Wellness module for medical teachers: A pilot study

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Categories: Teachers/Trainers (including Faculty Development)

Received: 05/12/2017
Published: 12/12/2017

Abstract

Background

Health promotion and disease prevention should be facilitated at workplace by advocating a healthy diet and physical activity. In view of many lifestyle disorders health professionals also need to give attention to improve their health behavior.

Behavior change plan have been effective in achieving this goal however, it has not been investigated for healthcare professionals.

Therefore, wellness module was developed and evaluated regarding its effectiveness in promoting health behavior.

Method

Total sample size is 30 (10 from medical, dental and physiotherapy). 24 responded (response rate 80%). A format for wellness was circulated amongst them and their pre and post test scores were recorded. Qualitative evaluation was done by semi-structured interviews of participants.

Results

Out of 30, 24 faculty responded for follow up (response rate 80%). Wellness goals : 13 physical fitness, 8-nutrition, 2-recreation and 1- safety. Self reported progress showed that 85% achieved target completely and 15% partially.

Themes from semi-structured interviews: were barriers for achieving target are lack of time, laziness/ apathy, temptations, sickness, injury/pain. Behaviors reported as important towards goal attainment were time management, feedback partner, self control, visual cues. Benefits of the BCP as reported by participants were increased stamina, feeling of well being.

Conclusion
Wellness module involving behavior change plan was well received by faculty and effective in promoting positive health behavior.

**Keywords:** wellness

**Background**

Researchers suggest that personal behaviors cause more than 50% of illnesses. With lifestyle behavioral choices contributing to a significant proportion of chronic diseases globally, evidence-based strategies to improve behavioral risk factors such as healthier eating and regular physical activity should be considered in a variety of settings especially for healthcare professionals involved in teaching\(^1\).\(^2\).

Hence this study was aimed to evaluate a behavior change plan (BCP) initiative to improve personal health amongst medical teachers.

**Method**

Total sample size is 30 (10 from medical, dental and physiotherapy). 24 responded (response rate 80%).

A sensitizing session for faculty from medical, dental and physiotherapy college was conducted first. Contents were:

1. Concept of wellness and its significance
2. Different areas of wellness
3. BCP and how to implement it
4. Wellness template

A format for wellness was circulated amongst them\(^1\). They were asked to submit it after careful consideration to the area of wellness chosen. Follow up for 1 month and then 2 month score was recorded in the chosen area.

One group pre and posttest design was utilized to conduct quantitative analysis of reported BCP success and qualitative evaluation was done by semi-structured interviews of participants' perspectives of obstacles, behaviors important towards goal attainment and the benefits of the BCP. Goal achievement data was tabulated for each focus area, and report narratives distilled into common themes at the end of 2 months.

**Results**

Out of 30, 24 faculty responded for follow up (response rate 80%). Wellness goals: 13 physical fitness, 8-nutrition, 2-recreation and 1-safety.

| S no. | Mean score Pre-test | Mean score Post test (2 months) |
|-------|---------------------|---------------------------------|
|       |                     |                                 |
Themes from semi-structured interviews:

Participants mentioned various barriers for achieving target viz., lack of time, laziness/apathy, temptations, sickness, injury/pain.

Amongst the behaviors reported as important towards goal attainment were time management, feedback partner, self control, visual cues.

Benefits of the BCP as reported by participants were increased stamina, feeling of well being.

**Discussion**

In today's modern lifestyle people frequently engage in multiple unhealthy behaviors with potential for negative health consequences like illness, injury, pain, disability and early death. Citing extensive global evidence from laboratory, clinical and population based studies, the WHO (WHO, 2014 a) warns of 'looming epidemics of heart disease, stroke, cancer, other chronic diseases'. Largely responsible for most leading chronic diseases among men and women in all regions studies are 3 principle modifiable risk factors – unhealthy diet, excessive energy intake, inactivity and tobacco use. (WHO 2014b).

Healthcare professionals are at increased risk as their work area and style makes them more prone to various ailments. Many times proper diet, physical exercise and adequate rest are compromised owing to hectic work schedules. Even if they know the drawbacks of such perilous lifestyle, the remedial actions are limited to very few who can master the art of time management and prioritizing personal and work life.

Workplace has been recognized internationally as appropriate setting for health promotion and disease prevention. Therefore, this module was planned and executed to motivate healthcare professionals to maintain a healthy lifestyle by modifying behaviors using BCP in stepwise manner. The ultimate aim was to convert them in self directed learners who will continue to progress on chosen path.

BCPs help to gain knowledge and skills essential to wellbeing and learn to use it more effectively, ask and answer questions and make sound judgments. Being aware of general principles of behavior change is effective for multiple risk adjustments, increased confidence to modify risk behavior for which there is low motivation to change and may lead to overall healthful lifestyle change. BCPs are grounded in behavior therapy, self monitoring and are often framed by principles from the trans-theoretical model (TTM) for behavior change. Describing fluid steps, the model's stages are pre-contemplation (not...
recognizing the need for / having an interest in change), contemplation (thinking about change), preparation (planning for change), action (adopting new habits) and maintenance (ongoing new healthier behavior)\(^1\),\(^2\).

In order to enhance desirable behavior we should plan a strategy. In this intervention our main aim was to make participants aware of BCP and help them to develop a strategy to achieve targets systematically. Whether they completed targets fully or not was secondary.

This was evident from themes that emerged from the interviews. All agreed that personal Wellness is important factor for all healthcare professionals and in our routine work and personal life we do not get enough time for Personal Wellness Participants could identify the barriers and facilitating factors for wellness progress. Wellness module was necessary and effective for self motivation and progress.

**Conclusion and recommendation**

Considering the importance of healthy lifestyle in disease prevention, the present module served as a tool to motivate faculty on wellness targets.

**Take Home Messages**

Healthcare professionals including medical teachers have to face a lot of stress and work pressure which can affect their health. It is essential that they engage to improve wellness by changing their behaviour.

This module can be considered as an initiative to promote wellness through integrated behaviour change plan.

**Notes On Contributors**

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**Acknowledgements**

**Bibliography/References**

1. Crossman, Joanne M. "Planning, practising and prioritising wellness through an integrative behaviour change plan." Health Education Journal 75.7 (2016): 823-832.

   [https://doi.org/10.1177/0017896916629171](https://doi.org/10.1177/0017896916629171)

2. Crossman, Joanne M. "Using behavior change plans to make wellness an informed priority: Health education meets general education." (2015).
3. World Health Organization (WHO) (2014a) Chronic Diseases and Health Promotion. Part Two: The Urgent Need for Action. Chronic Diseases: Causes and Health Impacts. Available at: http://www.who.int/chp/chronic_disease_report/part2_ch1/en/index1.html

4. World Health Organization (WHO) (2014b) Chronic Diseases and Health Promotion. Part Two: The Urgent Need for Action, The Causes of Chronic Diseases. Available at: http://www.who.int/chp/chronic_disease_report/part2_ch1/en/index12.html

5. Whitehead D1. Workplace health promotion: the role and responsibility of health care managers. J Nurs Manag. 2006 Jan;14(1):59-68.

https://doi.org/10.1111/j.1365-2934.2005.00599.x

Appendices

Declarations

The author has declared that there are no conflicts of interest.

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