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Lecture - 16 Need Assessment for Health Promotion

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Hello everyone, so today I will be talking on need assessment for health promotion. Now, we will discuss on certain subtopics like research in understanding and documenting health needs then identifying target population, influencers of health actions and health behaviours, need for health promotion in the target population the socio-cultural context.

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So, research in understanding and documenting health needs. A very important thing is we have to actually document the needs assessment, the health needs of any particular community. So, first of all we have to understand that community and we have to document what are the problems? What are the factors which are leading to all those problems? Then only we can understand and we can analyse what is the situation going on in that particular community.

Now in quantitative through quantitative survey also you can do knowledge attitude behaviour practice survey or any other survey you can do, the checklist one you can use, through an observation checklist you can use. But the thing is qualitative studies are used for exploring and understanding the public health problem or issue by individuals or group. So, in analysing any situation of the community quantitative survey alone is actually not enough to be very honest.

Qualitative exploration is required because through quantitative survey we all know that yeah these are the prevalence this is the problem or whatever x y z are the problems. But qualitative exploration qualitative interviews or any focus group discussion it will help us to understand that, why these problems are existing? What are the factors which are leading to these problems? You know why? How?

That is very important to actually analyse the situation of any particular community in a particular time. Now, qualitative studies are commonly used in health promotion research for conducting exploratory research where little is known about a particular health issue or for increasing the depth and validity of quantitative inquiries using triangulation. Now it might happen that a certain problem is or particular any health problem or health issue we do not know too much about that issue.

So, just going through the quantitative survey will not fit us on a completely because, if something is new you know or that is not very common that health issue is not common or a bit uncommon. So, we have to do more exploration of that particular problem. So, this is one of the very important ways by which we can explore any issue in the community. Then not only qualitative studies help us to explore the issues or the problem in very wider way, or very in-depth understanding can be done. It also helps in to validate the quantitative inquiries or the quantitative findings you got of that particular community's problem using

triangulation. So, regarding triangulation in my next slide in my subsequent slide I will speak

in details. So, what you have to understand you got some problems or issues through

quantitative. Now, if you also go through the qualitative approach you will come to know

deeply about that problem.

Exploration will be in depth; you know that is very important wider exploration will be done

then. And then you can see you can validate whether the quantitative inquiries or findings and

the qualitative findings that we got how much they are you know matching, compare and

contrast you can do; you can see here these are the things which is actually matching some

things you will see.

It was there in the quantitative survey but in qualitative interviews we will find some more

factors which you did not actually put in your quantitative survey questions. So, exploration

that is actually exploration, you have to explore more factors. Now let us see this example a

quantitative study you may find that female terminal contraception is more accepted in the

community than male terminal contraception. That you got from your quantitative survey.

But while you are doing your qualitative survey on the other hand it could reveal why many

men and women are still reluctant to accept male terminal contraception even though they are

aware of the benefits of the method. So, see why that is very important, why that problem is

prevailing in the community is very important to understand. Otherwise, if you do not

understand why those problems, what are the factors of those problems then you cannot

develop or implement a health promotion education intervention.

So, a qualitative study on the other hand could reveal why many men and women are still

reluctant to accept male terminal contraception even though they are aware of the benefits of

the method. So, these are the factors, what are the barriers among those men in that

community even after knowing the benefits of male terminal contraception. They are actually

not accepting that male terminal contraception.

Then you will do qualitative interviews you can do focus group anything any kind of

qualitative matters you can use to explore different factors different barriers of not accepting

the male terminal contraception.

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Now, in qualitative study mostly we use interviewing and observation as a data collection method. Now what is interview? Interview can take different forms, like it can be unstructured or semi-structured and it may involve an individual or a group also. So, unstructured interview is basically a conversational interview in which no specific no predefined specific questions are put and asked.

But topics actually they automatically emerge and flow from the conversation. So, you can understand the initiating point is the through that initiating point so, many things if like for example you are as a researcher you are interviewing somebody. Then, you can just start a small issue then he or she will start conversation with you and so many things will come, you know like a story and he or she will tell you so many things, these happens this can happen these are the problem these are the facilitators.

So, this is actually unstructured interview where predefined set of questions is not written is not present. semi-structured interview. Now semi structured interview uses open-ended questions. Now that are asked to all participants in a predetermined order for example, I target 10 reproductive age group women and I have to interview all those 10 reproductive age group women.

So, I will have a certain set of predefined certain set of questions but that will be open-ended that is why it is semi structured and there will be a certain order of question which is also predetermined. So, in that predetermined order only you have to ask those questions to all the ten women. So, that is important. Now core structured interview is actually used through

quantitative survey, in qualitative we use unstructured or mostly semi structured kind of interview protocol.

