**1**

**Describe the nurse's role and responsibility as health educator**

 When the nurse is planning health education they should provide education that is simple for the patient to understand, patient centered, and to be presented to the patient at the literacy level of the patient and the caregivers.  There are 4 major steps for them to consider: assessment, planning, , implementation, and evaluation (Cutilli, 2020).  The assessment goes over your head to toe assessment of the patient, plus what their chief complaint is, any labs, xray's, images that were taken.  The planning and implementation stages uses the information that is gathered from the assessment to develop patient specific teaching towards the patients goals.  The evaluation is the nurse's opportunity to make sure the patient and the caregivers know that they have the knowledge of self care and the disease management. (Cutilli, 2020).

**What strategies, besides the use of learning styles, can a nurse educator consider when developing tailored individual care plans, or for educational programs in health promotion?**

 A nurse can consider the patient, their literacy level, who is taking care of them, their home situation, even what type of home they live in.  There are many factors to consider, its the patients life as a whole, not just bits and pieces.  Their disease and what problems that brings to the table, the patients obstacles.

**When should behavioral objectives be utilized in a care plan or health promotion?**

 Behavioral objectives should always be used in care plans.  How the patient is going to mentally respond to the care plan should always be considered.  Do we feel like the patient will tackle this care plan, is it attainable, is it too difficult?  We need to make sure they understand it but that it is also mentally manageable for the patient to implement in their daily life.

Cutilli C. (2020).  Excellence in patient education: Evidence-based education that "sticks" and improves patient outcomes. *National Library of Medicine.*Retrieved October 10, 2023 from

<https://pubmed.ncbi.nlm.nih.gov/32389259/>

REPLY

**TS**

2

Nurses have a role and responsibility to be health educators to the community. The health education need to help in promoting health and wellness for the community. The different needs of people require addressing by providing the necessary education and counsel to the patients. A nurse should discover the education to use in attaining an improved health for the community. Health education by nurses need to encourage the use of healthy lifestyle behaviors and discourage engaging in risky activities than can cause illness to people. According to Bhattad and Pacifico (2022) patients need to understand the medical conditions and heath situations through the use of health education. Nurses have a role of providing health education that is relevant, current and consistent to help the patients in making the appropriate decisions. The making of decisions that are helpful for individuals require using the necessary education to understand the different diseases in the community. Health education require understanding diseases and risk factors for an improved health care for the people.

The learning styles used by a nurse educator should help in handling the specific needs of patients. A nurse need to focus on providing individualized care plans by using the right learning styles. The learning styles used by a nurse should provide adequate and relevant clinical information to the patients. According Fereidouni et al (2019) humans need to learn specific knowledge and skills to help cope with new situations. Health education is essential in helping people cope with different illnesses and health complexities in the community. A nurse should engage in health-promotion behaviors by identifying the methods to use in increasing the health and wellness of people. Healthcare providers need to provide information about illnesses and care plans for an improved health outcome. A nurse should use health education and promotion to change the behaviors of different clients.

References

Bhattad, P. B., &Pacifico, L. (2022). Empowering Patients: Promoting Patient Education and Health Literacy. Cureus, 14(7). https://doi.org/10.7759/cureus.27336

Fereidouni, Z., Sarvestani, R. S., Hariri, G., Kuhpaye, S. A., Amirkhani, M., & Kalyani, M. N. (2019). Moving Into Action: The Master Key to Patient Education. The Journal of Nursing Research, 27(1), 1-8. https://doi.org/10.1097/jnr.0000000000000280

3**The nurse's role and responsibility as a health educator.**

The nurse's responsibility in health education is to ensure that patients are given the tools they need in a way that they can assimilate and utilize them to take responsibility for their health outcomes outside of the healthcare system (Khazhymurat et al., 2023).  The nurse’s role is to assess learning styles and readiness to optimize comprehension, determine clear individualized health objectives, provide health teaching, and evaluate the patient’s understanding of the information taught (Whitney, 2022).

