issues
- Identify factors which influence mental health
- Recognise circumstances that may have a negative impact on people suffering from mental health issues
- Identify sources of stress
- Recognise problems caused by undue stress
- Provide information on how to live well with mental health problems
- Identify strategies for helping individuals with mental health issues
- Identify key support agencies and services for people with mental health issues
- Compile a list of relevant support services/organisations and their contact details on other issues impacting the beneficiaries

### **Diet and Nutrition**

- Make use of the traffic light system to read food labels in order to promote healthy eating
- Explain the benefits of eating fibre rich foods and eating 5 portions of fruit and vegetables a day
- Identify food groups and which foods are included within the groups
- Make use of practical tools, such as the 'Eatwell Plate', to promote healthy eating
- Illustrate the importance of certain foods for health, the amount that should be taken and how to include them in a diet

### **Preventative Health Promotion**

- Assess an individual's lifestyle pattern in order to motivate and support them to make positive changes regarding their health
- Explain the impact and risk factors associated with behaviors regarding health and wellbeing - e.g., smoking and exercise
- Compile a list of local resources and services that promote health and well being

Training in each sub unit is face-to-face and lasts 3 hours. This manual is accompanied by a Handbook that contains:

- A plan of each subunit divided into the core areas
- Clear instructions on how to teach the subunit including resources needed
- A set of full size photocopies of all the slides used to teach the course

Trainers may feel the need to tailor some of the materials and content so they are more relevant to the participants from their country

## Self-directed Learning

Participants are required to complete 5 hours of independent self-directed learning for each topic. At the end of each sub unit there will be a self-directed training section which will direct participants to a range of resources to support and enhance their knowledge and skills in particular areas.

### 2.1 Mental Health

#### Understanding Mental health

##### Aim

To provide information about mental health, the different types of mental health problems and the impact mental health has on people.

##### Purpose

The main purpose of the following activities are to ensure participants:

- Gain a greater understanding and knowledge of mental health and mental ill health
- Know the main features of severe and common mental health issues
- Understand the impact of symptoms of mental health issues on individuals

This sub unit will concentrate on four key areas:

- I. What is mental health?
- II. Causes of mental health issues
- III. Supporting someone with mental health issues
- IV. Living well with mental health issues

#### 2.1.1 What is Mental Health?

The World Health Organisation defines mental health as:

"Mental health is not just the absence of mental disorder. It is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community."

Good mental health includes a positive sense of wellbeing, it is important for everyone as it helps us to manage major life events such as birth, change of employment, bereavement, redundancy and retirement. Individual resources include self-esteem, optimism, a sense of mastery and coherence, the ability to initiate, develop and sustain mutually satisfying personal relationships and the ability to cope with adversities.

Mental ill-health is an umbrella term that covers a continuum of mental health problems, from those with mild symptoms to the most severe mental disorders, all of which can be of different intensity and duration.

### 2.1.2 Mental Health Issues

Serious mental health issues consist of experiences which most people would find it hard to understand – e.g. hearing voices. Common mental health issues consist of experiences which most people can relate to, e.g. fear or sadness.

#### Serious mental health issues

**Psychosis:** A general term to describe symptoms of mental health disorders where a person has lost some contact with reality and can believe things to be true that do not exist in reality.

#### Psychotic Conditions:

**Schizophrenia:** Means “fractured mind” and refers to changes in mental function where thoughts and perceptions become disordered.

**Bipolar:** During periods of intense depression or mania, a person with bipolar disorder might experience psychotic symptoms which can lead to serious disturbances in their thinking, emotions and behaviours.

#### Common to Psychotic Disorders:

**Hallucinations:** False perceptions – most commonly involves hearing voices that are not audible to others, can involve seeing, feeling, tasting or smelling things that the person perceives as very real but which do not exist in reality. Hallucinations can be frightening, especially voices being abusive or making negative comments about the person.

**Delusions:** A belief in something that is implausible or untrue e.g. delusions of grandeur or of persecution.

#### Common Mental Health Issues

**Anxiety:** Anxiety is a feeling of unease, such as worry or fear, that can be mild or severe.

Everyone has feelings of anxiety at some point in their life. For example, you may feel worried and anxious about sitting an exam or having a medical test or job interview. During times like these, feeling anxious can be perfectly normal.

