

The Importance of Improving Health Literacy in Schools

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Received: July 04, 2018; **Published:** July 27, 2018

Non-communicable chronic diseases are currently the main cause of premature death and have as their common denominator the fact that they can be influenced by the adoption of certain behaviors and lifestyles. Among them, chronic back pain is a complex problem that cause morbidity and disability in adults [1,2].

Low back pain (LBP) has become a growing public health problem in young people [3,4], presenting a negative impact and being commonly associated with the demand for health care, medication use, increased absenteeism and with a decrease in quality of life [5,6].

Several factors have been identified as risk factors for LBP, such as genetic, psychosocial, physiological, anthropometric and environmental. Among them, we can consider ethnicity, age, sex, smoking, obesity, sedentary activities such as television watching and computer use, physical activity, adoption of inappropriate postures and transportation and excess weight in school backpacks [7-10]. This way, some risk factors for the development of LBP can be modified with some type of intervention.

General determinants of health are the conditions in which people are born, grow, live, work, and get older, and include individual factors (such as age, gender and constitutional parameters?), lifestyle factors and social and community networks, and socio-economic, cultural and environmental conditions [11,12]. Dahlgren and Whitehead's model includes health determinants in different layers. From this model it can be verified that living and working conditions of the individuals are related to behavioral factors [13-15]. In this way, acting upon these factors is fundamental so that each person's health can be maintained and/or improved through intelligent efforts and life options of the individual and society [11].

Therefore, the health condition must be obtained through adaptations of the physical, mental and social ways imposed by disease and social determinants. Society must have the responsibility to improve the conditions for people to adapt and to empower people by helping them to find ways to achieve a good health condition [16].

The development of health public policies, the creation of supportive environments, increased community participation, the development of personal capacities and the reorientation of health services are health promotion strategies defined in 1986 by the Ottawa Charter, which considers that to promote health it is necessary to create conditions that allow individuals and the community to control their own health and the factors that influence it [17]. The same strategy was mentioned in the Adelaide Declaration which revealed that in order to achieve health promotion objectives, all sectors of government must involve health and well-being as components in the development of their policies, as these are related to the social and economic dimension through the determinants of health [18].

In this way, health promotion involves a combination between health education and its interventions at the organizational, political and economic levels in order to promote changes in the environment and behavior of people, enabling conditions that empower people to act on the determinants of health, that is, aiming to strengthen the capacity of the individual and the community to deal with the determinants and conditioners of health [11,13,17].

Health literacy determines access to information and the ability to negotiate the health care system; consists of the individual's ability to make informed decisions in several sectors, including home, work, community, and health services [12]. So, increasing health literacy will empower individuals to improve their quality of life, so that they can control over their health and have the ability to seek information and take responsibility [19].

In the particular case of LBP, measure aiming to increase health literacy are important in the development of personal and social empowerment, helping the individual with this disorder to identify and become aware of their own health needs and to develop the appropriate skills, necessary to generate changes of lifestyle and to provide healthier environments.

Therefore, strategies aimed at increasing literacy should involve the political sector, a sustainable environment, with educational interventions and actions for community development, as well as an alliance between the health and education sectors [11,20]. It is necessary to recognize and understand the political aspects of education in order to overcome structural barriers to health [20], making it necessary to establish a favorable environment, access to information, lifestyles and opportunities to enable individuals to opt for a healthy life.

Since there is an increase in the prevalence of LBP in adolescents and the school environment may predispose these individuals to the development of LBP due to prolonged posture adopted in the classroom, the transportation of the school backpack and because of inadequate furniture, it becomes necessary to carry out intervention actions aiming at health promotion and prevention. Considering that most of the health problems and risk behaviors associated with the environment and lifestyles (modifiable risk factors) can be minimized or prevented by increasing health literacy, a set of initiatives should be promoted, like awareness actions and other strategic activities, in order to prevent LBP.

School physiotherapy emerges with the objective of promoting knowledge and health conditions in this specific area of LBP and postural changes, optimizing the technical and personal skills of teachers and students and developing individual and collective health potential. The performance of the Physiotherapist in schools should involve a salutogenic approach in order to create a stimulating environment of creativity and critical sense, and not only an intervention in risk factors. Empowerment, capacity and motivation must be transferred so that children and adolescents and the entire school community are responsible for their health choices [21].

Concerning the school physical environment, assistance should be sought from public and private sectors for the problem of school furniture, often not suitable to the child anthropometric parameters. The provision of wooden boxes will allow children of short stature to support their feet on the box and adopt a correct sitting posture. On the other hand, the observed increase, in recent years, of adolescent's general height make the tables not suitable to this new anthropometry, creating the need for higher tables for some students. The State must understand that investments in prevention actions are generally less expensive than those applied in the management and treatment of the disease [22] and that these spending on prevention would be an investment in the future.

Regarding overweight in school backpacks, although some schools have lockers, not all students are entitled to a locker; additionally, many students have to carry their backpacks in the way between home and school. One solution for this problem could be the preparation of textbooks divided into parts, according to the school program, or the adoption of digital books.

Hence, the school should include ergonomic health education classes in which the consequences of adopting inappropriate postures should be discussed, not only at school but also at home and when socializing, with particular attention being made to the use of computers and mobile phones, frequently associated with poor posture throughout their use.

Once again, health should not be seen as an individual matter, health should be a collective issue. The student himself has to be able to understand when bad postures are being adopted when the furniture is not suitable for his height, and has to be able to decide if he wants to improve his postural habits and, if so, how he can do it. But for this, the entire school community and the political and private sectors must be involved to provide guidance, increased literacy, and the necessary material to improve student health condition.

LBP cannot continue to be a problem for young people. It is necessary to carry out action strategies to change this panorama.

Funding Sources

This work is financed by national funds through the Foundation for Science and Technology (FCT) in the scope of the project UID/Multi/04587/2013.

Acknowledgment

PhD Sílvia Fernandes by the language editing, and proofreading.

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Volume 9 Issue 8 August 2018

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