**What strategies, besides using learning styles, can a nurse educator consider when developing tailored individual care plans or educational programs in health promotion?**

Some additional strategies for educating patients, in addition to using learning styles, are simplifying the information, modification for cultural preferences, spreading out the teaching, including family and caregivers, and utilizing teach-back methods. (Morris, 2022)

*Simplifying the information-*Ensuring that the information is in a simple format that honors the patient’s level of understanding, not to overwhelm them.

*Modification for cultural preferences-*Understanding the patient’s cultural needs and modifying and providing education in line with their preferences.  This includes offering translated materials and education for those for whom English is not their native language.

*Spreading out the teaching-*Utilizing the entire time of patient contact to provide education can foster sufficient time for evaluating the effectiveness and understanding and offer more time to break the learning into smaller, more digestible pieces.

*Including family and caregivers-*Extending teaching to everyone involved in the patient's care outside the healthcare setting is essential.  This allows for seamless continuity of care for the best patient outcomes.

*Utilizing teach-back methods-*Patient education is only meaningful if the patient understands and retains the information.  Allowing the patient to verbalize and demonstrate what is being taught assures the patient's understanding.

**When should behavioral objectives be utilized in a care plan or health promotion?**

Measurable objectives focused on behavior change (behavioral objectives) should be utilized in all care plans and health promotion (Whitney, 2022).  Attaining or regaining health (the purpose of care plans and health promotion) is an action that requires certain behaviors to take place for health to occur.  Behavioral objectives focus on actions patients can take to make lasting changes in their health.  These objectives should be included in teaching and discharge care plans so that patients and other caregivers (family and professional) can measure progress and make adjustments as necessary.

References:

Khazhymurat, A., Paiyzkhan, M., Khriyenko, S., Seilova, S., Baisanova, S., Kuntuganova, A., Almazan, J. U., & Cruz, J. P. (2023). Health education competence: An investigation of the health education knowledge, skills and attitudes of nurses in Kazakhstan. *Nurse Education in Practice*, *68*, N.PAG. <https://doi-org.lopes.idm.oclc.org/10.1016/j.nepr.2023.103586>

Morris, G. (August 29, 2022) 10 ways nurses and nurse leaders can improve patient education.  *Nurse Journal.*https://nursejournal.org/articles/tips-to-improve-patient-education

Whitney, S. (2022).Teaching and learning styles. (Ed.), *Health Promotion: Health & Wellness Across the Continuum*(2nd ed., pp. 6-25). GCU*.*

REPLY

**AO**

4

The Transtheoretical Model (TTM), sometimes referred to as the Stages of Change model, is a popular paradigm in the health promotion sector. This model recognizes that changing one's behavior is a multi-step process, and it provides a framework for understanding and supporting these steps (Sugijati et al., 2023). Precontemplation, Contemplation, Preparation, Action, and Maintenance are the five steps identified by the Transtheoretical Model (TTM). When people are in the precontemplation stage of the change process, they are not yet considering the possibility of making a change. The role of the nurse at this moment is to inform patients and their loved ones of the advantages of the upcoming change (Sugijati et al., 2023). Those who are in the contemplation stage are considering the possibility of change, although they may have conflicted emotions about it. The nurse is in a prime position to educate the patient about available options, weigh the pros and cons of each, and help the patient settle on a course of action (Sugijati et al., 2023). As the patient advances into the preparation phase, the nurse will be able to help them formulate realistic, attainable goals and a strategy for making the necessary adjustments. New habits can't be kept up through the action and maintenance phases without constant encouragement and praise (Sugijati et al., 2023).

