Developing Healthy Habits and Skills Through Health Literacy eBooks

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1.1 Why? Design Solutions?

Identified Problems with a Shift to Solutions

○ Need for a skill-based curriculum for health, not only a fact-based approach;
○ Need for health literacy to become the “new” health education because of the No Child Left Behind (2002) policy to teach children reading (and writing) skills. And now the revised ESSA policy (Every Student Succeeds Act, 2015) shifts regulatory power from the federal level to the states to regulate school performance with the potential “to put education policies into place that connect health and learning” (healthyschoolscampaign.org) and “focus on the whole child by acknowledging the importance of mental health and wellness”; and
○ Need to focus on the “sine qua non” of healthy lifestyles - daily patterns, health habits, and routines - with the essential motivating beliefs, reasoned actions, and intentions “to do” those Habits of Health and Habits of Mind (Ubbes, 2008).
Hands as Symbolic Representation

Habits of Health and Habits of Mind model.
All rights reserved, ©V.A. Ubbes in Educating for Health (Human Kinetics, 2008), p. 113.
1.2 Other Design Solutions

- Need for social modeling of skills even the thinking and talking about health AND the doing of healthy habits in the form of behaviors. Hence, realistic action photographs and declarative skill-based scripts were integrated.

- Need for a positive-frame message design instead of a negative-frame message design which is prevalent in the daily media.

- How-to videos or DVDs go too fast when demonstrating the multiple “thinking and doing” plans that children will practice to do “just one” healthy habit, so self-paced learning of health skills and literacy skills becomes a key feature of the design. Hence, we wanted the developmental learner to control the learning pace.
1.3 Phase 1 to Phase 2 Design Changes

I decide to chew sugar-free gum with my brothers because it is better for our teeth.

I decide to keep my teeth healthy by drinking milk every morning with my brother.

Improved Version
Who?
Students at different grade levels based on the National Health Education Standards:
- PreK students
- Grades 1 to 2 students
- Grades 3 to 5 students
- Grades 6 to 8 students
- Grades 9 to 12 students
- University students

Where?
- Classroom to Home Interactions
- School-Based Health Clinics
- Community Organizations and Clinics
3. What?

Background Information
- Focus of Literacy?
- Innovation?
- Alignment to Healthy People 2020?
Background Information

Focus: Functional Health Literacy

Innovation: Oral Health Literacy for emergent and low literacy audiences

Whereas

• The World Health Organization states that health literacy is the number one predictor of health status and life quality;

• Healthy People 2020 (U.S. Department of Health and Human Services) shows oral health as one of the top 12 indicators of our nation’s health with the concern that only 44.5% (age adjusted) of people age 2 and older had a dental visit in the past year [and evidence shows that heart disease and diabetes starts in the mouth].
4. Habit of Mind? Skill
2. Habit of Health? Behavior
3. Dyads
4. Visuals?
5. Script?
6. Theory - sequential order
   - Self efficacy belief = 1
   - Health outcome beliefs = 3
   - Normative beliefs = 3
   - Self efficacy belief = 1
   - Interactive health literacy = 1
Habits of Health and Habits of Mind model.
All rights reserved, © V.A. Ubbes in *Educating for Health* (Human Kinetics, 2008), p. 113.
4. How?

**Design Process**

1. Which Habit of Mind? Skill
2. Which Habit of Health? Behavior
3. Form Dyads: Cooperative Learning
4. Locate Visuals?
5. Write Script?
6. Alignment of the Script to the Integrative Theory of Behavioral Prediction
   - Self efficacy belief = 1
   - Health outcome belief = 3
   - Normative beliefs = 3
   - Self efficacy belief = 1
   - Interactive health literacy = 1
Making Decisions to Have Fun With My Oral Health
By Alicia Graf & Valerie A. Ubbes
I believe that I can prevent infections in my teeth by deciding to practice my daily dental routine.
I decide to brush my teeth in the morning and before bedtime, so I can prevent cavities in my teeth.
I decide to brush to a song for 2 minutes, so I can have fun while cleaning my teeth, tongue, and gums!
I decide to brush my teeth, tongue, and gums with a small amount of toothpaste, so that my mouth will be really clean.
I decide to brush my teeth right after I eat cereal with my brother, so we can get rid of sugar that damages our teeth.
I decide to show off my teeth by smiling, because I want my parents to see that I can take charge of my own oral health.
I decide to be a role model to my sister, so I can show her how well I take care of my teeth every single day!
I believe that I can make daily **decisions** to brush my teeth and rinse them with water, so that cavities do not form in my mouth.
I’ve made the fun **decision** to clean my teeth, tongue, and gums. How about you? Will you **decide** to have fun with your oral health too?
4. How?

1. Habit of Mind?
   Skill

2. Habit of Health?
   Behavior

3. Dyads

4. Visuals?

5. Script?

6. Theory - sequential order
   • Self efficacy belief = 1
   • Health outcome beliefs = 3
   • Normative beliefs = 3
   • Self efficacy belief = 1
   • Interactive health literacy = 1
Any Questions?

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References

Digital Literacy Partnership Website with 3 Databases to promote literacy, health, & technology.
http://dlp.lib.miamioh.edu

