

A Study On The Importance Of Basic Health Education To Introduce In Teacher Training Programmes In Assam

Md. Aynul Bari¹ Prof. Gayatree Goswamee²

¹Assistant Professor, Dept. PQH School of Education, University of Science and Technology Meghalaya ORCID: 0000-0002-4663-4688

Email: aynulbari1986@gmail.com / aynulbari@ustm.ac.in

²Dean, PQH School of Education,

University of Science and Technology Meghalaya Email: gayatreegoswamee17@gmail.com

Cite this paper as: Md. Aynul Bari, Prof. Gayatree Goswamee (2024) A Study On The Importance Of Basic Health Education To Introduce In Teacher Training Programmes In Assam. *Frontiers in Health Informatics*, 13 (3), 9951-9962

ABSTRACT

This study investigates the necessity of incorporating basic health education into teacher training programmes in Assam. Recognizing teachers' pivotal role in shaping students' health behaviors and knowledge, the research aims to highlight the importance of equipping future educators with essential health education skills. Through a mixed-methods approach, including surveys and interviews with teacher trainees and educators, the study examines current health knowledge levels and perceptions regarding the integration of health education in curricula. Findings reveal significant gaps in health awareness among teacher trainees, emphasizing the need for structured health education modules. The research concludes that integrating basic health education into teacher training can enhance teachers' ability to promote health-conscious behaviors among students, ultimately contributing to improved public health outcomes in Assam.

Keywords: Basic Health Education, Teacher Training, Assam, Health Awareness, Public Health, Curriculum Development, Education Policy.

INTRODUCTION

Health education is a fundamental component of societal well-being, particularly in regions with limited access to healthcare services, such as Assam. In this northeastern state of India, where a significant portion of the population lives in rural areas, it is vital to provide communities with basic health awareness. Teachers, as educators and community leaders, are well-positioned to serve as conduits for disseminating essential health information. Integrating Basic Health Education into teacher training programmes in Assam is an essential step toward improving the overall health literacy of communities. This initiative can not only benefit the students but also help teachers become advocates for better health practices in the broader community, especially in underserved areas.

The Need for Basic Health Education: Health challenges today are varied, ranging from communicable diseases such as HIV/AIDS to non-communicable, lifestyle-induced conditions like cancer and kidney diseases. Communities in Assam, particularly in rural areas, are often unaware of the early symptoms of these diseases, leading to delayed treatment and a higher incidence of preventable conditions. Introducing a Basic Health

Education module into teacher training programmes will help bridge this gap. Teachers can use this knowledge to identify early warning signs of illness, promote healthier living, and provide immediate emergency care when necessary.

According to studies, health education in schools has proven to be a powerful tool for promoting health and wellness within communities (Tones & Tilford, 2001). By teaching basic health principles to teachers, we can effectively reach not only students but also their families, as these teachers often serve as trusted figures within their communities (Nutbeam, 2000).

Area of Basic Health Education in Teacher Training Programme

1. **Basic Emergency Treatment:** Teachers should be trained to provide first aid for common school-based injuries, such as burns, wounds, and fainting episodes. In rural Assam, where healthcare facilities may be hours away, teachers trained in basic first aid can provide immediate care that could be life-saving (Sharma, 2012). This knowledge is crucial in schools with limited access to medical resources.
2. **Recognizing Symptoms of Diseases:** Teachers should be able to recognize the early symptoms of common illnesses such as malaria, typhoid, and diabetes. This ability can make teachers valuable first responders in communities where healthcare workers may not be immediately available (Singh et al., 2020). By guiding students or parents to seek professional medical advice in a timely manner, teachers can help reduce the risk of severe illness or misdiagnosis.
3. **Nutritional Information:** Promoting proper nutrition through education can address the malnutrition crisis in Assam, which disproportionately affects rural communities (Kumar et al., 2016). Teachers who are equipped with knowledge about balanced diets and the health benefits of fruits and vegetables can encourage healthier eating habits among their students, and by extension, their families.
4. **Understanding Major Health Issues:** Health education should include lessons on the causes and prevention of major diseases, such as HIV, cancer, and liver disease. Awareness of risky behaviors and environmental factors that contribute to these conditions can significantly lower their prevalence in rural Assam (World Health Organization, 2019). Teachers can act as advocates for healthier lifestyle choices, reducing the community's vulnerability to these diseases.
5. **Identifying Fake Medicine and Wrong Diagnoses:** The presence of counterfeit drugs in rural India, including Assam, is a major public health concern (Cockburn et al., 2005). Teachers who are trained to identify fake medicines and educate others about the dangers of incorrect diagnoses can help mitigate this issue, improving community health outcomes.
6. **Understanding Side Effects of Medication:** Educating teachers on the side effects of commonly used medications can prevent their misuse, a common problem in regions where access to medical professionals is limited (Patel & Shah, 2017). Teachers can guide students and parents on how to safely use medication, thereby reducing the risk of complications from improper drug use.