The Transtheoretical Model is helpful for teaching behavioral changes because it acknowledges that people are at different positions in their desire to change (Kim & Tucker 2020). If the nurse provides education and interventions that are specific to the particular stage the patient is in, she can provide knowledge and support that is consistent with the patient's current state of mind and levels of motivation (Kim & Tucker 2020). Because it is tailored to the client's unique needs and challenges, this method of behavior modification has a higher chance of being effective. The ability to learn new things and modify one's behavior might be hampered by a variety of factors. Patients with limited health literacy may struggle to make sense of their medical diagnoses and treatment options, which can have serious consequences (Kim & Tucker 2020). Differences in culture and language can also act as barriers to learning because some ideas may not translate well or be misunderstood. Mental and emotional problems, such as worry, sadness, or terror, can also impair a patient's ability to learn new information (Kim & Tucker 2020). These features may hinder the patient's ability to learn. A patient's ability to learn and modify behavior can also be significantly impacted by extrinsic factors such their financial status, access to resources, and social support networks (Kim & Tucker 2020).

The success of a patient's training greatly depends on the degree to which they are receptive to new information and eager to adjust. A patient who is still in the precontemplation or contemplation phase may not be ready to hear information about making behavioral changes (Younas et al., 2023). The nurse's role in such cases may involve planting the initial seeds of understanding and nurturing the resulting growth of motivation over time. The patient in the action or maintenance phase, on the other hand, is more likely to be actively engaged and driven to acquire and execute the new behaviors (Younas et al., 2023). This is because they are in the penultimate phase of their treatment. When the nurse is aware of the patient's level of readiness, they can tailor their care to meet the individual's needs. This ensures that the supplied knowledge is timely and relevant, increasing the likelihood of successful behavior change and better health outcomes (Younas et al., 2023).

References

Kim, J., & Tucker, A. (2020). The inclusive family support model: Facilitating openness for post‐adoptive families. *Child & Family Social Work*, *25*(1), 173-181. <https://doi.org/10.1111/cfs.12675>

Sugijati, S., Jamhariyah, J., &Prijatni, I. (2023). The Effectiveness of the Health Promotion Model (Promkes) Based on the Transtheory Model on Pre-Eclampsy Prevention Behavior in Pregnant Women. *Journal of Social Science*, *4*(5), 1157-1172. <https://doi.org/10.46799/jss.v4i5.685>

Younas, A., Inayat, S., & Masih, S. (2023). Nurses’ perceived barriers to the delivery of person‐centred care to complex patients: A qualitative study using theoretical domains framework. *Journal of Clinical Nursing*, *32*(3-4), 368-381. <https://doi.org/10.1111/jocn.16245>

**5**

**Describe a health promotion model used to initiate behavioral changes.**

The Health Belief model (HBM) is a frequently applied health promotion concept for instigating modifications in behavior. The Health Belief Model (HBM) is a psychological framework that elucidates and forecasts health-related behaviors through its emphasis on the attitudes and beliefs held by individuals (The Health Belief Model, n.d.).

**How does this model help in teaching behavioral changes?**

As an aid for educators, the Health Belief Model (HBM) helps them understand how individuals perceive their vulnerability to health issues, the severity of the situation, the benefits of taking proactive measures, and potential obstacles they may face. This understanding allows for a targeted approach to education that effectively addresses specific issues and inspires proactive behavior. Educators can customize interventions based on individual perspectives. Strategies that align with the HBM include highlighting the benefits of specific health activities, removing perceived obstacles, and providing prompts for action. The HBM recognizes the importance of maintenance as a crucial stage in the behavior change process. Educators can use this model as a framework to inform interventions aimed at promoting long-term healthy habits. The model emphasizes the role of perceived benefits in driving behavior change. Nurse educators can highlight the positive outcomes of adopting health-promoting behaviors and provide encouragement to take action, boosting individuals' self-efficacy and confidence in their ability to make desired changes (The Health Belief Model - Rural Health Promotion and Disease Prevention Toolkit, n.d.).