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Then another method is focus group. Focus group is an interviewing method in which a small group of people is interviewed at a time. Now here you are not in asking questions individually you have to make a group, like for example on an average they can be 6 to 12 individuals and they should be homogeneous like a reproductive age group woman you can put like anaemia those who are suffering from anaemia.

Those reproductive age group, women who are suffering from anaemia. So, and but who do not usually know each other now here, focus group as a researcher you have to plan a focus group. I mean it is not possible that suddenly you will go and you will say that you have to come for a discussion maybe out of eight two will say that yes, I have time now and I can attend your discussion.

But 8 people or the rest 6 people will deny that no we do not have time.. you could have informed us before 2 days or yesterday you could have informed us. So, a pre-planning is required because you know what you have to plan that all the women like for example eight, eight reproductive age group women you have to arrange in such a way so, that all the eight women will come where actually you have arranged this focus group.

And they will interact and they will discuss. Focus groups are used quite frequently to provide information about salient health issues or any health care needs to identify interest or concern of the target population. Now what will happen as a facilitator you will initiate a

discussion. For example, on the iron containing food, iron rich food dietary habits you can

just initiate and then you have to see that those you know the eight, eight women they will

interact among themselves.

So, while interacting an interaction everybody has to speak something and has to interact,

only two or three people will keep interactive among themselves and that is actually not

acceptable in focus group. So, as a facilitator you have to see whether all are interacting or

not. So, they will interact so many views will come from them so many perceptions what do

they think what are the barriers what are the opinions and beliefs.

That a facilitator or a researcher will come to know now through that discussion for example,

if a focus group discussion is going on for 40 to 45 minutes, then that discussion is actually

bringing so many beliefs opinions and issues of that particular health topic. So, through focus

group we are actually exploring, that what are their views what kind of intervention they are

ready to accept. What kind of intervention will be actually accessible and feasible for them?

What are the healthy practices that they can continue? You know they can maintain for a long

time. So, these are the things which a researcher will come to know and these information's

beliefs opinions whatever actually it is adding your content for that need assessment. Because

now, you have documented that yes these are the issues, these are the barriers, these are their

beliefs and factors.

So, after understanding all these issues you can develop your intervention plan robust and

very rational also. Like if you do not know what actually they are going to accept what are

their barriers then how will you plan and implement any health education program. So, this is

very important.

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Research in understanding and documenting health needs

Observation can be used to supplement other data-collection methods, such as interviews, to provide better understanding of some phenomenon.

Participant observation is a specific type of observation in which the researcher observes people in their own setting.
In Non Participating observation, researchers collect data by observing behavior without actively interacting with the participants.

Now another method of a qualitative data collection is observation. Now observation can be use singly also but mostly, it actually supplement other data collection methods such as interview like you have conducted interview you have conducted focus group but you have also conducted an observation. Like you have observed whether after toilet people are washing their hands or not, any kind of observations.

Like where they are actually throwing their kitchen waste? Where they are throwing their garbage? So, these are the things you can get your actual data through observation. Now observation can be participant observation and non-participant observation. So, participant observation is a specific type of observation in which the researcher observes people in their own setting. In their own you know environment in the own community in their own setting.

And here that particular interviewer can interact with those community members also. But in non-participating observation researchers collect data by observing behaviour without actively interacting with the participants. So, you see the name non-participating here the researcher is actually actively not participating or interacting with the community members or the target participants.

He will just silently collect his data and he will just observe he will just keep on writing in his notebook that these are the things he observed. He will not interact and he will not do anything.

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Research in understanding and documenting health needs Participatory Learning and Action: Participatory Learning and Action (PLA) is a type of qualitative research, which can be used to gain an in-depth understanding of a community or situation. Participatory Learning and Action (PLA) is widely used for research in communities to gain their perspectives about problems or health issues and move towards action for solving these problems or issues based on this awareness. PLA is a participatory methodology, and should always be conducted with the full and active participation of community members. Indian Institute of Tachnology Kharaggur

Next is participatory learning and action. Now PLA is also a type of qualitative research which can be used to gain an in-depth understanding of a community or a situation. So, PLA actually is widely used for research in communities to gain their perceptions about problems or health issues and then subsequently move towards action for solving these problems or issues based on this awareness. Now the name participatory learning and action participatory.

So, in this method community members have to participate this is mandatory. Community members will participate with the research team they will talk they will discuss, not only the problems issues and factors barriers and facilitators they will discuss with the researcher and also what can be the solution like from the community members you can also come to know what are the solution which solution they think is important for them.