The Role of Teachers as Health Advocates: By equipping teachers with basic health education, they can serve as health advocates within their schools and communities. Studies have shown that health education in schools can lead to positive behavioral changes in students and their families, ultimately reducing the prevalence of

preventable diseases (St. Leger, 2001). In Assam, where healthcare access is often limited, teachers who are knowledgeable about health can significantly improve the quality of life for those in their communities.

Teachers' roles extend beyond the classroom—they are influential figures in shaping the behavior and attitudes of the next generation. By including health education in teacher training programmes, Assam can address long-standing public health challenges, reduce healthcare disparities, and promote a healthier future for its citizens.

Introducing Basic Health Education into teacher training programmes in Assam is an urgent and necessary step. By providing teachers with essential health knowledge, we can empower them to serve not only as educators but also as health advocates in their communities. This initiative has the potential to address critical health issues such as the misuse of medicines, delayed diagnoses, and the spread of preventable diseases. Moreover, it will cultivate a generation of students who are more informed about their health, ultimately contributing to the development of healthier communities across Assam.

RATIONAL OF THE STUDY

The rationale for this study is rooted in the recognition that teachers are not only educators but also role models and influencers in their students' lives. In Assam, where various health issues persist, there is a compelling need to ensure that teachers are equipped with the necessary health knowledge to guide students in making informed health choices.

Current teacher training programmes in Assam often overlook health education, resulting in a lack of preparedness among teachers to address health-related topics. This gap is concerning, especially in a state where educational success is closely linked to students' physical and mental well-being. By integrating basic health education into the training curriculum, teachers can effectively impart crucial health information and promote healthier lifestyles among their students.

Furthermore, the rapid changes in health trends, particularly in the wake of the COVID-19 pandemic, underscore the need for educators to be knowledgeable about health issues. This study aims to highlight the urgent necessity for teacher training programmes to adapt and evolve, incorporating health education as a core component.

Additionally, the findings of this study can serve as a catalyst for collaboration between educational institutions, health organizations, and government agencies. By fostering partnerships, the study can contribute to creating a more integrated approach to health education, ensuring that teachers receive comprehensive training that reflects the current health landscape in Assam.

OBJECTIVES OF THE STUDY

1. To assess the current level of health knowledge among teacher trainees in Assam.
2. To evaluate the perceptions of teacher trainees regarding the integration of basic health education into their training programmes.

RESEARCH QUESTION

1. What is the current level of health knowledge among teacher trainees in Assam, and how does it vary by demographic factors such as age, gender, and educational background?

2. What are the perceptions of teacher trainees in Assam regarding the necessity and effectiveness of integrating basic health education into their teacher training programs?

REVIEW OF LITERATURE

Hommel, M. (2024). The study examines vocational interest profiles of students in TVET teacher training programs in Bavaria to address the teacher shortage. Using Holland's interest theory, the research found that students' vocational interests are weakly differentiated, suggesting limited career readiness. Many students, especially from rural areas, chose the program due to its local availability, highlighting the importance of regional accessibility in recruitment. The study suggests expanding rural teacher training programs to attract more candidates and emphasizes the need for stronger career orientation during secondary education to align students' interests with career paths.

R. Poornima and D. Venkataganesh (2024), "*Teacher-Educators' Dialogues on Initial Teacher Training Programmes in Norway with Special Reference to Inclusive Education,*" explores how Norwegian teacher training programs integrate inclusive education. Focusing on the Stavanger region, interviews with teacher educators from the University of Stavanger reveal key insights into curriculum content, methodologies, and practical components that support inclusive education. The study effectively highlights the alignment of Norway's teacher education with inclusive ideologies, providing valuable perspectives on how pre-service teachers are prepared for inclusive classrooms. Its potential to inform more inclusive teacher education programs in India adds to its significance. However, the research is limited to a single region and institution, leaving room for broader studies across Norway or other countries.

