Latent Universities’ Opportunities in the Prevention and Control of Non-Communicable Diseases in Low and Middle Income Countries

Sophonie Ndahayo*

Independent Research, Monze, Zambia

*Corresponding Author: Sophonie Ndahayo, Independent Research, Monze, Zambia.

Received: March 23, 2020; Published: January 30, 2020

Abstract

Universities have the potential to promote health to students, employees and surround communities. Unfortunately, despite this fact, some students, even university workers engage in health-risky-behaviours, which predispose them to many diseases most of which are preventable. Adopting and implementing a holistic health promotion policy and public health interventions can control a good number of health-related problems among the said population; in low and middle income countries, especially the most affected sub-Saharan Africa. This will greatly enhance universities’ potentials and contributions to harness a sustainable health development within the institutions and beyond their boundaries. Therefore, this mini review advocates for “health promoting universities” concept among all institutions of higher learning, even in lower levels by streamlining health promotion content and activities throughout all teaching, learning and research.

Keywords: University; Health Promotion; Sustainable Development

Introduction

Universities are large institutions in which people learn and work, socialize and make use of a wide range of services including accommodation and catering just to name a few examples. Furthermore, while at university, students adopt and internalise values that can be health-promoting or health-destructive. Consequently, universities offer a great opportunity to significantly and positively impact the lives and health of their employees and students. This can be done through strategic health interventions that influence healthy practices such as adopting enough rest, drinking clean and pure water, eating healthy diet, and engaging in regular physical activities, which are essential in the prevention and control of non-communicable diseases [1,2].

Non-communicable diseases (NCDs) mortality-related rates are increasing, especially in low and middle-income countries [3] and over half are associated with lifestyle behaviours that begin or are strengthened during adolescence, which include tobacco and alcohol use, poor eating habits, and lack or inadequate physical activities [4]. Global trends indicate that these NCD-related behaviours are on the rise among young people, and that they establish patterns of behaviour that persist throughout life and are often hard to modify, once established in adulthood. In 2011, the World Health Assembly [5] endorsed a resolution calling upon member states to address the needs of youth in the context of NCDs [3], because, there is enough evidence that shows adolescence as a crucial period in the development of adult NCDs. Another measure, which can be used in learning institutions, is the implementation of policies that affect day-to-day procedures such as scheduling the student programmes and providing leisure facilities.

Furthermore, universities are hypothetically to promote reflexivity (the capacity to look at their own practices and activities with a critical eye and with a view to changing them if not ethical or in line with promotion of educational values). Though, the core businesses of universities are teaching and research, through their teaching activities, academics may for example, be encouraged to ensure that health-related research finds its way to student audiences and hence to the community at large, when learners leave the university or through publication in various media platforms. Health-related research and health issues may be a streamlined in some curricula, but where this is not the case, health research and health topics could be used to illustrate themes and issues, thus raising health awareness.

Citation: Sophonie Ndahayo. “Latent Universities’ Opportunities in the Prevention and Control of Non-Communicable Diseases in Low and Middle Income Countries”. EC Emergency Medicine and Critical Care 5.2 (2021): 65-68.
For example, learners studying non-health related programmes such as education, law, humanities, politics or other subjects could be introduced to health matters in ways relevant to their major subject of study. This incorporation of health into the curriculum may encourage graduates in various areas of study to go into their professions of specialisation with greater awareness of the potential health effects of their individual and collective lifestyle.

Almost all institutions of higher learning, universities included, have some kind of health-related research underway, and in some, it is a major focus of research activity. Such research could be usefully considered in terms of health promotion and diseases prevention interventions. Alternatively, research activity may combine various disciplines working together so that the health aspect is brought on board, in relation to research questions and methods. One combination could include agriculture, economics, animal and human nutritionists, educationists, psychologists, and or marketing specialists just to name a few. Not all research has the potential to shape health experience in one way or another, but it is important that all institutions of higher learning join the health promoting universities movement that is very operational in Europe and some other parts of the world and has positively brought change in the prevention and control of health problems affecting students, staff and communities.

