



Basic Science of Public Health

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Description

Written by Maisyarah, Fitria Fatma, Adriani, Harisnal, Rizki Fajariyah, Abdi Iswahyudi Yasril, Mila Sari, Cici Aprilliani, Shantrya Dhelly Susanty, Vina Novela, Nurdin, Neila Sulung and Cici Apriza Yanti, the history of public health has begun since 5th century BC, but in accordance with development of the times and advances in technology, public health science continues to develop as well towards better. Basically health science society that begins with health education which is oriented towards preventive and primitive efforts to improve the level of public health. This book tries to provide an overview of general public health paradigm and health problems faced by society related to health and illness behavior, factors that influence it and efforts to prevent the emergence of health problems for society. This book is the first book from the writing team entitled Basics of Public Health Science published in 2021, and can be used as reference in the field of health science education community for health workers and para students in the health field. Most of the book content comes from several reference books, research results, research articles related to topics in this book [1]. Health Believe Model (HBM) by Wacker, Robbyn R emphasizes the role perception of susceptibility to a disease and potential effectiveness in treatment, meaning health education considering the individual's perception that they are susceptible to disease threaten their health and actions of the individual who can prevent the threats and destroy diseases that may attack [2]. HBM is based on beliefs that health behavior determined by whether the individual view themselves as vulnerable to something health problems, looking at the problem as something serious, sure of benefit from treatment or prevention efforts and recognize the need to take action and any obstacles that could interfere this action. HMB as an approach of health education that is based on a beliefs or perceptions held someone is concerned with vulnerability against disease [3]. Stuart (1986) broadly argues that health education is part of the health and medical program. Health education is a purposeful planned effort modify your point of view, attitude or behavior of an individual, group or society towards a more modern healthy lifestyle through promotive, preventive, curative and rehabilitative [4].

Green (1980) broadly argues that health education is a planned process to achieve health goals by combining various ways of learning [5]. President's Committee on Health Education (1997) broadly defines health education as a capable process help revitalize that gap occurs between the information obtained and health practice.

Through this process, hopefully someone can be motivated to keep away from bad habits and implement a more beneficial lifestyle for health (President's Committee on Health Education in Notoatmodjo, 2003) [5]. Craven & Hirnle in outline believes that health education is a learning process in practice and instruction with the aim of provide various information and motivation to someone so that it is expected to happen increasing insight and skills for implement a healthy lifestyle and there is an increase in insight and skills for implement a healthy lifestyle [4]. It has been explained that health education is a learning process that is planned and in dynamic nature or always moving. With the aim of the process is for behavior change with increased skills, increased knowledge and changes in attitudes which are related to lifestyle in that direction getting better and healthier. As for the changes expected from health education is implementation of health programs starting from individuals, groups up to wide community. Learning process in health education concept can be practiced by anyone, in wherever, and whenever.

In health education there are several elements and components, namely the presence of educators and the goal of education, which is represents input, implementation of various types framework of activities that have been planned as form the process of behavior change, then behavior change is a result or output expected from the activities carried out. Later it will always be applied in life daily. Health education and health promotion is an effort to change behavior towards a better and healthier life independently [6]. Health education is a support for other programs and has been recognized by health officers as implementing health programs in the field. In reality it's a confession that does not correspond to reality in other words lack of engagement in every implementation of health program; the reason is education health does not immediately and clearly show the result. Because health education is investment behavior so the result of education health in the long term can be seen or measured while the immediate impact is the result changes in health education over the short time to increase knowledge whereas public health indicators do not just look at the level of knowledge output or outcomes of health education. There is a difference with treatment programs directly produces results that occur in reducing morbidity rates in society.

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