RESEARCH GAP

The review of existing literature reveals some valuable insights into the teacher training field but also highlights significant research gaps that need to be addressed concerning Basic Health Education in teacher training programs in Assam. The existing research highlights the importance of vocational and inclusive education in teacher training, but it fails to address the pressing need for health education in regions like Assam. There is a significant gap in understanding how basic health education can be effectively integrated into teacher training programs, particularly in rural areas where health challenges are more acute. Future research should focus on developing region-specific health education curricula and practical training components that can empower teachers to play a proactive role in improving public health outcomes in Assam.

METHODOLOGY

The study employs a mixed-methods research design, utilizing both quantitative and qualitative approaches. A survey instrument has been developed to assess the health knowledge and perceptions of teacher trainees in Assam. The survey has included Yes/No questions, dichotomous items and opinion

Additionally, questionnaire and semi-structured interviews have been conducted with a sample of teacher trainees and educators to gain deeper insights into their experiences and attitudes toward health education. Data has been collected from multiple teacher training institutions across Assam to ensure a representative sample.

DELIMITATION OF THE STUDY

The present study, titled "*A Study on the Importance of Basic Health Education to Introduce in Teacher Training Programmes in Assam,*" is delimited to specific aspects for a focused investigation. The following delimitations have been set:

1. Area of Study: The study is confined to two types of teacher training institutions in Assam: District Institute of Education and Training (DIET): A total of 23 institutions and College of Teacher Education (CTE): A total of 8 institutions.
2. Target Population: Student Teachers in DIETs, there are 6,900 student teachers, in CTEs, there are 1,600 student teachers and a sample of 10% of student teachers will be selected, leading to a total sample size of 690 student teachers from DIETs and 160 student teachers from CTEs.

Teacher Educators: in DIETs, there are 345 teacher educators, in CTEs, there are 136 teacher educators and a sample of 10% of teacher educators will be selected, leading to a total sample size of 35 teacher educators from DIETs and 14 from CTEs. Principals: The study includes all 23 principals from DIETs and 8 principals from CTEs.

RESULTS AND DISCUSSION:

Quantitative data will be analyzed using statistical software to calculate descriptive statistics, correlations, and significance levels. Qualitative data from interviews will be transcribed and analyzed thematically to identify common patterns and insights regarding health education in teacher training.