However, some people find it hard to control their worries. Their feelings of anxiety are more constant and can often affect their daily life.

Anxiety is the main symptom of several conditions, including panic disorder, phobias, post-traumatic stress disorder and social anxiety disorder (social phobia).

**Depression:** the depression this training refers to is ‘clinical depression’ which lasts for at least 2 weeks and affects a person’s ability to carry out their work or routine activities and have satisfying personal relationships. Clinical depression is a common but serious mental health issue and can be recurrent. It can be related to stressful events or situations, including, reactive depression, seasonal depression disorder and postnatal depression.

### 2.1.3 Stress and Mental Health

Stress is primarily a physical response. When stressed, the body thinks it is under attack and switches to ‘fight or flight’ mode, releasing a complex mix of hormones and chemicals such as adrenaline, cortisol and norepinephrine to prepare the body for physical action. This causes a number of reactions, from blood being diverted to muscles to shutting down unnecessary bodily functions such as digestion.

Through the release of hormones such as adrenaline, cortisol and norepinephrine, the caveman gained a rush of energy, which prepared him to either fight the tiger or run away. That heart pounding, fast breathing sensation is the adrenaline; as well as a boost of energy, it enables us to focus our attention so we can quickly respond to the situation.

In the modern world, the ‘fight or flight’ mode can still help us survive dangerous situations, such as reacting swiftly to a person running in front of our car by slamming on the brakes.

The challenge is when our body goes into a state of stress in inappropriate situations. When blood flow is going only to the most important muscles needed to fight or flee, brain function is minimised. This can lead to an inability to ‘think straight’; a state that is a great hindrance in both our work and home lives. If we are kept in a state of stress for long periods, it can be detrimental to our health. The results of having elevated cortisol levels can be an increase in sugar and blood pressure levels, and a decrease in libido.

Everyone feels stressed from time to time. It is important to pay attention to how you deal with minor and major stress events so that you know when to seek help.

According to the National Institute of Mental Health there are 5 Things You Should Know About STRESS.

1. Stress affects everyone. Everyone feels stressed from time to time. Some people may cope with stress more effectively or recover from stressful events more quickly than others. There are different types of stress—all of which carry physical and mental health risks. A stressor may be a one time or short term occurrence, or it can be an occurrence that keeps happening over a long period of time. Examples of stress include:

- Routine stress related to the pressures of work, school, family, and other daily responsibilities
- Stress brought about by a sudden negative change, such as losing a job, divorce, or illness
- Traumatic stress experienced in an event like a major accident, war, assault, or a natural disaster where people may be in danger of being seriously hurt or killed. People who experience traumatic stress often experience temporary symptoms of mental illness, but most recover naturally soon after.

2. Not all stress is bad. Stress can motivate people to prepare or perform, like when they need to take a test or interview for a new job. Stress can even be life-saving in some situations. In response to danger, your body prepares to face a threat or flee to safety. In these situations, your pulse quickens, you breathe faster, your muscles tense, your brain uses more oxygen and increases activity—all functions aimed at survival.

3. Long-term stress can harm your health. Health problems can occur if the stress response goes on for too long or becomes chronic, such as when the source of stress is constant, or if the response continues after the danger has subsided. With chronic stress, those same life-saving responses in your body can suppress immune, digestive, sleep, and reproductive systems, which may cause them to stop working normally. Different people may feel stress in different ways. For example, some people experience mainly digestive symptoms, while others may have headaches, sleeplessness, sadness, anger or irritability. People under chronic stress are prone to more frequent and severe viral infections, such as the flu or common cold. Routine stress may be the hardest type of stress to notice at first. Because the source of stress tends to be more constant than in cases of acute or traumatic stress, the body gets no clear signal to return to normal functioning. Over time, continued strain on your body from routine stress may contribute to serious health problems, such as heart disease, high blood pressure, diabetes, and other illnesses, as well as mental disorders like depression or anxiety

4. There are ways to manage stress. The effects of stress tend to build up over time. Taking practical steps to manage your stress can reduce or prevent these effects. The following are some tips that may help you to cope with stress:

