

- Find out what steps they have already taken to deal with the situation
- Encourage the person to express his/her feelings in own words
- Show respect and tolerance to what they say and do not pass judgement
- Actively listen and show that you are paying attention through your looking
- Encourage them through helpful questions

T-Tell them any relevant information they need

- Provide accurate and specific information in reply to their questions
- Give information on what they can do to remain healthy. Explain any background information they need to know about the particular health issue
- Keep your language simple, repeat important points and ask questions to check if the important points are understood
- Provide the important information in the form of a leaflet if possible that they can take away

H-Help them to make decisions

- Explore the various alternatives
- Raise issues they may not have thought of
- Be careful of letting your own views, values and prejudices influence the advice you give
- Ensure that it is their own decision and not one that you have imposed
- Help them make a plan of action

E-Explain any misunderstandings

- Ask questions to check understanding of important points
- Ask the person to repeat back in their own words and key points

R-Return for follow-up or referral

- Make arrangements for a follow-up visit or referral to other agencies
- If a follow-up visit is not necessary, give the name of someone they can contact if they need help

2.3.2 Counselling Micro Skills

The specific skills that a counsellor can use to enhance their communication with patients/client are referred to as counselling micro skills (Fig. 2.3). These skills enable a counsellor to effectively build a working association and engage/clients patients in discussion that is both helpful and meaningful.

1. Active listening: It means **listening for feeling and meaning**. The counsellor/service provider should put aside his/her own purposes and just listen—really listen. Following actions help in demonstrating active listening to the patient/client.

- Eye contact (culturally appropriate).
- Demonstrate attention, e.g. nodding.
- Encouragement, e.g. *Mm-hmm*, *Yes*.
- Minimise distractions, e.g. non-use of mobile.
- Do not do other tasks at the same time.
- Acknowledge the patient's/client's feeling, e.g. *I can see you feel very sad*.

2. Questioning: It is a primary skill that allows counsellors to gather important and specific information about patients/clients. Generally, three types of questions are asked during counselling session.

- **Closed question:** A closed question limits the response of the patient/client to a one word answer. Closed questions may not require patients/clients to think about what they are saying.

Common Risk Factors/ Determinants of Health

3.1 INTRODUCTION

Developing countries are now in the epidemiologically transitional period that has been experienced in developed countries especially with regard to the increase of noncommunicable diseases (NCDs). Global burden of diseases (GBD) studies have shown the rapid changes in the disease patterns and rapid urbanization in the developing world in the last two decades have contributed to the recent burden of diseases.

The lifestyle diseases are the result of the way people lead their lives. These are also named diseases of longevity or diseases of civilization. These can be defined as diseases that appear to become ever more widespread as countries become more industrialized. Lifestyle diseases are different from other diseases because they are potentially preventable and can be decreased with modifications in diet, lifestyle and environment.

3.2 GLOBAL AND NATIONAL BURDEN OF COMMUNICABLE/INFECTIOUS DISEASES

Communicable diseases are also known as infectious diseases. Diseases such as malaria, TB, HIV, etc. come under the category of communicable diseases. In 2010, the global deaths from HIV / AIDS have increased to 1.5 million and malaria mortality rose to 1.17 million. Mortality from neglected tropical diseases rose to 152,000 while tuberculosis killed 1.2 million people the same year.

The estimated HIV prevalence and AIDS deaths in India is 0.3% and 130,000 respectively (2013). According to World Malaria Report (2014), 22% (275.5 m) of India's population live in high transmission (1 case per 1000 population) areas. In 2013, 0.88 million cases have been recorded. The incidence of malaria in India accounted for 58% of cases in the South East Asia Region of WHO. The current figures indicate 0.7–1.6 million confirmed cases of malaria and 400–1,000 deaths annually in India (2014). India is the country with the highest burden of TB. The WHO statistics for 2014 give an estimated incidence of 2.2 million cases of TB for India out of a global incidence of 9 million. The estimated TB prevalence for 2014 is 2.5 million.

3.3 GLOBAL BURDEN OF NONCOMMUNICABLE DISEASES AND THEIR RISK FACTORS

The chronic diseases including cardiovascular diseases (stroke and heart attack), cancers, chronic respiratory diseases and diabetes accounted for 68% of deaths worldwide in the year 2012. This is expected to rise by 23% over the next 20 to 25 years, while deaths due to other causes are expected to remain roughly stable up to 2030. It has been projected that, by 2030 NCDs will account for almost three-quarters of all

4.1.3 Balanced Diet: Importance and Need

The balanced diet is one which contains right and sufficient amount of proteins, carbohydrates, vitamins and minerals (Fig. 4.1.1). A healthy diet can be planned only by combining different food groups, such as cereals, millets, pulses, fruits and vegetables, milk and milk products, meat and meat products, and sugar and fat, along with the right amount of fibre. Nutrients (Box 4.1.2) that we obtain through food have vital effects on physical growth and development, maintenance of normal body function, physical activity and health. Balanced diet is thus needed to sustain life and activity.

