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Helping people make health choices

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Earlier speakers have considered the information which they think it is important to pass on to people. It was originally suggested to me that I should speak to the title ‘Communicating the information’ or ‘How do we tell people?’

Well we certainly need to think carefully about how to communicate the information — and that in itself can be a difficult task. ‘How do we tell people?’ sounds too directive because of the underlying connotation of ‘telling people what to do’. Much health education information is linked with definite advice about what people should do to improve their health. Directive advice may be taken by people who have become accustomed to being passive about their health. Indeed some doctors may perceive totally compliant people as being particularly ‘good’ patients. However, it’s one thing to leave your illnesses to your doctor to take care of; but, really, your health is too important to hand over control of it to someone else.

I’m making the assumption in this lecture that it should be the aim of health educators to help people to make their own decisions. We should be helping people to take care of themselves — helping them, as far as possible, to be responsible for their own health.

Even if you do think that there is nothing wrong with being directive — it’s not, in fact, a particularly good technique for getting people to change their behaviour. The old adage about ‘leading horses to water but not being able to make them drink’ applies. Fortunately people are somewhat more amenable than horses in that, having led them to the water, you can persuade some of them to feel that perhaps they ought to have a drink. In other words, simply passing on the information, can change people’s attitudes. They now feel they ought to make the change — but for one reason or another they often don’t actually make the change. This seems to be the case with the majority of people who smoke today. They do know the damage smoking may cause. Most of those
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who know the dangers feel they ought to stop. However the numbers of those
who manage to give up are disappointingly low. To take another example —
most people who need to lose weight know they are overweight. They manage
rather better than people trying to give up smoking in that many of them do
manage to lose weight. But perhaps even more disappointingly — they do not
know how to keep slim and soon regain the weight they lost.

It has been emphasised many times today that no health education expert
should feel confident that he knows exactly what is right or best for any one
particular individual. People need to be helped to make their own personal
decisions about their health and about those aspects of their personal lifestyle
which affect their health. They then need additional help so that they can
implement the changes they have decided to make. Hence my title of ‘helping
people to make health choices’.

THE OPEN UNIVERSITY AND HEALTH CHOICES

I happen to have another good reason for emphasising Health Choices. And
that is — that the community education section of the Open University, in which
I work, has just finished producing a new course which will start this autumn
called ‘Health Choices’.

This course has been produced in association with the Health Education
Council and the Scottish Health Education Unit. We have built into this course
all that we know about how to help people make health choices. It seems
appropriate to discuss the educational principles on which this course is based
since these principles should apply to many other health education situations
in which the three aims are also to:

1. Pass on information in an easily understood form.
2. Help improve people’s decision making skills.
3. Help people build up the practical skills of planning and implementing
   change.

Community Education Courses

It’s necessary to digress here for a moment to tell you what our course ‘Health
Choices’ is not about. First of all it is not about illness but about a more positive
approach to health. Secondly, it is not part of the Open University’s under­
graduate programme for people studying for a degree.

For the last three years the OU has also been producing short Community
Education Courses which aim to help people make decisions about and cope
with the problems and concerns of everyday life. These courses are presented in
a popular-magazine style, with linked TV and Radio programmes and last for
only eight weeks. We describe them as learner-centred and activity based. That’s
a typical piece of Open University jargon. In other words they are focussed on