Abstract: The citizens claim the right to get a high level access to the health services including the health promotion fields. The health professionals aim to prevent illnesses, to reduce morbidity and premature mortality and need to increase the community awareness on the fact that it is cheaper preventing than curing. In this view, addressing youngsters represents a powerful investment in the future and the essence of real health prevention. Also, trained students from nursing and optometry department could be a key for developing successful health promotion activities in the community. Usually, in most of the universities all over the world, nursing and optometrist students may never get appropriate training in health promotion. Also, the present health professionals do not have enough knowledge in health promotion especially in the newest well-being standards. The paper tries to develop a common curriculum in adolescent health promotion topics, for students studying in two completely different faculties (medicine and mechanical engineering) started from a study on the adolescent problems developed in nursing and optometry department. Accordingly, we will try to pay attention to adolescent health promotion curriculum, related to ethical dilemma, adolescents’ needs and rights.

Key Words: education strategy, health promotion, adolescent needs, e-learning platform,

1. Introduction

In this paper we reflect how the adolescent needs will be used to design a curriculum in health promotion fields for two kinds of students: nursing study and optometry study programme.

Nutbeam established that “Health promotion is not something that is done on or to people, it is done with people, either as individuals or as groups” [13]

WHO consider that: “Health promotion represents a comprehensive social and political process, it not only embraces actions directed at strengthening the skills and capabilities of individuals, but also action directed towards changing social, environmental and economic conditions so as to alleviate their impact on public and individual health. Health promotion is the process of enabling people to increase control over the determinants of health and thereby improve their health.”[9, 21]

Health promotion is a good example of how the people with different background: doctors, nurses, optometrists, physical-therapists, social workers, lawyers, psychologists could work together.

Nutbeam consider that the “indicators which can be used in assessing the achievement of health promotion outcomes include the following”: Health literacy, Social mobilisation and Public policy and Organisational practice. [13]

Health promotion becomes more and more a concern of political authorities in developed countries. In that way Gillies P. endorse that “health promotion desperately needs models that are more sociologically and politically sophisticated and have greater explanatory power.” [7]

Health promotion programme needs a lot of financial and human resources; designing this kind of programme means to recognize risk and protective factors, in the same time with understanding cultural and behaviour background and combining individual and community information. (fig.1)
Health promotion needs not only human resources, with proper education but the possibility to develop services in these fields. Developing health promotion services it must be done in accordance with social influence and health public policy; the activities in this fields must be designed in each country according to the quality of life, the people lifestyle and health environments. (fig.2)

2. Health promotion and Adolescent needs

To determine the threats is not a target of health promotion; is only an important step in understanding the behaviour and environment changes which could affect our health status and a possibility to develop real project for improving health status in community. [1, 12]

A healthy lifestyle includes:

- physical exercise (moderate physical activity is recommended 3-5 times per week 2-3 times a week and a strenuous physical exercise);
- healthy food,
- sleeping-working balance,
- preventive activities and behaviours: regular medical examinations, vaccinations, sexually transmitted disease prevention, safety compliance measures (use of protective equipment, safety belt).

It is extremely important in young people to learn how to develop a healthy lifestyle, to balance things are good with things they like.

The study group comprises of 300 adolescents with a minimum of 14 and a maximum of 18 years. The study was realized in 2008 –2010. The adolescents were asked to answer 24 questions.

Young people surveyed believe in 75% their health is pretty good, though 25% believe their health is bad. 82.5% of teens admit having difficulty concentrating (26.5% - rarely have such problems, 51% - sometimes, 4% - often have difficulty concentrating, 2% - had difficulty concentrating all the time).

50% of respondents say they are sometimes stressed, 25% are rarely stressed, 12.5% often feel stressed, 12.5% always feel stressed.

Throughout the questionnaire the subjects had to record height and weight, allowing to determine the body mass index for each of the respondents. 18.07% of adolescents (23.07% of all girls) are underweight. One of the main unhealthy behaviour is smoking.

The majority of teens responded that they have never smoked, but 12% of them are smoking every day. We also observe a higher use of tobacco in boys (14.45% daily) then in girls (10.25%).

Alcohol abuse is a health determinant, responsible for disability and premature death.

Alcohol abuse has been recognized by 42% of adolescents.

Two main ideas result from the answers connected with youth dietary: daily consumption of fizzy drinks and a high consumption of fast-food (50% of the subjects eat at least 2-3 times per week hamburgers, cheeseburgers).