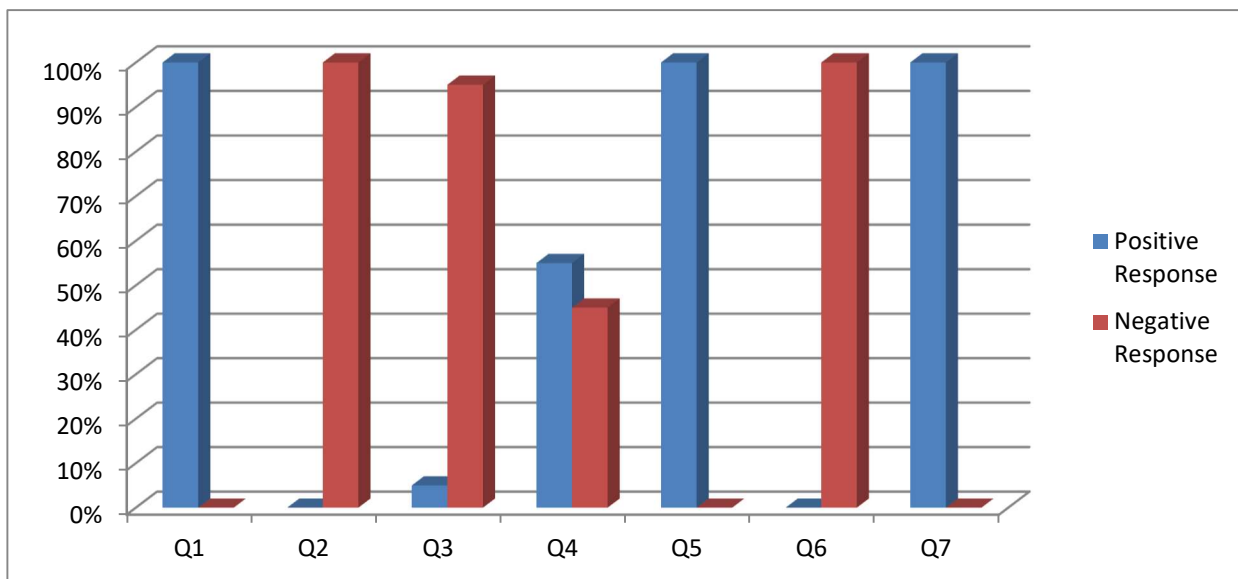
ANALYSIS OF OBJECTIVE: 1

Table: 01 Current Level of Health Knowledge among Teacher Trainees in Assam

Items	Positive Response	Negative Response
Basic Health Education should be Included in Teacher Training Programs	100%	0%
Received any formal training in basic health education during your teacher training	0%	100%
Aware of the common health issues affecting children in Assam	5%	95%
Aware of the common health issues affecting children globally	55%	45%
Knowledge of Health Education is Important for a Teacher's Role	100%	0%
Ability to Identify Signs of Common Health Problems in Students	0%	100%
Demand for Training Programs on Health Education as Part of Teacher Training	100%	0%

Source: Primary Data

Figure: 1 showing the graphical presentation of Current Level of Health Knowledge among Teacher Trainees in Assam



Source: Primary Data

From the above table: 1 and figure: 1 revealed that the (Q1) Basic Health Education Should be Included in Teacher Training Programs, respondents respond 100% positive response. All respondents believe that health education is essential within teacher training programs, highlighting a unanimous agreement on its importance in educational curricula. (Q2) Received any formal Training in Basic Health Education during your Teacher Training, respondents respond 100% negative responds. Despite the recognition of its importance, none of the respondents have received formal training in health education during their teacher training, indicating a significant gap between perceived importance and actual curriculum content. (Q3) Awareness of Common Health Issues Affecting Children in Assam, respondents responds 95% negative. A vast majority (95%) of teacher trainees lack awareness of the specific health issues affecting children in Assam, indicating a lack of exposure to relevant local health information. (Q4) Awareness of the Common Health Issues Affecting Children in Assam, respondents responds 55% Positive and 45% negative. The results here indicate that while more respondents are aware of broader health issues, a significant 45% remain unaware. This suggests an uneven distribution of health knowledge among trainees. (Q5) Knowledge of Health Education is Important for a Teacher's role, respondents respond 100% positive. Again, a unanimous response indicates that teacher trainees universally recognize the importance of health education in fulfilling their roles as teachers. (Q6) Ability to Identify Signs of Common Health Problems in Students, respondents responds 100% negative. This is a critical finding, as none of the teacher trainees feel confident in identifying common health problems in their students. It underscores a major gap in practical health knowledge and awareness. (Q7) Demand for Training Programs on Health Education as Part of Teacher Training, respondents respond's 100% positive. The demand for health education training is unanimous, suggesting that respondents are eager to improve their knowledge in this area and see it as an essential part of their teacher training.

INTERPRETATION

- All respondents agree that health education should be part of the teacher training curriculum.
- None of the respondents have received formal training, indicating a gap in the current curriculum.
- Majority of respondents are unaware of health issues affecting children in Assam, signaling a lack of awareness.
- More respondents are aware of global health issues, but 45% still lack awareness, indicating inconsistent knowledge.
- All respondents believe that health education is important for their role as teachers.
- None of the respondents feel confident in identifying common health problems, highlighting a critical gap in practical knowledge.
- All respondents express a demand for health education training in their teacher training programmes.

ANALYSIS OF OBJECTIVE 2

Objective 2: To evaluate the perceptions of teacher trainees regarding the importance of Basic Health Education in enhancing their professional effectiveness.

Health education plays a pivotal role in shaping the overall effectiveness of future educators. In teacher training programs, integrating basic health education is crucial as it equips trainees with the knowledge and skills needed to foster a healthy learning environment. This study aims to evaluate the perceptions of teacher trainees regarding the importance of basic health education in enhancing their professional effectiveness. By understanding how trainees view health education's relevance to their teaching roles, this research seeks to highlight the potential impact of health education on improving both instructional practices and student well-being. Through this evaluation, the study addresses how health education can contribute to developing well-rounded educators capable of addressing diverse student needs.

