# PUBLIC HEALTH RESEARCH

## **Unorganized Health Education: The impact and Challenges!**

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## ABSTRACT

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Introduction	Achieving better health is everyone's wish and irrespective of various health practice systems, all attempt to end in good health only. To keep us vigil from ill effects around us, we all seek information which will help us to protect us from dangers of diseases. In the modern world, the medium to get all information is in our hands itself and we exchange oceans of information of different nature. But is these information are genuine to adhere and do we owe the responsibility to protect our fellow being before forwarding a health related information.
Methods	The author has attempted to find out the attitude and practice of exchanging health related information through social media and attempted to analyze its impact on health seeking behavior. A simple random study was chosen in which 300 respondents were chosen.
Results	A self-structured interview schedule was administered for collecting the data and through scientific data analysis it was found that majority of the respondents exchange health related information through different social medias. It was also found that majority of the respondents forward health related information irrespective of the genuineness of the content. Although only a one third of the respondents follow various health tips being shared, it is also an alarming signal for health care providers to look into.
Conclusions	Sensitizing the public about the organized forms of medical practice is very much needed on one side and controlling the false health related information is a huge challenge on the other side. Owing to individual's responsibility may save the lives, but using the same medium with appropriate contents will definitely promote the well-being of the nation.
Keywords	Social media - Health information - Health promotion.

## **INTRODUCTION**

Globally health is becoming challenging with the increase of life style diseases and every country is educating its citizens on positive health approaches through intensified health education and health programmes.<sup>1,2</sup> The plan promotion and implementation of every health education programme has enormous inputs from experts and does involve lot of research before designed in to a scientific health education tool or programme.<sup>3,4</sup> It is also a huge task to take these programmes to the common man's understanding and acceptance. It is much more challenging in country like India, where social and cultural aspects of health plays equal role to any other component of health.<sup>5</sup> The governance on one side is taking many efforts to achieve good health to its citizens. Whereas, the social media is spreading health tips and messages without any base fact or approved scientific content. The fact is the later is reaching the common man much faster and vigorous than the organized form of health education dissemination.<sup>6</sup> This health seeking behavior really impact the health of common man and is a really a much needed aspect to look into. It is because of the easily accessible mode of information and a habit to forward the same without knowing the intensity of the content.<sup>7</sup> It becomes necessary to intervene whether the forward messages with health related contents impact the health of the individuals.

Access to health care and ability to achieve better health is still far away for the poor in spite of tremendous advancement in the medical field in many parts of the world.8 Parallel to the cost of living, the medical expenditures have also increased considerably.9 The affordable community demands for a super specialty care for even a minor ailment whereas the poor still finding way behind to get the optimum care.8 People are eager to find different ways to resolve their medical issues and the seeking information is like ocean in the social medias.9,10,11 Whether it is a precautionary advice for dengue or be it as for curative advice for various cancers, people just forward it. Who knows how many follow the advice and benefitted or became worse.<sup>12</sup> Simultaneously these messages create lot of confusions among public and doubting on the scientifically proved medical care systems as well.<sup>13</sup> Without any licensing authority everyone has become physician themselves and shattering the organized form of health seeking behavior. Hence this study is an attempt to find out the attitude and

practice of forwarding the health related messages through social medias and to analyze the impact on health seeking behavior among the common public.

## **METHODS**

#### Study Design and Setting

This was a Descriptive research study focused on the attitude and practice of forwarding the health related messages and analyzed its impact on the health seeking behavior among the common public. The study was held at Puducherry District of Union Territory of Puducherry, India. In particular the researcher chose respondents from both rural and urban community so as to compare the results by domicile wise also.

#### Inclusion and Exclusion criteria

An equal number of participants from Rural and Urban domicile were chosen. Participants who own or access to smart phones with the facility of social media were included for the study.

#### Data Collection

A structured interview schedule was used as the tool for data collection. It contained detailed sociodemographic profile of the respondents primarily and a separate section of questions on attitude and practice of forwarding health related messages through social medias. Based on the results the impact on the health seeking behavior was analyzed. By adopting simple random sampling 150 respondents from urban and 150 respondents from rural area were chosen as sample.

#### Data analysis

Data entry and analysis was performed using SPSS version 22.

## RESULTS

The study revealed that majority of (70%) of the respondents are men and about 65% of the respondents belong to the age group of 20-40 years. Respondents about 63% have higher education up to post-graduation. It is revealed that 75% of the respondents are in salaried jobs and those who belong to nuclear family are the majority (55%). About 42% of the respondents are having some or other chronic illness and on treatment with different medical practice. In this study the respondents were chosen equally from rural and urban domicile (Table 1).

