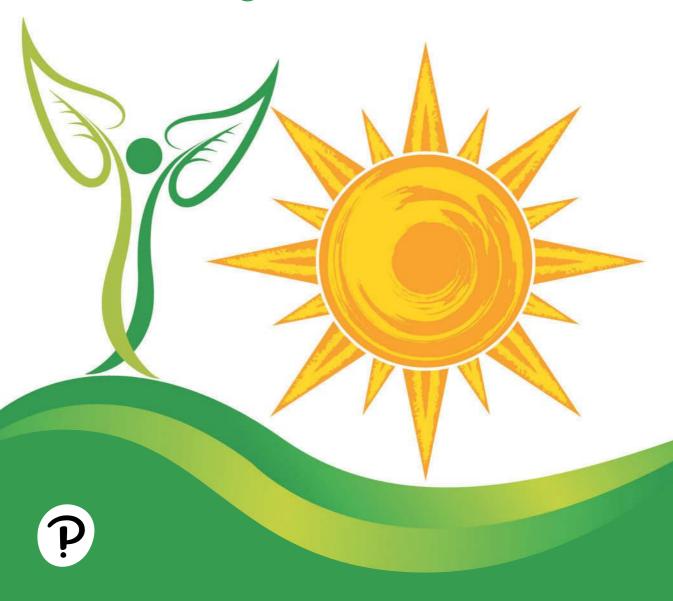
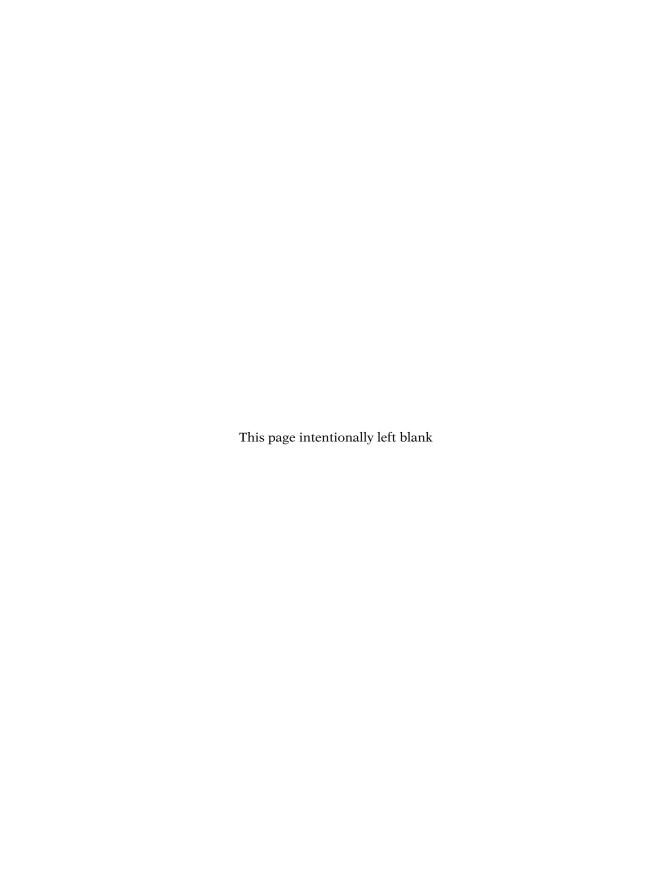
PROMOTION

EIGHTH EDITION

in Nursing Practice



HEALTH PROMOTION IN NURSING PRACTICE



HEALTH PROMOTION IN NURSING PRACTICE

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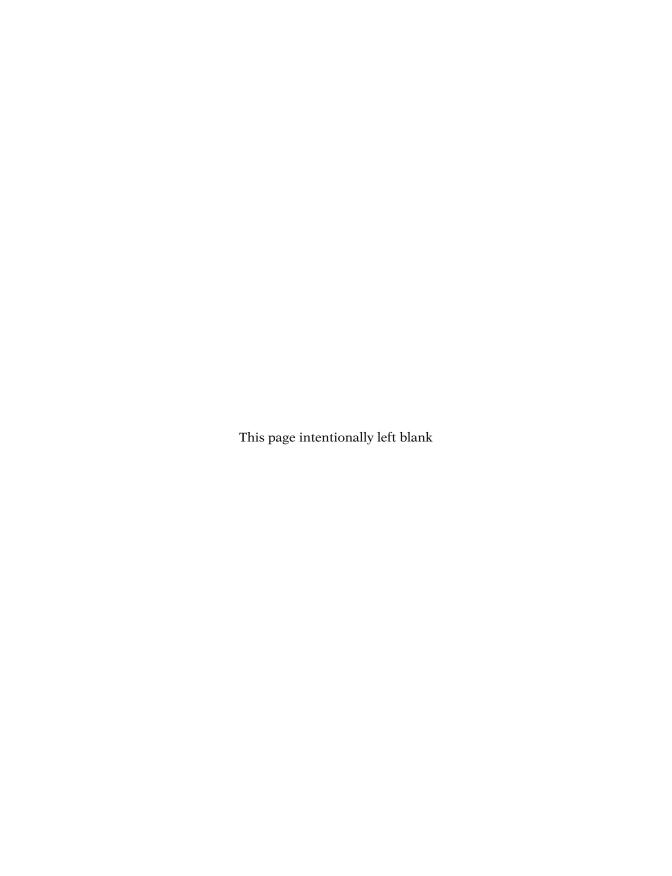
Dedication