The above concept requires challenging the publications in universities towards health and its determinants. It has been observed that a good number of people even from university cycles think that, if it is not medical and it is not about the health services, then it cannot be health research, which is not always true. In order to increase universities’ contribution to health promotion and disease prevention, researchers should be encouraged to think about the health implications of their research, which should be incorporated into their presentations and disseminated widely to reach as many at risk people as possible.

Institutions of higher learning provide an environment in which students are not only formally educated but develop personally and socially at a significant time in their lives. The idea was emphasised by Lee., et al [6] as follows: “the concept of Health promoting school initiated by World Health Organization [7] aims to move beyond individual behavioural change and to consider organisational structure change such as improvement of the school’s physical and social environment”. This development has insightful effects not only during learners’ time in higher education but during the rest of their lives in terms of the choices they make, values adopted, priorities set while at school, at their workplaces, homes and communities.

Characteristics of health promoting universities

A health-promoting university support healthy personal and social development of learners through encouraging students to discover and explore their potential to maintain and promote health by facilitating them in making healthy choices and inspiring them to explore and experiment without harm. This impact on students goes beyond the confines of the institution and reaches the community at large. The university potential to influence healthy behaviours can contribute to sustainable development of nations and positively affect the local social, economic, cultural and recreational activities. Universities have an opportunity to be role models of good practices in relation to health and, using their influence and expertise, can become advocates for developing healthy public health policies and practice at local, national and international levels. Of all healthy settings, universities should be among the leaders in seeing change implemented. Furthermore, AUN-Health Promotion Network Mahidol University [8], Thailand, 2017 said that the three interrelated functions of universities (education, research and public service) are the most appropriate means to strengthen the five (5) health promotion directions proposed in the Ottawa Charter: build healthy public policy, create supportive environments, strengthen community actions, develop personal skills, and reorient health services.

Health promotion has become one of the main public health priorities since the development and dissemination of the Ottawa Charter in 1986 [9]. The improvement of health literacy, health behavioural change, creating a supportive physical and social environment to be more conducive to health should be the focus of child and adolescent public health. The concept of health promoting school initiated by
World Health Organization aims to move beyond individual behavioural change and to consider organisational structure change such as improvement of the school’s physical and social environment [6]. Though the higher education sector has the potential for the promotion of health and well-being, however, it is saddening to discover that parallel to the developments achieved in diagnosis, treatment of many of the communicable diseases, much health challenges have emerged that do not spare children, adolescents, adults, and university students included.

**Conclusion**

Murphy, et al. [10] found that students engage in risky health-related behaviours (HRB) that influence their current and future health status. Furthermore, unhealthy or (HRB) are primary causes of premature morbidity and mortality [11-13], physical inactivity, alcohol abuse, smoking tobacco, and poor dietary behaviours are suggested as the four main contributors to non-communicable diseases such as hypertension, diabetes and certain cancer [11]. There is a risk that individuals will engage in risky HRB such as above, including illicit drug use, as they gain increased independence as they transition from high school to university. Thus, there is an urgent need to prevent and control such behaviours through university policies and provision of a health promoting conducive environment. Healthy school policies include: healthy eating, safe school, harmonious school, and active school. School’s physical environment: school ensures students’ safety whenever students are under their care; school has a system in place for the management of emergencies and natural disasters and ensure that all relevant personnel being informed; school ensures fire safety; school ensure a safe and healthy workplace for staff. School’s social environment: school has a system for the prevention, and management of unacceptable behaviour in school both among students and encourages staff to set personal examples for cultivating students’ positive actions [6]. Therefore, it is imperative that all higher learning institutions, universities adopt and implement the concept and policy of healthy promoting universities, especially in low and middle income countries [14-21].

**Bibliography**

2. University of central Lancashire (uclan).


15. "Long hours, little thanks - a survey of the use of time by full-time academic and related staff in the traditional UK universities". London, Association of University Teachers (1994).


Volume 5 Issue 2 February 2021
©All rights reserved by Sophonie Ndahayo.

Citation: Sophonie Ndahayo. “Latent Universities’ Opportunities in the Prevention and Control of Non-Communicable Diseases in Low and Middle Income Countries”. EC Emergency Medicine and Critical Care 5.2 (2021): 65-68.