Evaluate the adolescent needs is the first step in developing a curriculum based on topics really useful...
for adolescents. We agree with J. Pommier, D. Jourdan, D. Berger, C. Vandoorne, B. Piorecka, G. S. De Carvalho that: “In terms of public health policy, each country should encourage the development of links between school professionals (whether health professionals or not) and community professionals, to ensure global health promotion, whatever the approach to providing the services.” [15]

3. Curriculum topics

Designing new topics of curriculum must also have the objective “to hone the practical skills of each student to function better as a member of team, to understand the team work and to communicate with a user” [5, 8].

The challenge for nursing and optometrist students is to acquire knowledge in health promotion fields and to develop skills helping them to solve different problems which appear in practical activities.

Unfortunately, Romania has only few specialists in health promotion and usually, the Health Promotion Department from Health County Authorities has only 2 or 3 people employed for these activities.

In that way, it becomes more important to involve more specialists in health promotion activities, professionals working in hospitals or in optometry offices, general practitioners. They must be educated during university studies for being able to add value in the fields of health promotion. [6] The main skills and abilities which must be developed during the health promotion education are present in the following figure (fig. 5)

![Figure 5. Skills in health promotion](image)

As Xiangyang T. mentioned: “The university has a responsibility to work towards emphasizing and increasing the students’ capacity to gain control over and improve their health, and to reorient the focus of health services from merely addressing illness to prioritizing illness prevention and health promotion” [20], but also starting to apply this knowledge and abilities in younger people beginning with gymnasium and high-school.

The main topics which must be studied in nursing and optometrist students’ curricula are: stress, food disorder, alcoholism, smoking, sedentary life, substance abuse, environment threats.

Also for nurses training it is important to have topics like sexuality, sexually transmitted infections, abortion and for optometry students’ training subjects like eye disorder, eye care, use of contact lens.

![Figure 6. Health promotion topics for adolescents](image)

Like other universities curriculum, our curriculum was also designed for students trained according to Bologna declaration principles and considering the aim of allowing students mobility in the frame of Erasmus action. [2, 14]

Simpson K. thinks that, “From an educational and health promotion perspective, therefore, the inclusion of critical pedagogical approaches within health promotion curricula and qualitative interpretivist paradigms of research could be considered essential”

Also, the curriculum must develop some skills for self expressing of each personality, as “involvement, dynamism, personal attitude and point of view, capacity of relating to the others and of opening new communication channels” [4]

Because the health promotion classes at high school means in the same time to be able to have a presentation in front of teens there is necessary to acquired abilities for study and preparation, like: “study the audience, prepare the presentation, organise the technical support, check the conference room, rehearse” [4]

4. Informational resources

An e-learning platform was developed and implemented in Transilvania University of Brasov. All teaching materials conceived by a professor are available and accessible for students. Accordingly, the courses designed for health promotion module are available for students,
simply accessing the platform. [10]

The platform use Moodle – a Virtual Learning Environment and also a free web application that educators can use to create effective online learning sites. [11]

Also it was developed an ASPECKT-Dspace: http://aspeckt.unitbv.ro/dspace/, which can be also use in developing on-line service, and where, next year we can archive the research materials published by students at the health promotion laboratory. [16, 17]

5. Ethics dilemma in health promotion

As Chern A. S. C. mentioned: “Health promotion activities are not usually rewarding in terms of perceiving results and financial gain.” [3]. We knew that is difficult to evaluate in time the financial contribution of health promotion but, since Avicenna is well-known that is cheaper to prevent than to treat.

So, is important to spend more money for preventive medicine, meaning that in time, a lot of financial resources could be redirected, enabling to help more people with health problems.

The most important ethical challenge of using money for health promotion campaigns remains related to the dilemma why using the financial and human resources for preventive and not for curing medicine. [19]

Health promotion curriculum must be designed based on human equality, ethics and extension of the human life, etc, in the aim of improving humans’ health.

6. Conclusion

As WHO mention in 1999 “The challenge in the future is to support the students in constructing their own views of health promotion and the broad roles of new health promoters demanded in the 21st century” [9]

As Resnicow mentioned “The impact of school health education programs is often attenuated by inadequate teacher implementation.” [18].

That’s why is very important how we educate the students, specifically nurses and optometrists and also, to develop modern facilities like e-Health sites or health promotion forums for young people.

Ethical issues does not seem to be an obstacle in developing health promotion activities but an important instrument to measure and evaluate human good sense, good practice and professionalism in health sciences practice.

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