To nurse educators and practicing nurses who teach and role model health promotion. I bid you success as you face the challenges of promoting a culture of health for all.

— C. L. Murdaugh

To my family and friends for their support during the preparation of this edition; I wish all of you happy and healthy lives.

-M. A. Parsons



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FOREWORD

I am pleased to write the foreword for the eighth edition of *Health Promotion in Nursing Practice*. The promotion of health is recognized globally as essential to the well-being of the world population and to the achievement of health equity across diverse racial, ethnic, and economic groups. Many organizations speak of the need to develop a "culture of health" worldwide. Increasingly, health policies are being designed and implemented to move toward the goal of high-level health and wellness for all. Widespread adoption of this goal by health care providers would result in new models of care, decreased monies spent on acute illness, and a lower incidence of devastating chronic diseases. Access to innovative health promotion programs for all populations, particularly those most vulnerable, is a major focus of this eighth edition.

This book helps the nurse link health promotion practices with national health goals such as those articulated in *Healthy People 2020*. Nurses must lead positive change in health promotion and prevention policies and design health promotion programs as a multisectoral endeavor. Healthy environments, schools, and worksites with adequate air quality, water supply, housing, vector control, and shelter from the devastating effects of natural disasters are essential to quality living. Community-based health promotion strategies are the first lines of support for the health of all people. This new edition provides strategies that nurses can use to help communities activate their power to engage in competent individual, family, and community self-care. These strategies address the social and physical environments critical for healthy longevity. Approaches to evaluating the effectiveness of behavior change programs in communities and in primary care are also described.

New communication, tracking, and linking technologies are developing at a rapid pace, thus enabling widespread dissemination of health promotion information and innovative support of individuals and families who want to make positive lifestyle and environmental changes. Sporadic programs do not result in the continuity of care needed for real health behavior change at the family and community levels. In this edition, the authors speak to the importance of social media, mobile applications (apps), and other digital technologies to support better continuity of care and follow-up essential to effective long-term behavior change.

Cultural sensitivity to the health promotion needs of diverse populations is important as many communities are experiencing a wider array of languages, cultural practices, and lifestyles. Fitting health promotion services to individuals, families, and communities from diverse backgrounds requires listening to their priorities, respecting them as persons with dignity and worth, and adapting health promotion strategies and technologies to differing cultural values, levels of education, and life stages.

It is important that health promotion services be provided by nurses and other health care workers who maintain healthy lifestyles and healthy work environments. The American Nurses' Association declared 2017 as the year of the *Healthy Nurse*. Educational programs for nurses and other health professionals must provide healthy learning environments and preparation for healthy lifestyles to be consistent with valuing health promotion as an important aspect of nursing practice.

xviii Foreword

Knowledge about health promotion and effective interventions continues to emerge. This eighth edition integrates the results of the latest research and theoretical advances into useful, evidence-based information to help nurses provide scientifically sound health promotion and prevention services. Dr. Carolyn L. Murdaugh and Dr. Mary Ann Parsons, nurse experts in health promotion, will inspire you to incorporate new health promotion strategies into your organizational policies, create scientifically sound nursing protocols, and provide leadership in the development of a culture of health.

