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PUBLIC HEALTH

1. **Define clearly the meaning of the world public health?**

**P**ublic health refers to the health care and health promotion that deals targets

Population or a particular group within the population.

1. **What is meant by the term-evidence based public health?**

Evidence based public health is the development, implementation and evaluation of effective program and policies in public health through application of principles of scientific reasoning.

B.**Briefly described the steps involved in-evidence based health care?**

1. Develop an initial statement of the issue

In dealing developing an initial statement of the issue, we have to formulate the question which is figuring out what it is that you are planning to achieve or find out, is to define the population, the intervention, what to compare this intervention to, as well as outcome.

1. Qualify the issue

In qualifying the issue asset of criteria, evaluating the quality of the studies found during the research.

1. Research the issue

Searching for the issues/evidence is very fundamental to the concept of finding out the previous research conducted published and non- published research.

1. Develop program or policy options

This is where evidence is put into practice by using the evidence to improve the practice through development of guidelines and protocols that can be used in the practice.

1. Create an implementation plan.

In creating an implementation plan, monitoring what has been done and ensuring that it is effective provide feedback for the progress of the performance.

C.**Name various sources of data in –evidence based health care?**

**The following are the sources of data in – evidence based health care:**

1. National centre for Education statistics
2. National centre for Health statistics
3. Bureau of Labor statistics
4. Census Bureau
5. Housing and Urban Development
6. Health care insurance schemes
7. Non-profit organization
8. Colleges and Universities
9. Research organizations
10. **Explain the concept of primary health care and relate it to the three levels of disease prevention.**

Primary health care education can be applied to three levels of disease prevention and can be of great health in minimizing the gain from prevention behavior. The three level of disease prevention are as follows**:**

1. Primary preventive level-In primary preventive level you can educate people to practice some of the preventive behaviors like having the balance diet so that they can protect themselves from developing diseases in future. Primary prevention includes those preventive measures that come before the onset of illness or injury and before the disease process begins for example immunization.
2. Secondary preventive level- In secondary preventive level, here you educate people to visit their local health centers when they are experiencing symptoms of illness such as fever, so they can get early treatment for their health problems. Secondary preventive level includes those

Preventive measures that lead to early diagnosis and prompt treatment of disease, illness or injury. This should limit disability, impairment or depending and prevent more severe health problems developing in the future.

1. Tertiary preventive level- Here educates people to take their medication appropriately and find ways of working towards rehabilitation from significant illness or disability. At this level health educator’s work to retrain, re-educate and rehabilitate the individual who has already had an impairment or disability**.**

4. **In your capacity as public health practitioners, what does the following key concept mean?**

1. **Social epidemiology** –This is a subfield of epidemiology which concerned with the social characteristics or psychosocial risk factors associated with patterns of the disease within the populations.
2. **Behavioral epidemiology** –This is the subfield of epidemiology which focuses on the specific behavior that contributes to the etiology of diseases.
3. **Quarantine** –This is an effort to protect preindustrial cities in the middle age from plague led to the institution of quarantine.
4. **Eating disorder**-Is a serious and often fatal illness that causes severe disturbances to a person eating behaviors. Obsession with food, body weight and shape may also signal and eating disorder. This is focusing on malnutrition related to anorexia and bulimia as it affects adolescent girls
5. **Explain how the social environment can affect ones health**?

Social environment can affect ones health through the following:

1. Social support-This can be defining as aid and assistance exchanged through social relationships and interpersonal transactions. Social support appears to have a curvilinear relationship to health especially for men living in small communities. At very low levels, lack of support has a strong negative effect on health. Social support appears to have greater effects for men than women.
2. Social capital-This is an institutional relationship and norms that shape the quality and quantity of social interaction within a focal community. Communities that are strong in social participation, shared norms, mutual trust and reciprocity are considered to have high level of social capital. They are strengthened by cohesiveness and collective efforts of coordination and cooperation for mutual benefits.
3. Social support –The term social support is mostly used to donate groups whose primary functions are supportive communication through group dynamic. They promote psychological sense of community and ideology that serves as a philosophical antidote to the problems members are facing. The most important benefit experienced by participants is the social support provided through interaction with other similarly affected by a health problem.
4. Social role-This is the behavioral norms and expectations associated with a defined status or position in the social structure
5. Theory of gender and power-This is social structural model that examines three major structures that characterize social relations between men and women. The three structures consist of the sexual division of labor, the sexual division of power and the structure of social norms and effective attachment
6. Difference between sex and gender-This term is being used to refer to the biological and social aspects of maleness and fameless respectively. Sex difference includes anatomical, physiological, hormonal and reproductive processes, while gender refers to socially defined attributes.

**6.Your friend Kizito is a general manager in a nearby hospital that has recently experienced high labor turnout and persistence strikes. He is seeking your advice on the best away to divert the crises that is about to cripple healthcare services in the health in the hospital. As an health practitioners who has been in the industry for the last 10 years, kindly give him advice on the best way to approach the crises**

1.Recognition that health problems have multiple causes, require multiple interventions to impact individual behavior and modify the interpersonal, community, organizational, social, political and economic environment in which health conditions are based

2. Community participation has an indirect effect on health by strengthening the social networks of community members as they work together to define and solve problems and enhances participants‘sense of social connectedness, perceived control, individual coping capacity and health status.

3. Encourages a shared a sense of ownership that citizens develop together

4.The community‘s participation facilitates the development of interventions that are integrated into existing community Community relevance and self-determination, central tenets of community organizing, are often difficult to implementation

5. Community planning coalitions vary in terms of how well its members represent the larger community.

6. Community-based participatory research also poses special challenges.

7. Power differentials between public health professionals and community members may hinder the development of collaborative relationship.

8. Confusion over lines of authority and/or the roles individual members play in the collaborative process can seriously inhibit the achievement of program goals. 6. The development of community-based interventions is a complex, time-consuming process

7. **Define the following words as used in the public health**

1. **Community based prevention marketing (CBPM**)-Community based prevention marketing is a community directed social change process that applies marketing theories and techniques to the designed implementation, evaluation of health promotion and disease prevention programs. It integrates community capacity building principles and practices behavioral theories, marketing concepts and methodologies into a synergistic framework for directing positive change among selected audience segments.
2. **Mobilizing for action through planning and partnerships(MAPP**)-This is a process developed by the national association of county and city health officials and the centre for disease control and prevention (CDC) as a tool to assist communities improve health and quality of life through community strategic plan .
3. **Planned Approach to Community Health (PATCH**)-Planned Approach to community Health was developed in the early 1980 as another community health planning model, allowing for community variation in the process of assessing needs, setting priorities, formulating solutions and owning programs.
4. **Community based participatory research (CBPR**)-This is active involvement /participation of community members in the community assessment and research activities.

8. **Define and organization**?

a) Organization is a collection of persons, materials, procedures, ideas or facts arranged and ordered that the combination of parts makes a meaningful whole that works towards achieving organizational objectives

b) **What are the basic principles of an organization?-The following are the basic principles of an organization:**

1. Departments
2. Acquisition of human and non-human resources
3. Specialization and divisional of labor
4. Coordination
5. Authority and responsibility
6. Centralization and de-centralization
7. Unity of command
8. Line and staffs

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