- Recognise the Signs of your body's response to stress, such as difficulty sleeping, increased alcohol and other substance use, being easily angered, feeling depressed, and having low energy.
- Talk to Your Doctor or Health Care Provider. Get proper health care for existing or new health problems.
- Get Regular Exercise. Just 30 minutes per day of walking can help boost your mood and reduce stress.
- Try a Relaxing Activity. Explore stress coping programs, which may incorporate meditation, yoga, tai chi, or other gentle exercises. For some stress-related conditions, these approaches are used in addition to other forms of treatment. Schedule regular times for these and other healthy and relaxing activities.
- Set Goals and Priorities. Decide what must get done and what can wait, and learn to say no to new tasks if they are putting you into overload. Note what you have accomplished at the end of the day, not what you have been unable to do.
- Stay Connected with people who can provide emotional and other support. To reduce stress, ask for help from friends, family, and community or religious organizations

5. If you're overwhelmed by stress, ask for help from a health professional. You should seek help right away if you have suicidal thoughts, are overwhelmed, feel you cannot cope, or are using drugs or alcohol to cope. Your doctor may be able to provide a recommendation.

#### 2.1.4 Supporting Someone with Mental Health Issues

Mental health problems are common throughout the world, and throughout the course of any person's life, it is highly likely that they will either develop a mental health problem themselves or will know someone close who does. However, many people are not well informed about how to recognise mental health issues or what help is available. As a result, people experiencing mental health issues may not know how to access appropriate help or may not seek help at all. With greater community awareness about mental health, people will be able to recognise and support someone with mental health needs.

As it is extremely likely that a Lay Health Adviser working within the community will meet someone experiencing mental health issues it is important that they know how to respond in an appropriate manner.

Mental Health First Aid Northern Ireland sets out an action plan for helping someone experiencing mental health issues:

##### **Action 1: Assess risk of suicide or harm**

In this context assess means gathering enough information about the person and their situation to help you decide what immediate actions or short-term help would be most supportive. Having this information will also help you decide with the person what additional professional help might be appropriate.

##### **Action 2: Listen non-judgementally**

This involves processing attitudes of:

**Acceptance** – respecting the person's feelings, beliefs and values, even if they are different to your own

**Genuineness** – Being genuine with the person in communicating your acceptance of them and their beliefs

**Empathy** – Showing the person that you understand the feelings behind their words

##### **Action 3: Give reassurance and information**

A person experiencing a mental health issue may feel confused or overwhelmed, and unable to think clearly on their own behalf. It is helpful for the person to know that someone who is able to think clearly and calmly about their situation can support them.

##### **Action 4: Encourage the person to get appropriate professional help**

It is important to encourage the person to seek help as soon as possible. There are a range of professionals who provide support in different ways.

##### **Action 5: Encourage self-help strategies**

A number of self-help strategies will be presented in the next section.

It is however important to understand that when a person is experiencing distressing symptoms of mental health problems, self-care can feel very demanding and additional support with even the smallest of tasks is often necessary.

(Source: Mental Health First Aid Northern Ireland Manual)

### **2.1.5 Living Well with Mental Health Issues - Social and Community Strategies for Living Well with Mental Health Issues**

#### **Eating a Balanced Diet**

It is often the case that the physical health needs of people with mental health issues are neglected because the primary focus is upon their mental health problems (not unsurprisingly). People who are depressed may eat less than usual and sometimes people with psychosis may forget to eat or worry that the food will be harmful in some way. This can cause additional problems which may have a negative impact upon the mental illness.

Healthier diets are those that include a variety of different foods – fruit and vegetables are particularly important as are foods that are rich in starch and fibre.

As well as eating healthier it is important that food is stored appropriately and is eaten when fresh.

Any community projects, which offer meals or help people to access a variety of foods – for example – teaching people to grow vegetables, will be useful in enhancing the diet of people with mental illness. Encouraging them to help with such projects will also provide opportunities to join in activities and mix with other people which are also likely to be beneficial.

#### **Regular Exercise**

Taking regular exercise is good for the physical and mental health of everyone.

It is often the case that the physical health needs of people with mental illness are neglected because the primary focus is upon their mental health problems (not unsurprisingly).

Therefore encouraging people with mental health problems to take regular exercise is likely to enhance their physical as well as their mental health.