Nola J. Pender, PhD, RN, FAAN

Distinguished Professor Marcella Niehoff School of Nursing Loyola University Chicago Professor Emerita School of Nursing University of Michigan

PREFACE

The overall goal of the eighth edition is to provide nurses and other health promotion practitioners practical, evidence-based information to promote the health of racially, ethnically, and culturally diverse individuals, families, and communities. The book aims to (1) present a comprehensive approach to health promotion that is based on the most recent research and federal guidelines; (2) describe the role that digital technologies are playing in health promotion in all ages and populations; (3) integrate factors in the social and physical environments that influence health and health inequities; and (4) offer strategies to implement and evaluate programs to promote health in individuals across the life span, and in schools, worksites, and communities. We believe information in the book provides the foundation on which to build the practice of health promotion.

ORGANIZATION OF THIS BOOK

- Part I, The Human Quest for Health: Multiple conceptions of health are reviewed, and both individual and community models are described to guide the development of health promotion programs.
- Part II, Planning for Health Promotion and Prevention: Strategies are presented to assess health, health beliefs, and health behaviors, and develop a health promotion plan.
- Part III, Interventions for Health Promotion and Prevention: Four core health-promoting behaviors are addressed: physical activity, nutrition, stress management, and social support.
- Part IV, Evaluating the Effectiveness of Health Promotion: Practical methods for evaluating health promotion programs are described.
- Part V, Approaches for Promoting a Healthy Society: Four areas are included: empowering individuals for self-care; promoting health and health literacy and decreasing health inequities in diverse populations with culturally sensitive approaches; promoting health in schools, worksites, and communities; and building a healthy society through social and environmental change.

NEW TO THIS EDITION

- An overview of several theories and models that currently guide the development of digital health promotion applications.
- The role of technology in health assessment and health planning.
- The application of social media, mobile health, and other digital technologies in promoting healthy behaviors for physical activity, healthy eating, and stress reduction.
- The use of online communities to provide support.
- Strategies to empower individuals and communities for self-care.
- Federal plain language guidelines to promote health literacy.

- Updated information on environmental contaminants, including herbicides, lead, and shale gas extraction.
- Information about the Robert Wood Foundation goal to create a national movement to promote a culture of health which promotes health equity.
- Incorporation of Healthy People 2020 midcourse evaluations and Healthy People 2030.
- Updated chapter content, tables, and figures based on the most recent literature.

For the learner, each chapter contains learning objectives, figures, tables, and displays to highlight and reinforce material covered in each chapter; suggestions for applying the information to practice; recommended avenues for research; and learning activities to provide experiences in health promotion activities and challenge the student to critically think about the chapter content. Last, an extensive reference list is available at the end of each chapter, and relevant websites are included throughout the book.

The book is ideally suited for undergraduate students in nursing and health promotion, graduate students in advanced practice programs, including the DNP, and nurses and other health care professionals who practice in health promotion settings.

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Our sincere appreciation is also extended to many persons at Pearson who have supported us in completing this revision. We are especially appreciative of Ashley Dodge, who guided the revision of the eighth edition, and Neha Sharma and Cheena Chopra at Noida, India, who worked closely with us during the final preparation and production stages. Neha's sensitivity to the stressors of writing and deadlines, and both Neha's and Cheena's expertise and attention to detail are sincerely appreciated. Last, we acknowledge the reviewers who provided valuable feedback on several chapters for this edition.

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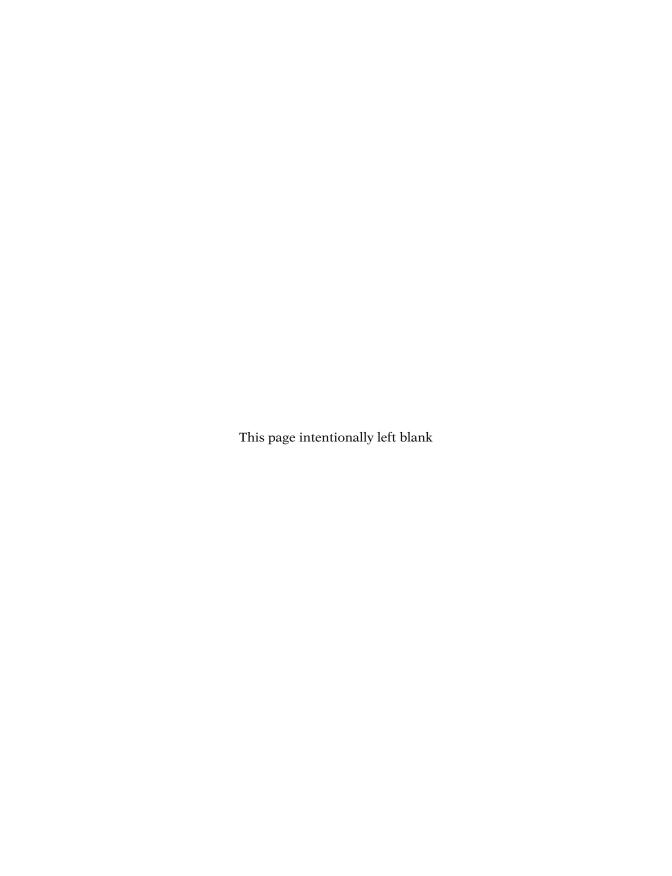
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INTRODUCTION

