

Health Education and Women Empowerment

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Abstract:

Today, women empowerment is an important issue and several methods have been introduced to empower women. Health information seeking is one of the most important activities in this regard. A wide range of capabilities have been reported as outcomes of health information seeking in several studies. As health information seeking is developed within personal-social interactions and also the health system context, it seems that the qualitative paradigm is appropriate to use in studies in this regard. There is growing support for the view that real improvements in women's health will not be achieved until the issue of women's empowerment is addressed. However, if empowerment is defined as a grassroots political process which results in redistribution of power in society, substantive examples of women's empowerment are few and far between. This study aimed to explore how women's empowerment through health information is sought.

Key words: Women, Information Seeking, Empowerment, Health Information

Objective:

* To know the health education and its role in empowering women.

Research Methodology:

The present paper is based on secondary data and discussion with experts.

Introduction:

The fundamental right to the highest attainable standard of health, including physical, mental and social well-being has been recognized at regional and national declarations and charters. There is now substantial evidence that healthy populations are a foundation for sustainable social, economic and environmental development and for peace and security, and vice versa. However, despite many advances over the previous decades, large

numbers of disadvantaged people still suffer ill health, with thousands dying every day from preventable causes. Women and children from underserved communities bear a particularly high burden of preventable disease and death. Post 2015 discussions have noted that improvements in population health will require multisector investment in the social, environmental and economic determinants that have slowed progress towards the health Millennium Development Goals (MDGs). The partners in population and development meeting on "south-south cooperation in the post Conference on Population and Development (ICPD), and Millennium Development Goals (MDGs)" aims to identify opportunities to strengthen south-south collaboration towards achieving the MDGs and in the post 2015 era. This strategy briefly focuses on 'how to' strengthen cross-sectoral approaches between health and its social, economic and environmental determinants. Promoting women's empowerment for better health outcomes for women and children, women's empowerment and gender equality, women's empowerment and equality is a fundamental human right and critical to achieve development objectives, including health. Women's increased political participation, control of resources including land, access to employment and education are crucial for promoting sustainable development. There are numerous pathways by which greater gender equality can lead to improvements in health and quality of life for women and their family members. Women with greater agency are more likely to have fewer children, more likely to access health services and have control over health resources, and less likely to suffer domestic violence. Their children are more likely to survive, receive better childcare at home and receive health care when they need it. At the same time, improved health outcomes for women can help to strengthen their own agency and empowerment. Healthy women are more able

to actively participate in society and markets and take collective action to advance their own interests. They are likely to have greater bargaining power and control over resources within the household. Therefore collaborative action between gender and health can help maximize the impact of gender policies on health and vice versa.

Women empowerment:

Empowering women is an important subject of today's world. The term "empowered" refers to the possession of legal power or autonomy to act. Empowerment is a process through which individuals, societies, and organizations gain the control of their important matters. The aim of moving toward empowerment is to acquire the necessary activities in order to prevent the threats and improve the positive aspects of life. Acquisition of such power is based on the knowledge and skills and promotes the quality of life. Moreover, it facilitates the ability to choose appropriate strategies for controlling the resources required for reaching favorable consequences. Previous studies showed that empowerment of patients resulted in favorable health outcomes, such as increased power of decision-making, freedom for making choices and accepting the responsibility, developed trust in relations, informed choice, facilitation of adaptation and well-being, hopefulness, increased speed of personal development, awareness of one's own world, identification of one's own strengths and abilities, feeling more powerful, higher self-confidence, higher personal satisfaction, higher self-efficacy, and eventually, and improved quality of life. Based on available reports, there are various methods for empowering women, and the most important methods include the economic independence, enhancement of skills for information technology and communication and promotion of health knowledge. Health information seeking behaviors can promote health knowledge and, consequently, formulate the judgments, beliefs, and attitudes toward healthy behaviors and, eventually, acquisition of adequate knowledge for identifying the alternatives and available resources for doing different activities and taking into account the positive and negative aspects of issues. In this respect, it is necessary to empower patients toward acquiring, processing, and understanding the basic health information. Regarding the key role of

women in improvement of lifestyle and, consequently, the community health, the promotion of women's health information is a fundamental strategy for empowering them. The available literature in this regard mentioned various capabilities as the outcomes of seeking health information. These capabilities include the contribution to medical decision-making, better adaptation and lower levels of stress, receiving higher social support, and reaching favorable changes in lifestyle. However, few studies have been performed on seeking health information in general and capabilities acquired following health information seeking behaviors in particular in Iran. The available reports in this regard are limited only to the needs, motivations, and barriers to seeking health information of patients with heart diseases. Considering that the process of seeking health information is developed within personal-social interactions and also the health system, it seems appropriate to use the qualitative paradigm in studies in this regard. As different studies have introduced women as more active seekers compared to men, this study focused on women. Women's empowerment through seeking health information in order to assist healthcare providers to identify and then plan for achieving favorable empowerments related to health. (Alireza)

The health issues in women:

The following are health issues commonly found in women;

- * All-causes of death (mortality)
- * High blood pressure (Hypertension)
- * High LDL cholesterol, low HDL cholesterol, or high levels of triglycerides (Dyslipidemia)
- * Type 2 diabetes
- * Coronary heart disease
- * Stroke
- * Gallbladder disease
- * Osteoarthritis (a breakdown of cartilage and bone within a joint)
- * Sleep apnea and breathing problems
- * Low quality of life
- * Mental illness such as clinical depression, anxiety, and other mental disorders
- * Overweight and Obesity

