

Outsourcing Some Health Care Tasks to Mothers of Families

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Abstract

The family as a social institution is one of the important pillars of any society and the health index is one of the basic and basic conditions for having a system with social welfare. Today, the huge costs of health care have led to a large part of the per capita income of each family to be spent on care, provision and maintenance of health. Therefore, families are trying to ensure the health of their families by observing health issues and preventing diseases. One of the projects that can be helpful in this regard is the plan to outsource some health responsibilities to family mothers. According to the plan, one family member who is preferably the mother (or the closest role to the mother in the family) as a health assistant, relevant short-term training courses (including knowledge of care and principles of self-care, first aid, recognizing risk factors and risk in the field of health, identification of danger signs and symptoms of common and high-risk physical and mental diseases in any society, how to measure and monitor basic health indicators (such as blood pressure, body temperature, control of sugar and lipids, etc.), The basic principles of healthy living, proper nutrition, family mental health, oral health as well as exercise and physical fitness) in health centers and then, with the aim of promoting family health, to transfer knowledge and implement the training received take action on family members. Therefore, the present article is a mini-review that aims to provide a plan to outsource some of the tasks in the field of health through education, support and control of families to health care assistants (family mothers) to have a healthy society and reduce burnout of health personnel.

Keywords: Mother; Health Assistant; Family; Health Education Courses

Introduction

Family health is the foundation of creating a healthy society and has a completely unique role in each individual's life, so forming a healthy family is a fundamental and priority goal for almost all people in different cultures [1].

Today, many health researchers believe that families have a great impact on the health of their people, and health care across the country focuses on supporting and strengthening the role of families in preventing and controlling disease. About 70 to 90 percent of patients are cared for at home and by family members, especially mothers. Thus, families are the first producers of health care and mothers are the first managers and executors of health care related products [2].

By choosing a lifestyle to maintain and promote their health and prevent diseases, a person performs actions and activities such as following a proper diet, sleep and activity, exercise, weight control, non-smoking and alcohol and immunization against diseases. This sets the lifestyle [3].

Today, the transfer of hospital care to the community and a community-oriented approach helps maintain and develop health in the community. Infection of an individual causes individual family members to enter the disease cycle. Due to the strong relationship between the family and the health status of family members, training family members to control the disease as well as prevention is very useful. The duty of mothers, in addition to caring for the patient, is to help the family to increase hope and trust; Such a performance will improve the quality of health and well-being of the family [4].

In addition to having a healthy lifestyle, people should be able to regain their health if they get sick through the use of services. Given that the health of citizens is one of the most important indicators of development, a healthy workforce with high productivity can provide growth and economic development. The income of families also affects their health expenditures. Justice in financial support requires the direct costs of families, that they, in any social and economic situation, be protected in the event of illness so that health costs do not disrupt their standard of living [5].

Numerous studies have been conducted to support family health, some of which are as follows

Findings of Jabbari Beyrami., *et al.*'s research entitled Family Physician Plan Evaluation Based on Family Health Indicators show that after the implementation of the Family Physician Plan, the commitment of the main members of the health team (physician and midwife) has doubled and it is expected that By improving the quantity and quality of family health services, beneficial changes can be achieved in reducing the rate of abortion, changing the method of prevention, periodic examinations and Pap smear sampling in the system[6].

Findings of Torkfar and Tahmasebi research entitled "The effect of women's public exercise on family health in Shiraz show that exercise causes a better self-image, fitness and appearance, self-confidence and self-knowledge, mental health of people hoping of life. Many reasons, including computer games, cars, lack of physical education programs and urban development, increase dangerous and sedentary lifestyles, which are the main cause of health problems and diseases in the world [7].

Findings of Ismailian., *et al.*'s research entitled Family-centered care education and the consequences of heart failure in Iran showed that family-centered care education promotes self-care and increases the quality of life of people with heart failure. Utilizing this educational approach is recommended as an effective, cost-effective educational method without the need for special equipment [8].

Now, considering that the need for health plans that have successful results is felt in any society, we are examining the outsourcing plan of some health responsibilities to mothers in the family. In this project, first, the health centers, considering the proximity to each neighborhood, identifying the mothers of the family and inviting them to participate in the above project. Explaining the purpose of the project by holding a briefing session and asking them to participate in the project to maintain the health of family members.