**Table 1** Socio-demographic characteristics of the respondents

Variable	Categories	No. of Respondents	Percentage
Gender	Male	210	70
	Female	90	30
Age	20-40 years	195	65
	41-60 Years	75	25

	61 above	30	10
Education	Primary and below	42	14
	Higher School	69	23
	Graduation and above	189	63
Occupation	Daily wages/Coolie	63	21
	Salaried	225	75
	Self Employed/Business	12	4
Family	Nuclear	165	55
	Joint	135	45
Health Status	Good health	99	33
	Chronic Illness	126	42
	Not known	75	25

Table 2 shows that the major source of (73%) exchange of information was through Whatsapp medium. A majority of 67% of the respondents does receive and forward health related messages on daily basis. Only 3% of the respondents

said that they forward the health related messages very rarely. Among the shared messages about 80% are related to life style diseases like diabetes, obesity, hypertension etc.

Fable 2 Attitude an	d practice of	of forwarding the	health related messages
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Variable	Categories	No. of Respondents	Percentage
Social Media	WhatsApp	219	73
	Facebook	51	17
	Others	30	10
Frequency	Daily basis	201	67
	Weekly basis	69	23
	Monthly Basis	21	7
	Rarely	9	3
Content	Life style diseases	240	80
	Terminal Illnesses	45	15
	Others	15	5

The below table 3 shows that about 80% of the respondents forward the health related messages irrespective of the genuineness of the content. Out of this, 40% are from rural side and majority lies in the urban domicile. Only 20% of the respondents check the background of the information received and forward it only if it is scientifically approved.

Table 3 Distribution of the respondents based on the Genuineness of Messages

S.No	Genuineness of Messages	No. of Respondents	of Respondents				entage		
1	Never Checks	240	Domici	le					80
		Rural	96	Urban	204	R	40	U	60
2	2 Checks Genuineness		60				20	0	

Table 4 shows that about 40% of the respondents said that they experiment the health tips being received to them and also encourage the members to whom they share, to follow it. Out of

this 60% are from urban side. Among the respondents about 40% of them tried health tips for minor ailments like fever, pain, and cough.

Table 4 Distribution of the respondents based on the Adherence to Messages

S.No	Adherence	No. of Respondents			Percentage			
1	Experiment	120	120 Domicile				40	
		Rural	48 Urb	oan 72	R	40	U	60
2	Never Experimented	180			60			

Table 5 shows the health seeking behavior of the respondents and it shows that 64% of the respondents said that these messages create confusions on choosing a particular type of medical practice (for instance allopathy, ayurvedha, siddha) and influencing their choice. A considerable percentage of 55% of the respondents said that they adhere to at least two systems of medical practice simultaneously.

Table 5	Distribution	of rest	ondents	based of	on health	seeking	behaviour
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Variable	Categories	No. of Respondents	Percentage
Influence in choosing health	Yes	192	64
care system	No	108	36
No. of health care system adhering	Strictly one At least two	120 165	40 55
	More than two	15	5

About 73% of the respondents are anxious to know about different solutions to get cure of life style diseases irrespective of the genuineness of the content. About 3% of the respondents said that they had adverse effects by following few of the health related messages received and stopped following them.

## DISCUSSION

Health is a holistic entity and through different approaches and methods people always wish to attain better health.<sup>14</sup> The exchange of health related information has become obvious in the techno-era and one will get all kinds of health advice irrespective of the evidence or proof.<sup>13</sup> It is also a fact that all these messages are accessible to all kinds of people irrespective of education, occupation and social status.<sup>15</sup> So the ability to check the genuineness of the messages is not the same. Hence the common man does not treat the message as one who is well versed to check the background of the information before trying to experiment it.16,17 People who have no idea on the genuineness of the content didn't bother to forward it as well and a considerable percentage of them experiment it for medical conditions which has no curative aspect. Over a period, a false message is being circulated constantly and will create an impression as though it is real.18,19,20 Simultaneously these oceans of messages override the genuine health education messages and vanishes the efforts of government's health education and promotion activities. It also creates confusion in the minds of people and makes them doubt about the approved methods of medical practice and patient care system.<sup>21</sup>

## CONCLUSION

Health education has become health promotion globally. We talk about promoting health care systems and to achieve quality of life. But because of exchange of irrelevant and injudicious messages in the social medias, it is becoming much more complex to achieve. This habitual way of exchange of unscientific information is sure to cost lives, because of improper guidance and advice. There are very few reported cases of adverse effects on experimenting false health related messages but certainly there must be many unreported and being practiced for longer periods without showing any immediate effects. It is a huge challenge for policy makers to regularize the exchange of health information with required authority or license over it. At the same time, it should not hinder the freedom of exchanging the healthy views on existing health systems and its pitfalls. The present study was a small attempt to throw light on the hidden danger on long term health status of the country. It should be regularized before we end up with any epidemics out of it. The power of social media has been witnessed in different dimensions, if not promotion on health definitely it should not be black mark in the health system. It is everyone's responsibility but let us put it with terms and conditions. To go miles forward in health care one should realize the impact of information being forwarded.

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