Health Promotion in a Changing Social and Digital Environment

The rapid expansion of digital technologies, along with rising health care costs, increasing population diversity, and persistent health inequities, has moved the need for health care reform and health promotion to center stage. Dramatic advances have occurred in health and health care over the past century, mainly due to public health efforts and new medical technologies. However, the health care system in the United States is no longer the best in the world, and persistent health care inequities have resulted in declining health for many Americans. The need to promote health brings both opportunities and challenges, as culturally diverse individuals and their social and physical environments must be addressed.

HEALTH EXPENDITURES AND HEALTH IN THE UNITED STATES

Expenditures for health care in the United States are higher than any other high-income country in the world, and were before the Affordable Care Act (Dieleman et al., 2016). In spite of the amount of money spent on health care, of 35 industrialized countries, the United States reports the highest child and maternal mortality rates, homicides, body mass index, sexually transmitted diseases, and major chronic diseases, including diabetes, ischemic heart disease, and chronic lung disease. Although the projected life expectancy is predicted to increase in most countries by 2030, life expectancy gains for the United States are projected to be one of the lowest. In addition, the United States is the first country to experience a reversal of height in adulthood, which is associated with greater longevity (Kontis et al., 2017). These findings have been described as the American "health care paradox," as the large number of dollars spent on health care in this country has not resulted in better health and longevity, compared to other countries (Bradley, Sipsma, & Taylor, 2017).

How health care dollars are spent matters. Countries projected to have greater longevity have higher ratios of social service to health care spending to address the social determinants of health. The ratio of social service to health care spending in the United States is the lowest of all 13 high-income countries, and the United States is the only one of the 13 countries without universal health coverage. In 2013, the second highest health care spending in the United States was for chronic illnesses, such as diabetes, ischemic heart disease, chronic lung disease, and cerebrovascular disease, all conditions with modifiable lifestyle factors. Pharmaceutical costs were highest for hyperlipidemia and hypertension, two risk factors that can frequently be reduced with lifestyle change. Most of public health spending went to manage communicable diseases, with little allocation to the promotion of healthy lifestyles (Dieleman et al., 2016).

HEALTH AND THE SOCIAL ENVIRONMENT

Where people live also determines their health. The contributions of the social, economic, and environmental conditions of communities to health and longevity are no longer questioned. Longevity increases with income. In research reported in 2016, a longevity difference of 15 years for men and 10 years for women was observed in persons who were in the top 1% income bracket compared to persons in the bottom 1%, and this inequality has increased over the past 12 years (Chetty et al., 2016). Geographic differences in longevity in low-income persons were observed; low-income persons who live in affluent cities have greater life expectancies that those who live in less affluent cities. Affluent cities are more likely to provide public services for all its citizens than poorer cities.

The role of social determinants in health was recognized in the *Healthy People 2020* goals; two overarching goals in the proposed *Healthy People 2030* framework are to achieve health equity for all and eliminate disparities, and to create social and physical environments that promote attainment of health and well-being for all (Office of Disease Prevention and Health Promotion, 2017).

THE SOCIAL ENVIRONMENT AND A CULTURE OF HEALTH

In 2010, the Robert Wood Johnson Foundation (RWJF) developed a long-term vision for a culture of health in all communities (Robert Wood Johnson Foundation & RAND Corporation, 2015). The major outcome of the culture of health action framework is improved population health, well-being, and equity. Priority areas include interventions to develop healthy children, increase access to affordable care, and address components of social and built environments that promote health.

Creating a culture of health presents opportunities for nurses who incorporate health promotion in their practice. Expanded skills, knowledge, and innovative practice models are required to integrate the social determinants of health into health promotion (Denham, 2017). Knowledge that promotes communication, collaboration, and leadership to foster community engagement, partnerships, and empowerment will enable nurses to improve the health of individuals in diverse communities. Becoming culturally competent and gaining skills to promote health literacy are also necessary. Interdisciplinary teams are essential to building a culture of health in a community, so nurses should also possess skills needed to work as a team member in a community and be able to provide team leadership.