Mothers, because they bear the burden of cultural and social problems and family health, are closely acquainted with family problems and are a good partner in this project. First, the health center provides the mother of the family with worksheets of family members' details (general information, medical history, monthly and six-month checkups, vaccines, mental and emotional illnesses, etc.) and asks them to complete it carefully. After the forms are completed, it is entered into the computer by an operator at the health center and a record is made for that family. Mothers are then asked to attend public and primary health courses, which include (knowledge of care and principles of self-care, first aid, identification of risk factors in the field of health, identification of danger signs and symptoms of common and high-risk physical and mental illnesses in each society, how to measure and monitor the basic characteristics of health (such as blood pressure, body temperature, control of sugar and lipids, etc.), the basic principles of healthy living, proper nutrition, family mental health, oral health and exercise and Physical fitness) to participate and then with the aim of promoting family health, to transfer knowledge and

implement the training received to family members. In order for the project to be implemented successfully, mothers are offered to receive a grant from the neighborhood health center in exchange for cooperation as a health assistant.

Also, due to the fact that most families are not able to pay for medical treatment, some expenses such as tests, counseling and oral health should be done for free and periodically in the neighborhood health centers. If this plan is implemented successfully in the near future, we will have healthy families in the community that will have less financial burden for governments in the field of health. Also, this plan is more effective than plans such as family doctor plan, family-centered care plan, training of health assistants in schools and health volunteers, because in the above plans, the family is the target community in the field of health, but in this plan, mothers are as the target community. Given that mothers spend most of their time caring for the family, they have more information than the head of the family, who is the father. Therefore, they are a better interface for health centers for training courses, proper scheduling, completing health worksheets and family care in the field of health.

Mothers should have regular medical check-ups at regular intervals set by health centers to monitor family health. A complete general physician check-up includes the following, but in specialized cases, the general physician will refer the person to a specialist for a better diagnosis.

- 1. Full body physical check
- 2. Laboratory tests including tests related to blood lipids, blood sugar,
- 3. Dentistry
- 4. Monitoring blood pressure and fever
- 5. Vaccination
- 6. Eye examinations by optometry.

Mothers complete the results of the above tests in the worksheets provided by the health center and deliver them to the health center along with the test results, so that the family's health can be determined within a period of time after screening. If the plan is done correctly, it will help families diagnose the disease sooner and seek treatment at a lower cost. Regarding the effectiveness and efficiency of the project, the results of information monitoring obtained in a period of six months or one year can be evaluated and the following questions can be answered.

Did the families cooperate with the health centers in implementing the plan?

Can the information obtained from the monitoring of the project guarantee a healthy society in the near future?

Are the results of the project promising?

Is retraining offered for mothers?

Answering the questions and monitoring the information for one year will help us decide whether to continue or end the family savior mothers plan in the field of health.

Project benefits

- 1. Literacy of health information of families, especially mothers, increases.
- 2. Health costs for families are reduced due to periodic checkups and disease identification.

3. Due to outsourcing some health responsibilities to families, health centers have more time to counsel and educate low-income families, homeless families.

Disadvantages of the design

- 1. Due to the limited budget in health centers, maternity allowance may not be paid to mothers.
- 2. It is possible that alternative plans will be approved in the governments that will not allow the continuation of work for the outsourcing of health duties to the mothers of the family.
- 3. Families do not cooperate in the implementation of the plan.

Conclusion

The existence of a healthy society depends on the health of the smaller components of that society (families). In the meantime, the family is the core and society are one of its foundations. Governments should look for family health in addition to health centers in the potential of mothers and family members to promote community health. Supporting health projects that benefit the community helps governments take action to have a healthier community and reduce health care costs by implementing the plan properly. Also, the health plan is successfully implemented if the previous plans are not forgotten by creating a new health plan. Rethinking the description of the duties of health teams as supervisors of the implementation of the plan and paying more attention to primary health care, designing appropriate mechanisms for collecting and maintaining statistics and performance reports, monitoring and quality control of services, medical staff symposiums on information analysis of classified health in the statistical section of the target community helps governments achieve community health goals.

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