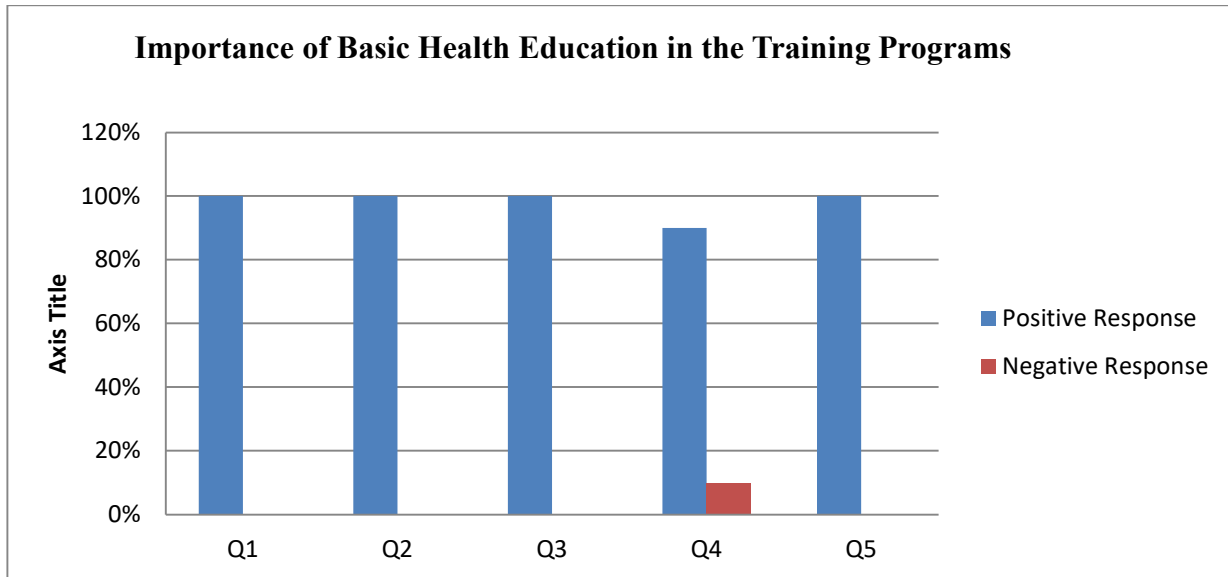
The following dichotomous questions were posed to assess this, and the response analysis is as follows:

Table: 2 Overview of the perceptions of teacher trainees regarding the importance of basic health education in their training programs

Items	Positive Response	Negative Response
Program would enhance your teaching effectiveness.	100%	0%
Importance of basic health education with your peers during training.	100%	0%
Basic health education is relevant to your future role as a teacher.	100%	0%
Require the inclusion of practical health education activities.	90%	10%
Knowledge of health education can help you address students' concerns.	100%	0%

Source: Primary data

Figure: 2 showing the Importance of Basic Health Education in the Training Programs



Source: Primary data

From the above table: 2 and figure: 2 found that the Q1: Program would enhance your teaching effectiveness, student teacher and teacher educator 100% positively responded. All respondents unanimously believe that incorporating basic health education into teacher training would enhance their teaching effectiveness. This suggests strong recognition of the role health education plays in fostering a holistic approach to teaching, improving both content delivery and student well-being.

In Q2: Importance of basic health education with your peers during your training, student teacher and teacher educators 100% positively respond. A unanimous agreement (100%) indicates that teacher trainees recognize the significance of discussing basic health education with their peers. This highlights the importance of collaborative learning and peer-based discussions in the context of health education, reinforcing its value in their professional training.

In Q3: Basic health education is relevant to your future role as a teacher found the respondent 100% positively respond. All respondents (100%) affirmed the relevance of basic health education to their future roles as teachers. This reflects a strong understanding among trainees that health knowledge is essential for effectively managing classroom dynamics and student welfare, pointing toward their readiness to incorporate health education in their professional responsibilities.