**What are some of the barriers that affect a patient's ability to learn?**

A level of limited health literacy can serve as a barrier for patients in comprehending and effectively utilizing health-related information, hence posing difficulties in their ability to grasp and implement new knowledge. The absence of motivation or interest in the topic matter may impede a patient's desire to actively participate in the educational process. Physical health issues, such as pain or weariness, have the potential to serve as distractions for patients, impeding their ability to effectively concentrate on the process of learning. The presence of cultural disparities and linguistic obstacles might impede the efficacy of communication and comprehension, hence influencing the process of learning (Jones et al., 2014).

**How does a patient's readiness to learn, or readiness to change, affect learning outcomes?**

When a patient is highly motivated and eager to learn, they are more likely to actively participate in the learning process and apply the new information they acquire. However, a patient's ability to learn is not constant and may change over time. To ensure successful learning outcomes, nurses should continuously evaluate the patient's state of readiness and adjust teaching strategies accordingly. Using motivational interviewing and targeting the patient's values and goals can improve motivation and increase the chances of success. Allowing patients to have a say in their learning objectives and preferences can also improve their sense of control and motivation (The Health Belief Model - Rural Health Promotion and Disease Prevention Toolkit, n.d.)

In the end, the Health Belief Model is a powerful instrument for educators in facilitating the instruction of behavioral modifications by offering insights into individual perceptions and motives. Utilizing targeted interventions that target specific beliefs, enhance motivation, and cultivate self-efficacy significantly facilitates the effectiveness of behavior change endeavors.

References:

*The Health Belief Model*. (n.d.). <https://sphweb.bumc.bu.edu/otlt/mph-modules/sb/behavioralchangetheories/behavioralchangetheories2.html>

*The Health Belief Model - Rural Health Promotion and Disease Prevention Toolkit*. (n.d.). <https://www.ruralhealthinfo.org/toolkits/health-promotion/2/theories-and-models/health-belief>

Jones, C., Jensen, J. D., Scherr, C. L., Brown, N., Christy, K. R., & Weaver, J. (2014, July 10). *The Health Belief Model as an Explanatory Framework in Communication Research: Exploring Parallel, Serial, and Moderated Mediation*. Health Communication; Taylor & Francis. <https://doi.org/10.1080/10410236.2013.873363>

REPLY

* **AC**

6

Pender's health promotion model requires identifying the motivation to engage in behavioral change for an increased health and wellness. A nurse need to use HPM in identifying the way to help people achieve a higher level of wellbeing and health. Healthcare professionals need to discover the appropriate techniques to use in making sure that people are motivated to change health behaviors. An increase in health require using the appropriate methods to change the health behaviors and actions. Pender’s HPM require changing the health behaviors to increase the performance of a person. Pender’s HPM encourages the use of nutritional and self-care behaviors are essential for a person to have improved health and quality of life (Chen & Hsieh, 2021). Health promotion activities need to focus on physical health improvement through body fitness.

The barriers that affect patient’s ability to learn are language barrier and cultural differences. Nurses care for people from different ethnic background requiring to understand the appropriate way to deal with the challenge of language barrier. Health promotion to people need to handle the barriers of language and cultural differences. According to Heath et al. (2023) the use of interpreter services in healthcare helps in dealing with the challenge of language and cultural barrier. The use of graphics is an approach that help in providing health promotion to the community with different cultural backgrounds. The addressing of communication challenges in health promotion increases the health outcomes in the society.

References

Chen, H., & Hsieh, L. (2021). Applying the Pender’s Health Promotion Model to Identify the Factors Related to Older Adults’ Participation in Community-Based Health Promotion Activities. International Journal of Environmental Research and Public Health, 18(19). https://doi.org/10.3390/ijerph18199985

Heath, M., FløeHvass, A. M., &Wejse, C. M. (2023). Interpreter services and effect on healthcare - a systematic review of the impact of different types of interpreters on patient outcome. Journal of Migration and Health, 7. https://doi.org/10.1016/j.jmh.2023.100162