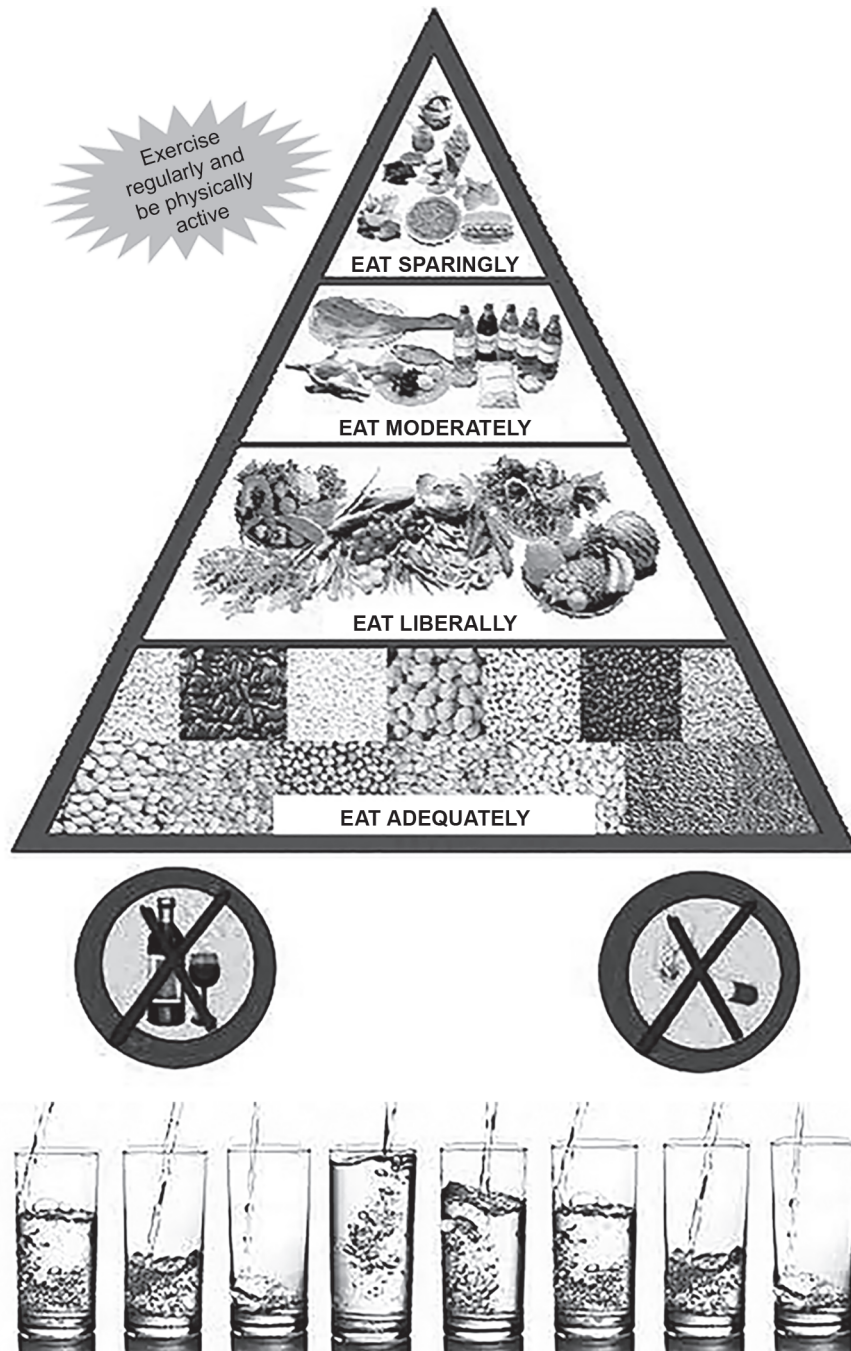


Fig. 4.1.1: Balanced diet

4.1.5 Healthy Diet in Pregnancy

A healthy diet is an important part of a healthy lifestyle at any time, but is especially vital for pregnant women. Pregnancy is the time when a baby forms inside the mother's womb. Healthy diet during pregnancy will help in the development and growth of the fetus and the woman remains fit and well. There is no special diet but it is important to eat a variety of foods every day to get the right balance of nutrients that a pregnant woman and her baby needs.

Eating iron-enriched food (green leafy vegetables, fruits, jaggery, black chana), vitamins and minerals, as well as fibre, which helps digestion and prevents constipation is recommended. Protein (eggs, soybeans) and calcium products (milk) in pregnancy is also very important source of healthy diet. The pregnant women should also take at least 100 tablets of iron folic acid (IFA) during pregnancy which doubles in case of anemia. The IFA tablet should be taken only with water and not with milk or tea and in between the meals. The correct and timely intake of IFA tablets would help in preventing its side effects such as vomiting and nausea. Efforts should be made to cook food in the iron utensils.

4.1.6 Activity

Case: A 54-year-old man has come to the health centre and he has been diagnosed with hypertension by the health worker. What dietary advice would an ANM/counsellor would give to the patient?

Suggested activities which may be organized at the district/block/village level for promoting healthy diet

- Exhibition on healthy diet by school and college students.
- Healthy diet competitions in schools and colleges.
- Lectures by dietician/faculty of Home Science department on healthy diet in schools, colleges and community.

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