Participation in recreational activities such as running, basketball and football has been shown to help reduce anxiety and depression as well as enhance physical fitness. Some studies have suggested that physical exercise may also protect people against stress.

Exercise may include individual activities such as walking or running or may include team games such as football. Obviously team games hold the additional benefits of spending time with other people and increasing activity levels which are also likely to be beneficial.

Participating in regular exercise is particularly important for those people who experience weight gain as a side effect of medication.

Creating opportunities for patients to join in individual exercise or group exercise will enhance both their physical and mental health.

## **Increasing Occupation and Activity**

All of us benefit from participating in a range of activities which include doing things that we enjoy or feel we are good at and often involve social contact. Anyone who stopped going out to work, spending time with friends etc. would be at a high risk of developing a mental health problem.

People with mental health problems often become less active and may spend more time on their own doing very little. For example, people who are depressed often don't feel like engaging in activities – even activities that they use to enjoy and may do very little at all.

Helping people who have depression, anxiety or psychosis to increase their activity levels can assist in helping them to feel better.

As it is going to require a lot of effort on the part of the mentally ill person, it is much more likely that they will try to join in activities that they will enjoy.

Research has shown that people with mental health problems who are able to go out to work can do so even if they continue to experience distressing symptoms of mental illness – for example, auditory hallucinations – and that having a job protects them from day to day stressors.

Therefore creating opportunities for those with mental health problems to join in community activities is likely to be beneficial. Activities which involve the chance to spend time with other people will have the extra benefits of helping them to develop social networks. Activities that include physical exercise will help with mental and physical fitness. For some people, participating in activities may reduce levels of boredom and reduce the use of alcohol or other non-prescribed drugs which make mental health problems worse.

## **Reducing Alcohol and Non-Prescribed Drug Use**

Taking too many drugs that are not prescribed for you or drinking too much alcohol can cause a range of physical and mental health problems. These include stomach ulcers, liver disease, asthma and other respiratory problems and brain damage.

Research suggests that a large number of people with mental illness use alcohol and drugs - sometimes to help with their symptoms although non-prescribed drugs and alcohol usually make these symptoms worse and can interfere with medication. They may also have an impact upon sleep and appetite and not eating or sleeping well also makes symptoms worse.

Providing information about the potential harm that using large amounts of drugs and alcohol can cause can be helpful. Just telling people to stop taking these substances is not likely to work. Encouraging them to take less may be more beneficial.

Increasing activity levels may also help some people reduce the amount of drugs or alcohol they take.

If patients are using the drugs to help with their symptoms it will be helpful to check if they are taking their medication. If they are and the medication is not working other types of medication may be considered. If they are not taking their medication – encouraging them to take it may reduce their symptoms. This may reduce how many other non-prescribed drugs they want to take.

## **Developing Social Networks**

Regular contact with other people is important for everyone's mental health. This is especially the case for people who have mental illnesses. They may find it difficult to make and visit friends regularly or even start a conversation at times.

People with mental health problems can easily become isolated. This can make their mental health problems worse. A good social network, however, can protect against stress.

Research has also shown that people with mental illness who have good social networks tend to function more independently within the community than those who either have limited social networks or no social network at all. Higher levels of social support also seem to protect against relapse.

Creating opportunities for people with mental health problems to spend time with other people and develop social networks is therefore an important and useful way of helping them be mentally healthy.

It can sometimes be useful for people with similar mental health problems to meet up as they may share ways of coping with the illness and can find it reassuring to learn that they are not the only one with such problems.

Another benefit of developing social networks away from family members is that it can reduce contact between someone with mental illness and their family and this can be useful in reducing the stress for both the mentally ill person and their family members.

## 2.2 Diet and Nutrition

### Aim

To provide information on healthy eating, nutrition and explore the effect that the food we eat has on our health

### Purpose

The main purpose of the following activities are to ensure participants:

- Gain a greater understanding and knowledge of the effect food and nutrition have on health
- Gain a greater understanding and knowledge of healthy eating and what constitutes a healthy diet

This sub unit will concentrate on the three key areas:

- i. Introduction to healthy eating - the Eatwell Guide
- ii. Diet related health issues
- iii. Healthy eating on a budget

### 2.2.1 Introduction to Healthy Eating - The Eatwell Guide

Eating a healthy, balanced diet is an important part of maintaining good health, and can help you feel at your best.