Importance of health education:

Health education is delivered in almost every conceivable setting - universities, schools, hospitals, etc. Health education covers the continuum from disease prevention and promotion of optimal health to the detection of illness to treatment, rehabilitation, and long term care. In almost every event sector of society school, colleges hospitals, health agencies , recreation sectors , worksites , community organizations, voluntary health agencies, prisons, health maintenance organizations at all levels government is trying to convey Health Education through various acceptable and communicable medium, so that it could reach each and every home in the Society. As defined by Green, it is "Any Combination of Health Education and related organizational, economic, and Environmental supports for behavior of individuals, Groups, or Communities Conducive to Health". Clearly, Health Education have long used more than "educational" Strategies. In fact the terms, health promotion and health education are often used interchangeably in the United States. In some countries, such as Australia, Health Education is considered a much narrower endeavor than health promotion. Nevertheless, although the term health promotion emphasizes efforts to influences the broader social context of health behavior, the two terms remain closely linked and overlapping , share a common historical and philosophical foundation, and are often used in combination. (54, Mathews)

Skill Based Health Education:

While it is important to capitalize on the success of effective programmes, it is also helpful to be aware of , and to try to avoid , the barriers to effective skill-based health education.

Infusion of health issues across a range of subjects without providing a solid foundation within one subject, where knowledge, attitudes, and skills can be linked and developed in a sequential, reinforcing strategy.

Inadequate orientation and training of administrators, teachers, and other support staff.

General programme that are less directed towards specific contexts or risk behaviors.(96, Mathews)

Working across sectors raises questions about how to select and train staff - whether this is about health workers understanding and learning to teach literacy development for adults or, as is more usually the case, literacy facilitators gaining some health knowledge. These practical issues around mandates, organization, resourcing and training of literacy and health programmes often influence how far policy can be translated into practice. Many literacy and health programmes are dependent on volunteer or low paid female facilitators and short-term training / career opportunities, thereby undermining overarching gender equality aims.

Existing organisational, institutional and personnel structures should be catalysed for health and literacy programmes, as well as creating new structures through collaboration, partnership and capacity building across sectors. Health and literacy policy and programmes should shift from an instrumental to a transformative approach to women's empowerment and gender equality. Many literacy programmes have been characterised by an instrumental approach to women's empowerment and health, influenced by a narrow research focus on the links between women's literacy and various maternal /child health indicators. A transformative gender approach could ensure that adult literacy programmes move beyond stereotypes of women as mothers and carers and men as the breadwinners, and promote greater diversity in programme aims, methods and evidence of impact.

Conclusion:

Undoubtedly, empowerment of women through acquiring health information increases their participation in healthcare and consequently, their involvement and sense of responsibility in prevention, protection and promotion of the health of themselves, their family, and the society, and facilitates the achievement of favorable health outcomes. Regarding the key role of women in improvement of lifestyle and, consequently, the community health, the promotion of women's health information is a fundamental strategy for empowering them.

In this respect, it is necessary to empower patients toward acquiring, processing, and understanding

the basic health information. There are various methods for empowering women, and the most important methods include the economic independence, enhancement of skills for information technology and communication and promotion of health knowledge, health information seeking behaviours can promote health knowledge and, consequently, formulate the judgments, beliefs, and attitudes toward healthy behaviours and, eventually, acquisition of adequate knowledge for identifying the alternatives and available resources for doing different activities and taking into account the positive and negative aspects of issues. However so many studies were performed on seeking health information in general and capabilities acquired health information around world. The capabilities of women contributed to manage all the medical decision making, better adaption and lower levels of stress, receiving higher social support and reaching favourable changes in lifestyle. Considering that the process of seeking health information is developed within personal-social interactions and also the health system, it seems appropriate to use the qualitative paradigm in women empowerment.

References:

- 1) Balaji P. Jadhav, 2015, *Women's Empowerment Through Sports and Physical Education*, Khel Sahitya Kendra
- 2) George K. Mathews, 2009, *Health Physical Education and Sports*, Crescent Publishing
- 3) V. Satyanarayan, 2016, *Sports Psychology and Sociology*, Sports publication
- 4) *Int J Community Based Nurs Midwifery*. 2015 Apr; 3(2): 105-115. *From Women Empowerment Through Health Information Seeking: A Qualitative Study* Alireza Nikbakht Nasrabadi, Phd, Sakineh Sabzevari, Phd And Tayebeh Negahban Bonabi, Msc <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4441348/>
- 5) *Women's health and women's empowerment_ a locality perspective - ScienceDirect.html*
- 6) *Women's empowerment and its differential impact on health in low income communities in Mumbai, India.html*
- 7) *The Health Effects of Overweight and Obesity _ Healthy Weight, Nutrition, and Physical Activity _ CDC.html*
- 8) *C:\Users\NSS\Desktop\Sociology\Paper\The Dignity of Labor\Obesity\Obesity and Women's Health.html*
- 9) *Exercises That Relieve Stress - Women's Guide to Stress Management - Everyday Health*
- 10) *Definitions of physical Activity.pdf 285_289.pdf*
- 11) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1494879/>
- 12) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4441348/>
- 13) <https://unesdoc.unesco.org/ark:/48223/pf0000245698>
- 14) <https://journals.sagepub.com/doi/abs/10.1177/0020872811408575?journalCode=iswb>