Which solution is actually they will feel comfortable to accept they will be able to maintain you know that is very important. So, PLA is done in the community and through PLA actually, we can gain a you know not only the perceptions but also what actions should be taken, that is very important because actively the community members are participating with the researcher and the research team.

Now, PLA is a participatory methodology, and should always be conducted with the full and active participation of community members. So, I was talking about that the participation the active participation of community member is very important in PLA.

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So, apart from quantitative and qualitative we can have mixed method approaches also. Now mixed method approaches are adapted for collection of both quantitative and qualitative data the core assumption of this approach is that the integration of qualitative and quantitative data yields additional insight beyond the information provided by either the quantitative or qualitative data alone.

So, if you are conducting only a quantitative survey or only a qualitative survey you will miss so many things. But if you are collecting qualitative data also and quantitative data also then actually you have you know the huge amount the exact amount of data and the problems which that community is facing you can have. Now in the mixed method approach actually we are collecting both the data we can integrate.

And we can see simultaneously we can conduct quantitative even qualitative and we can integrate we can merge the quantitative and qualitative results and ultimately, we can come to an interpretation that these are the actual problems. We can compare quantitative and qualitative data we can contrast that these things were there in a quantitative but we are not getting in qualitative.

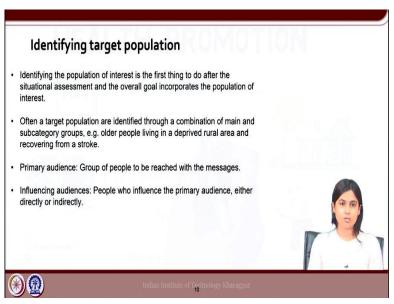
So, this way mixed method approach is actually a very methodologically robust approach, then concurrent triangulation. Now it involves a single study where qualitative and quantitative data collections are conducted at the same time. So, a researcher collects the quantitative data and he or she collects the qualitative data also. So, the purpose is to why triangulation is important actually what is triangulation?

The purpose is to validate the findings, validation is important like you got some data from quantitative and you have also got from qualitative. Now what you can do? You can validate the findings like these are the things which did not came in quantitative survey. But while you conducted a qualitative exploration then you found that so many factors so many opinions and barriers which was not found in the quantitative survey.

So, through qualitative you have come to know the barriers also. Now the both the data you have in your hands now and you can validate the findings generated by each method. So, that you can see convergence that, these are the things which have come from quantitative also and the same thing in elaborative way has come from the qualitative data also. That is why it is known as triangulation and concurrent.

Because qualitative and quantitative data collection, you are conducting simultaneously then you are triangulating those data to validate your findings.

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Next thing is identifying the target population. So, you have to identify who are the target population of this specific issues or any problems any health problem in a community. Now identifying the population of interest is the first thing to do after the situational assessment. So, you have all the need assessment and you know what is the actually current situation of that community for those particular problems. Now the next thing is that you have to identify who?

Who are the population? Who will be the target audience and the overall goal incorporates the population of interest only, you have to set the goal. So, that goal will incorporate that particular identified target audience. Often a target population identified through a combination of main and subcategory groups, main groups and subcategory groups. Like for an example I have mentioned in my slide older people living in a deprived rural area and recovering from a stroke.

So, here main category is deprived rural area and the subcategory is who has recovered from a stroke. So, for a specific problem we can target population of the older people who are living in a deprived rural area and those who have recovered from a stroke. Now you know this audience I was talking about the target audience they can be the primary audience or the influencing audience.

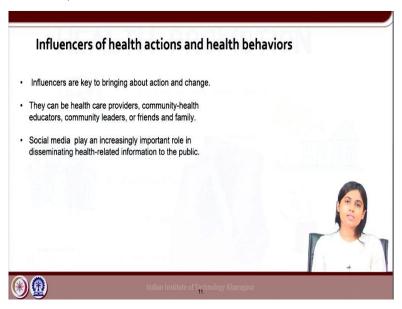
Primary group of people to be reached with the messages directly like for a complementary feeding just for an example. Complementary feeding your primary audience is the mother, the caregiver or the mother but there will be certain influencing audiences also. So, who are the influencing audience people who influence the primary audience either directly or indirectly.

So, who can influence that mother the mother-in-law or the grandmother of that child can be an important influencing audience. That actually no you have you should give these foods to the child these are the things should be given. So, actually that grandmother, she is the influencer because she is influencing to the mother of the child and mother is actually the primary audience.

Now apart from your family members and friends a health worker can also be influencing audience. Like any frontline health workers can come to your house she can do a home visit. And she can influence you know these are the things that should be done in complementary feeding, these are the foods that should be given to the child. So, only targeting primary audience will not work because, she is also getting influenced by certain number of people family members, friends, relatives.