This means eating a wide variety of foods in the right proportions, consuming the right amount of food and drink to achieve and maintain a healthy body weight.

The Eatwell Guide (2016) was devised by the British Nutrition Foundation highlights the UK Governments recommendations on foods, nutrients and health into simple messages to help us make informed choices about the foods, drinks and dietary patterns that promote good health.

The Guide shows the different types of foods and drinks we should consume – and in what proportions – to have a healthy, balanced diet. The guide also shows the recommended daily calorie intake per day for women (2000Kcal) and men (2500Kcal).

## Eatwell Guide



### 2.2.2 Diet Related Health Issues

A balanced diet is important because your body's organs and tissues need proper nutrition to work effectively. Without good nutrition, your body is more prone to disease, infection, fatigue and poor performance. Children with a poor diet run the risk of growth and developmental problems. Bad eating habits continue for the rest of their lives.

The top leading causes of death are directly influenced by diet. These include heart disease; cancer; stroke; diabetes.

Chronic diseases are long-term diseases that are not contagious and largely preventable. They are the most common cause of death in the world and present a great burden for society, particularly diseases such as obesity, diabetes, cardiovascular disease, cancer, dental disease, and osteoporosis. Making improvements in terms of diet and physical activity can help reduce the risk of these chronic diseases

### **2.2.3 Food Labeling**

The food we eat has a very significant effect on our health. It can either promote and protect our health, or it can contribute to the development of diet-related disease.

Food labels serve as a guide to healthy eating. It is similar to a window looking into the food product. A food label will inform you about the contents (weight), the name of the food, the manufacturer, the ingredients, the nutrition facts, and also any common allergens in the product. Food labels offer you a tool to make healthy food choices by choosing nutrient rich foods and keeping your calories low if you are struggling with weight management.

## 2.3 Preventative Health Promotion

### Aim

To provide information on health, what impacts on health and preventative health promotion.

### Purpose

The main purpose of the following activities are to ensure participants:

- Gain a greater understanding and knowledge of health and what impacts on health.
- Define and give examples of health, community, and social determinants of health.
- Recognize how individual health and community health are related.
- Analyze how social determinants of health can impact an individual's personal health and the health of the community.

This subunit will concentrate on the three key areas:

- i. Health and determinants of health
- ii. Risk Factors and risk assessment
- iii. Role of Lay Health Family Advisors

### 2.3.1 Health and Determinants of Health

Health is not just absence of disease but a state of overall wellbeing. In 1948, the World Health Organization (WHO) defined health with a phrase that is still used today. "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."

Many factors combine together to affect the health of individuals and communities. Whether people are healthy or not, is determined by their circumstances and environment. To a large extent, factors such as where we live, the state of our environment, genetics, our income and education level, and our relationships with friends and family all have considerable impacts on health, whereas the more commonly considered factors such as access and use of health care services often have less of an impact.

#### The determinants of health include:

- the social and economic environment;
- the physical environment;
- the person's individual characteristics and behaviours.



The context of people’s lives determine their health, and so blaming individuals for having poor health or crediting them for good health is inappropriate. Individuals are unlikely to be able to directly control many of the determinants of health. These determinants—or things that make people healthy or not—include the above factors, and many others:

- Income and social status - higher income and social status are linked to better health. The greater the gap between the richest and poorest people, the greater the differences in health.
- Education – low education levels are linked with poor health, more stress and lower self-confidence.
- Physical environment – safe water and clean air, healthy workplaces, safe houses, communities and roads all contribute to good health. Employment and working conditions – people in employment are healthier, particularly those who have more control over their working conditions
- Social support networks – greater support from families, friends and communities is linked to better health. Culture - customs and traditions, and the beliefs of the family and community all affect health.
- Genetics - inheritance plays a part in determining lifespan, healthiness and the likelihood of developing certain illnesses. Personal behaviour and coping skills – balanced eating, keeping active, smoking, drinking, and how we deal with life’s stresses and challenges all affect health.
- Health services - access and use of services that prevent and treat disease influences health
- Gender - Men and women suffer from different types of diseases at different ages.