In Q4: Require the inclusion of practical health education activities in your training curriculum found that the respondents respond 90% positive. While 90% of the respondents support the inclusion of practical health education activities, 10% did not. The overwhelming support emphasizes the need for hands-on, practical experience in health education. However, the minority (10%) who are hesitant may indicate potential challenges

in implementing or understanding the practical aspects, suggesting an area that may require additional support or clarification in the curriculum.

In Q5: Knowledge of health education can help you address students' health-related concerns found that the respondents respond 100% positive. Every respondent (100%) agreed that knowledge of health education would enable them to address students' health-related concerns. This indicates that teacher trainees recognize the value of health education not only for their teaching effectiveness but also for fostering a supportive environment for students' physical and mental well-being.

INTERPRETATION:

- All respondents believe the program would enhance their teaching effectiveness, showing strong recognition of its value.
- Unanimous agreement on the importance of discussing health education with peers, emphasizing collaborative learning.
- All trainees agree that health education is highly relevant to their future role, reflecting readiness to apply it in classrooms.
- Most respondents support including practical activities, but 10% are hesitant, indicating potential challenges or areas needing clarification.
- Every respondent believes health education will help address students' health-related concerns, underscoring its importance in student welfare.

FINDINGS OF THE STUDY:

Findings of Objective: 1

- There is a consensus on the importance of integrating basic health education into teacher training programs, but a significant gap exists between this recognition and the actual content of their training.
- Almost all respondents lack the ability to identify common health problems in students, and most are unaware of health issues affecting children in Assam. This poses challenges in the classroom where teachers play a key role in identifying and addressing student health concerns.
- The demand for health education training is evident, as 100% of the respondents requested it, which indicates that the current teacher training curriculum is not adequately addressing health education.

Findings of objective: 2

The analysis of the responses related to the perceptions of teacher trainees regarding the importance of basic health education in enhancing their professional effectiveness revealed the following key insights:

1. All respondents (100%)—both student teachers and teacher educators—unanimously agreed that incorporating basic health education into teacher training would enhance their teaching effectiveness. This suggests a strong recognition of health education's role in fostering a holistic teaching approach, benefiting both content delivery and student well-being. The unanimous response reflects a widespread belief in the value of integrating health education into teacher preparation programs.

2. In response to the question regarding the importance of discussing basic health education with peers during training, 100% of the respondents agreed on its significance. This unanimous agreement highlights the importance of collaborative learning, suggesting that teacher trainees recognize peer discussions as a vital element in enriching their understanding and implementation of health education. Peer-based learning appears to play a crucial role in reinforcing the practical application of health-related knowledge.
3. When asked about the relevance of basic health education to their future roles as teachers, all respondents (100%) affirmed its importance. This reflects a deep understanding among teacher trainees that basic health education is essential for effectively managing classroom dynamics and addressing student welfare. The unanimous positive response indicates that the trainees are well-prepared and willing to incorporate health education into their future professional responsibilities.
4. In response to whether practical health education activities should be included in their training curriculum, 90% of respondents were in favor, while 10% were not. The overwhelming majority in support suggests that hands-on experiences are viewed as critical for comprehending and applying health education concepts. However, the 10% minority who are hesitant might point toward potential challenges in the practical implementation of such activities, indicating an area where additional support or clarification in the curriculum may be necessary.
5. All respondents (100%) believed that knowledge of health education would enable them to address students' health-related concerns effectively. This strong consensus underscores the importance of equipping future teachers with health education skills to foster a supportive learning environment for students' physical and mental well-being. The unanimous agreement reflects a comprehensive understanding of the critical role health education plays in student care and the broader educational context.

From the above findings suggest a clear and strong recognition of the value of basic health education among teacher trainees. The responses indicate that they see it as essential for their teaching effectiveness, professional collaboration, and ability to address student needs, though some challenges in the practical application of health education may need to be addressed.

SUGGESTIONS AND RECOMMENDATIONS:

A few suggestions to enhance the implementation of Basic Health Education in teacher training programmes in Assam:

- Incorporating formal health education training in teacher training programs is crucial. The content should include local health issues, identification of common health problems, and basic preventive measures.
- Conducting additional workshops focused on health education and child health issues for both student teachers and teacher educators.
- Engaging student teachers with real-world health scenarios through collaboration with healthcare professionals and institutions to build practical awareness.
- The development and implementation of a standardized health education curriculum for teacher training programmes in Assam.
- Ongoing professional development opportunities for educators to enhance their health knowledge and teaching skills.

