

Health and Education

We, the health personnel; educate ourselves to be responsive to the needs of population that we are serving.

The shortest definition of the education is “the changing Behavior “which at least needs to have Knowledge, attitude and skill related to our job. The health literacy will improve knowledge, and develop life skills which are conducive to individual and community health.

Health education is not only concerned with the communication of information among health personnel, but also with fostering the motivation, skills and confidence necessary to take action to improve health, individually and community based. Comprehensive health education will include the different factors affecting the health, such as: biology and genetics, physical environment, social determinants and technical issues that are needed to use in health delivery system. Here in the medical faculties we are learning some of necessary subjects but not all of them, the important issues which are neglect are political feasibility and organizational possibilities of various forms of action to address social, economic and environmental determinants of health. These lack of information affect the effectiveness of health manpower to respond the real needs of population health; for example an oncologist or surgical oncologist refer his/her cancer patient to the last medicine or procedure which is confirmed in a couple of studies without considering socioeconomic issues of the patient and without understanding the cost efficiency of the therapeutic activities. This is the shortness of education in medical faculties that will affect the equity in health, particular in the countries with low and middle incomes such as many countries in the region. This will be the accountability of universities to promote the knowledge and behavior of health manpower regarding the socioeconomic determinants of health considering the income of country and share of health from Gross Domestic Product (GDP).

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