It is the interrelationships among these factors that determine individual and population health. Because of this, interventions that target multiple determinants of health are most likely to be effective. Determinants of health reach beyond the boundaries of traditional health care and public

health sectors; sectors such as education, housing, transportation, agriculture, and environment can be important allies in improving population health.

(Source: World Health Organisation <https://www.who.int/hia/evidence/doh/en/>)

### 2.3.2 Health Promotion and Disease Prevention

Health promotion and disease prevention programmes focus on keeping people healthy. Health promotion programmes aim to engage and empower individuals and communities to choose healthy behaviors, and make changes that reduce the risk of developing chronic diseases and other morbidities. Defined by the World Health Organisation, health promotion is:

“The process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.”

Disease prevention differs from health promotion because it focuses on specific efforts aimed at reducing the development and severity of chronic diseases and other morbidities.

Wellness is related to health promotion and disease prevention. Wellness is described as the attitudes and active decisions made by an individual that contribute to positive health behaviors and outcomes.

Health promotion and disease prevention programmes often address social determinants of health, which influence modifiable risk behaviors. Social determinants of health are the economic, social, cultural, and political conditions in which people are born, grow, and live that affect health status. Modifiable risk behaviors include, for example, tobacco use, poor eating habits, and lack of physical activity, which contribute to the development of chronic disease.

### 2.3.3 Non-communicable Diseases

Non-communicable diseases (NCDs) constitute a major global health challenge, hampering nations' economic growth and sustainable development. The four major groups of NCDs - cardiovascular diseases, cancer, chronic respiratory diseases, and diabetes - account for over 80% of all NCDs related deaths and share the same four major risk factors: tobacco use, harmful use of alcohol, unhealthy diets, and physical inactivity. Recently, mental health and environmental determinants were also added to the NCDs agenda.

#### Key facts

- NCDs kill 41 million people each year, equivalent to 71% of all deaths globally.
- Each year, 15 million people die from a NCD between the ages of 30 and 69 years; over 85% of these "premature" deaths occur in low- and middle-income countries.
- Cardiovascular diseases account for most NCD deaths, or 17.9 million people annually, followed by cancers (9.0 million), respiratory diseases (3.9million), and diabetes (1.6 million).
- These 4 groups of diseases account for over 80% of all premature NCD deaths.

- Tobacco use, physical inactivity, the harmful use of alcohol and unhealthy diets all increase the risk of dying from a NCD.
- Detection, screening and treatment of NCDs, as well as palliative care, are key components of the response to NCDs.

NCDs, also known as chronic diseases, tend to be of long duration and are the result of a combination of genetic, physiological, environmental and behaviours factors.

NCDs disproportionately affect people in low- and middle-income countries where more than three quarters of global NCD deaths – 32million – occur.

### **Who is at risk of such diseases?**

People of all age groups, regions and countries are affected by NCDs. These conditions are often associated with older age groups, but evidence shows that 15 million of all deaths attributed to NCDs occur between the ages of 30 and 69 years. Of these "premature" deaths, over 85% are estimated to occur in low- and middle-income countries. Children, adults and the elderly are all vulnerable to the risk factors contributing to NCDs, whether from unhealthy diets, physical inactivity, exposure to tobacco smoke or the harmful use of alcohol.

These diseases are driven by forces that include rapid unplanned urbanization, globalization of unhealthy lifestyles and population ageing. Unhealthy diets and a lack of physical activity may show up in people as raised blood pressure, increased blood glucose, elevated blood lipids and obesity. These are called metabolic risk factors that can lead to cardiovascular disease, the leading NCD in terms of premature deaths.

### **2.3.4 Risk factors**

#### **Health Behaviors**

Health behaviors are actions individuals take that affect their health. They include actions that lead to improved health, such as eating well and being physically active, and actions that increase one's risk of disease, such as smoking, excessive alcohol intake, and risky sexual behavior.

#### **Modifiable Behavioural Risk Factors**

Modifiable behaviours, such as tobacco use, physical inactivity, unhealthy diet and the harmful use of alcohol, all increase the risk of NCDs.

- Tobacco accounts for over 7.2 million deaths every year (including from the effects of exposure to second-hand smoke), and is projected to increase markedly over the coming years.
- 4.1 million annual deaths have been attributed to excess salt/sodium intake.
- More than half of the 3.3 million annual deaths attributable to alcohol use are from NCDs, including cancer.
- 1.6 million deaths annually can be attributed to insufficient physical activity.

