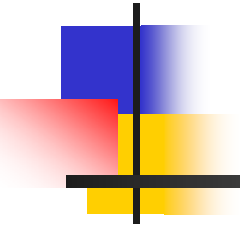


# Health Promotion and Disease Prevention



## Chapter 12



# Objectives

---

- Discuss the National Health Promotion and Disease Protection Objectives
- Discuss the Healthy People 2010 Major Goals
- Define health promotion
- Define disease prevention
- Discuss the 3 levels of preventions- primary, secondary, and tertiary



# Introduction

---

- A major goal of a health services system is to protect, maintain, and restore the health of individuals and the population at large.
- Health promotion, health protection, and disease prevention activities provide three ways to accomplish this goal.



# Health Promotion and Disease Prevention

---

- This chapter focuses on these, emphasizing the National Health Promotion and Disease Protection Objectives issued by the U.S. Department of Health and Human Services (HHS) in 2000 in the People 2010 report.



# Health Promotion and Disease Prevention

---

**Healthy People 2010 sets out two  
major  
goals for the health of the people in  
the**

**Unites States:**

- To increase the quality and years of healthy life, and
- To eliminate health disparities



# Health Promotion

---

- Achieving optimal health status is the common goal of health protection, and disease prevention activities.



# What Is Health Promotion?

---

- Ideally, the promotion of good health practices to preserve and enhance health status is the circumstance under which the individual has his or her initial contact with a health services system.



# Healthy People 2010 Focus Areas

---

Several of the Healthy People 2010 focus areas incorporate measurable objectives in health promotion areas. Some include:

- Physical activity and fitness
- Nutrition and overweight
- Tobacco
- Substance abuse



# Healthy People 2010 Focus Areas

---

- Family planning
- Mental health and mental disorders
- Injury and violence prevention
- Educational and community-based programs



# Availability and Utilization of Health Promotion Services

---

- Although the importance of health promotion activities to positive health status is increasingly recognized, the U.S. health services system is not organized to systematically and comprehensively offer them or to encourage their use.
- One reason for this gap is the traditional separation of physical health care from behavioral health care.



# Availability and Utilization of Health Promotion Services

---

- Mental health care, substance abuse treatment, and the recognition and treatment of violent and abusive behaviors are all too frequently segregated from somatic health care, resulting in a fragmented system that may fail to holistically treat an individual's needs.



# Availability and Utilization of Health Promotion Services

---

- The availability of health promotional activities, because they center around an individual's lifestyle choices, may be dependent on an individual's self-awareness and aggressiveness in seeking the activities.



# Availability and Utilization of Health Promotion Services

---

- The most effective interventions available to clinicians for reducing the incidence and severity of the leading causes of diseases and disabilities in the United States are those that address the personal health practices of patients, according to the U.S. Preventive Services Task Force.



# Availability and Utilization of Health Promotion Services

---

- Providers, however, may not always offer these services nor encourage their patients to obtain them elsewhere.



# Availability and Utilization of Health Promotion Services

---

The Task Force identified several reasons why physicians fail to provide health promotion and disease prevention services:

- Preventive services are poorly reimbursed or not reimbursed at all.
- A patient care visit is generally limited to resolving the presenting problem, with little time allotted for discussing health-related behaviors or counseling.



# Availability and Utilization of Health Promotion Services

---

- Physicians and other providers may be uncertain about which services should be offered under what circumstances.
- Providers may be skeptical about the effectiveness of some health promotion and disease prevention interventions.



# Disease Prevention: Primary, Secondary, and Tertiary

---

- Three levels of prevention – primary, secondary, and tertiary – are identified in a comprehensive health services system.



# Disease Prevention: Primary, Secondary, and Tertiary

---

Healthy People 2010 identifies the following focus areas of preventive services:

- Arthritis, osteoporosis, and chronic back conditions
- Chronic kidney disease
- Cancer
- Diabetes
- Disability and secondary conditions
- Heart disease and stroke



# Disease Prevention: Primary, Secondary, and Tertiary

---

- HIV
- Immunizations and infectious diseases
- Maternal, infant, and child health
- Sexually transmitted diseases
- Vision and hearing



# Health Promotion, Protection, and Disease Prevention Issues in the U.S. Health Services System

---

- Reorienting the focus from the negative, or disease control, sense of health to a positive focus on health promotion and protection and disease prevention remains a challenge in the U.S. system.



# Applying Existing Knowledge

---

- Although much remains to be learned about the relationship of health status to individual lifestyle choices and the context in which choices are made, enough solid evidence of the effects of some choices is readily available to warrant prompt and effective action at both the individual and societal level.



# Responsibility for Health Promotion, Protection, and Disease Prevention

---

- Part of the dilemma in effectively applying what is known about health promotion, protection, and disease prevention is the lack of clear lines of responsibility for these function (i.e., are they the responsibility of individual, the health services provider, or society?)



# System Issues

---

These changes include:

- An epidemiologic transition
- A shift from disease control by specialists to a concentrated focus on health by primary care providers
- Technologic advances



# Disease Prevention: Primary, Secondary, and Tertiary

---

Changes include:

- The changing influence of managed care
- The continued debate about whether interventions should be aimed at the individual or at the community
- Insurance coverage for preventive services



# Reorientation Towards Primary Care

---

- Several stimuli are effecting a reorientation towards primary care.
- First, managed care has created a demand for more generalists to serve as the patient's first point of contact with his or her health plan and to control referrals to specialists.
- Second, some medical schools, sensitive to producing an employable workforce, created or renewed in the mid-1990s curricular emphasis on primary care.



# Reorientation Towards Primary Care

---

- Third, congressional action on the Medicare program, the predominant support of graduate medical education for both generalist and specialist physicians, is reinforcing this shift through proposals to fund fewer specialty training slots.



# Technologic Advances

---

- Basic scientific research regularly produces results that influence our abilities to promote and protect health and particularly to prevent disease.



# Level of Intervention

---

- Whether interventions to promote and protect health and to prevent disease should be aimed at the individual, his or her community, or in combination remains unresolved.



# References

---

- Barton, P.L. (2007). *Understanding the U. S. Health Service Systems*, Third Edition; Phoebe Lindsey Health Administration Press.



# Questions

---

■ ?