Relatives are also important. Frontline health workers whoever is coming in contact with that primary audience. So, you have to target both primary audience and the influencing audience.

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Then influencers of health actions and health behaviours. Influencers are very important they are key to bringing about the action and change. The last slide we saw how an influencer can influence a positive behaviour positive healthy behaviour also and unhealthy behaviour also. Now, those influencers can be healthcare providers, community health educators, community leaders, friends and family.

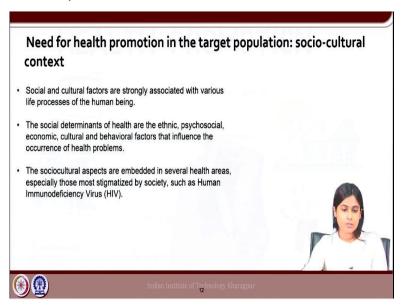
You know for the proper dietary habits your friends, for a school girl her friend can be an important influencer. Like if she, it can be positive and it can be negative also like if a particular that girl is not willing to eat actually a healthy food or whatever she brings from her home then a friend can be a positive influencer that no these are the actually good food healthy food that we should eat, I am also eating.

So, you should also eat or it can be a negative form also that if somebody.. if a girl is willing to eat her home food only, her home tiffin in the school. But her friend you know her one or two friends is saying that I do not eat those food, homemade food, let us go to the nearby food corner let us have those food, so those foods are you know junk food. So, these are the ways how an influencer can influence a particular person to choose a behaviour.

And very important is you all know nowadays is social media. Social media is playing an increasingly important role in disseminating health related information to the public. So, it is

very important that those social media whatever information is being disseminated to the public it should be rational and should be proper that is very important and all of us some way or the other are connected to some social media. So, social media itself is a big influencer for whatever behaviour we are doing or we will follow in future also.

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Now, the need for health promotion in the target population socio-cultural context. Now this social you know social and cultural factors actually are very strongly associated with various life process of any human being; we all are actually surrounded by some social factors some cultural factors you know social determinants of health. There are so many social determinants of health it can be gender...it can be income, occupation, education, ethnic, psycho social, cultural and behavioural factors which can influence the occurrence of health problems. Now it is always not necessary that all the social determinants will be at a time will act together and will be responsible for certain issues or problem. It can be one or two or it can be three or four but, social determinants of health are important because some way or the other it is connected to our health issues and health problems.

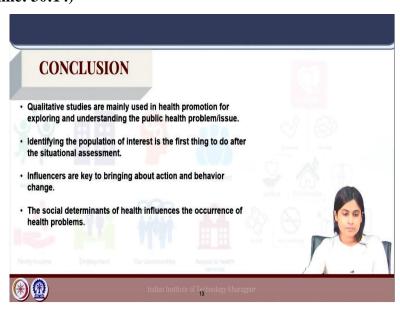
Now, the socio-cultural aspects are embedded in several health areas especially those most stigmatized by the society like HIV, (Human Immunodeficiency Virus). The discrimination ,the stigma, you know these are all the consequences of various social and cultural factors this is very important like if somebody has HIV then actually the surrounding people you know the behaviour factors of the surrounding people, that can influence the actually quality of life of that HIV person.

Like discrimination I told you, outcast social outcast these are the so many stigmas not only I have given here an example of HIV but if you see there are so many health problems which are actually stigmatized in our society. And due to their stigma, what is happening those people who are suffering from a certain health problem they are not reaching to the health facility, they are actually not leading a proper life.

You know that quality of life is very important which is actually getting hampered. Other disease you can have like Vitiligo is also another example where social cultural aspects are there. Then regarding dietary habits some familial factors, you know ethnicity some ethnic ethnicity factors are there that we should eat this and we should not eat those food. Then cultural, in our culture somebody you will find they are saying in our culture we do not do this.

In our culture we do not eat those food so these are the thing that actually all of us are basically we are surrounded with this social cultural context is very important and you have to identify these also. Because if you are planning a proper health promotion education intervention in a particular target population audience this social cultural part is important which you have to explore and you have to focus on those issues.

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So, let us conclude, qualitative studies are mainly used in health promotion for exploring and understanding the public health problem or issue. Identifying the population of interest is the first thing to do after the situational assessment. Influencers are key to bringing about action

and behaviour change and the social determinants of health influences the occurrence of health problems.

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These are the learning resources you can go through all these learning resources and also please go through the supplementary material or the handouts that you will be provided. Also please go through those materials. Thank you so much.