## Metabolic Risk Factors

Metabolic risk factors contribute to four key metabolic changes that increase the risk of NCDs:

- raised blood pressure
- overweight/obesity
- hyperglycemia (high blood glucose levels) and
- hyperlipidemia (high levels of fat in the blood).

In terms of attributable deaths, the leading metabolic risk factor globally is elevated blood pressure (to which 19% of global deaths are attributed), followed by overweight and obesity and raised blood glucose. (Source: WHO 2018)

There are 2 types of factor:

**Risk Factor:** Any attribute, characteristic or exposure of an individual which increases likelihood of developing NCD.

**Causative Factor:** Provides direct explanation for the disease.

Presence of risk factors means disease is more likely to develop; cause means this is definitely going to lead to disease.

### 2.3.5 Screening

Screening people for serious diseases is receiving increasing attention as studies demonstrate the potential benefits of early detection and early intervention in preventing morbidity and mortality. Screening tests are available for some of the most important noncommunicable diseases, including cardiovascular disease, type 2 diabetes and several site-specific cancers. However, screening guidelines for cardiovascular disease, cancers and diabetes vary within and between countries because many national and international organizations are developing their own guidelines.

### 2.3.6 The Role of Community Lay Health Advisors in Preventative Health Promotion

The World Health Report 2006 argued that community health workers (CHWs) have the potential to be part of the solution to the human resource crisis affecting many countries. CHWs provide a variety of functions, including outreach, counseling and patient home care and represent a resource to reach and serve disadvantaged populations. There has been mounting evidence to demonstrate the positive potential of community health workers in improving.

Emphasise that this is not an exhaustive list of roles and encourage participants to think about additional roles and share these with the group.

Key roles include:

Health promotion and education – delivering key health messages in a manner that is understandable and relevant to individuals e.g.

Community Connectors – It is important that Lay Health Advisors find out what services, programmes and activities are available within the community e.g. Support groups, local dance groups for older people, Women’s Centre’s, Men’s Sheds etc so they can signpost individuals to these depending on need.

The role of Lay Health Advisors is also to connect people with other services such as primary care – GP, screening services etc

Assess lifestyle patterns and behaviours – ability to specify the important risk factors that contribute to non-communicable diseases in the community e.g. diet, smoking, alcohol etc

Goal setting – having identified individual risk factors a key role of the lay Health Advisor is to help people set realistic, achievable goals to reduce risks and enhance health and wellbeing e.g. lose weight, stop smoking, reduce alcohol etc. This will involve connecting individuals to other support programmes as above.

Health Literacy - Help individuals to obtain and understand basic health information. Learning about your health can help you make better decisions about what you need to do for self-care.

## References

### Websites

Mental health - <https://www.mind.org.uk/>

Stress - <http://www.stress.org.uk>

Diet and Nutrition - <https://www.nutrition.org.uk>

Health - <https://www.who.int/>

### Videos

Mental Health - <https://www.youtube.com/watch?v=lvnT7HwOZic&t=1s>.

“How Stress Affects Your Body and Mind” - [https://www.youtube.com/watch?v=CZTc8\\_FwHGM](https://www.youtube.com/watch?v=CZTc8_FwHGM)

The Eatwell Guide Explained - <https://www.youtube.com/watch?v=1tJYcNt6Bpk>

### Manuals

University of Manchester, 2003 – A Mental Health Training Programme for Community Health Workers

Health Promotion Agency for Northern Ireland, 2009 - Mental Health First Aid

The Eatwell Guide Booklet available at:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/742750/Eatwell\\_Guide\\_booklet\\_2018v4.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/742750/Eatwell_Guide_booklet_2018v4.pdf)

### Articles

Struggling with stress?

<https://www.nhsinform.scot/healthy-living/mental-wellbeing/stress/struggling-with-stress>

Five Things You Should Know About Stress

<https://www.nimh.nih.gov/health/publications/stress/index.shtml>

Clever Ways to Eat healthy on a Tight Budget - Bjarnadottir, Adda (2017)

<https://www.healthline.com/nutrition/19-ways-to-eat-healthy-on-a-budget>