- Partner with local healthcare professionals and organizations to design and deliver the health education curriculum. This ensures that teachers receive accurate, up-to-date information on local health challenges and solutions.
- Alongside theoretical knowledge, provide teachers with hands-on training in first aid, emergency response, and disease prevention techniques. This could be achieved through workshops, simulations, or fieldwork with local healthcare centers.
- Introduce a system where trained teachers organize regular health awareness sessions for students, parents, and community members. This will help in creating a health-conscious community, particularly in rural areas.
- Tailor the health education content to address region-specific health issues prevalent in Assam, such as vector-borne diseases like malaria and water-borne diseases due to floods. This ensures that teachers are prepared to deal with the most pressing local health concerns.
- Leverage digital tools and platforms to provide ongoing health education and resources for teachers. Online modules, webinars, and health apps can help in continuous learning and access to updated health information.
- Implement regular assessments to monitor how effectively the health education programme is being integrated and practiced by teachers in schools. Feedback from teachers and students can help refine the curriculum.
- Establish health education clubs in schools led by teachers trained in health education. These clubs can engage students in activities such as health quizzes, poster-making competitions, and awareness campaigns, encouraging a proactive approach to health.
- Advocate for the inclusion of Basic Health Education in state-level teacher training curricula through policy interventions. The government's backing can ensure widespread adoption and standardization of health education in Assam's educational institutions.
- Encourage teacher participation in health education programs by providing certifications, additional points in career advancement, or financial incentives for those who actively promote health education in their schools and communities.

These suggestions can help ensure the successful integration of Basic Health Education in teacher training, resulting in a more health-literate and health-conscious population in Assam.

CONCLUSION

The analysis reveals overwhelming support (100% in most cases) for the importance and relevance of basic health education among teacher trainees. The high percentage of affirmative responses across most questions highlights that trainees see health education as a crucial component of their future teaching careers, both for enhancing their professional effectiveness and for addressing student needs. The only slight reservation was regarding the inclusion of practical activities, where a small portion of the respondents (10%) did not see the necessity, indicating a potential area for further curriculum development.

Incorporating basic health education into teacher training programmes in Assam is essential for equipping future educators with the tools they need to promote health and well-being among their students. This study underscores the importance of health education in shaping a health-conscious generation, ultimately contributing to improved public health outcomes in the region.

References

Cockburn, R., Newton, P. N., Agyarko, E. K., Akunyili, D., & White, N. J. (2005). The global threat of

- counterfeit drugs: why industry and governments must communicate the dangers. *PLoS Medicine*, 2(4), e100.
- Gupta, R. et al. (2021). The Role of Teachers in Health Education: A Case Study in Assam.
- Hommel, M. (2024). Can vocational interests of students be used to recruit suitable candidates for teacher training programmes in technical vocational education and training in Germany? Published in *Vocational interests of students, Education + Training* 66(5), Page-557, DOI: 10.1108/ET-09-2023-0355, <https://www.emerald.com/insight/0040-0912.html>
- Kumar, S., Jain, P., & Mehta, P. (2016). Nutritional status of school children in rural Assam. *International Journal of Child Health and Nutrition*, 5(2), 93-102.
- Nutbeam, D. (2000). Health literacy as a public health goal: A challenge for contemporary health education and communication strategies into the 21st century. *Health Promotion International*, 15(3), 259-267.
- Ministry of Health and Family Welfare, Government of India. (2022). *Health Challenges in India: An Overview*.
- Patel, V., & Shah, M. (2017). Medication safety in India: challenges and opportunities. *Journal of Pharmacology & Pharmacotherapeutics*, 8(3), 158-164.
- R, Poornima & Venkataganesh, D. (2024). *Teacher-Educators' Dialogues on Initial Teacher Training Programmes in Norway with Special Reference to Inclusive Education' ICCLTE 2020, Book-Teacher Education the Changing Landscape, Vol.-1, Publisher: VL Media Solutions, September 2024*
- Sharma, A. (2023). *Integrating Health Education into Teacher Training: A Review of Best Practices*.
- Sharma, M. (2012). Role of schools in disaster management in rural areas. *Journal of Education and Practice*, 3(4), 47-54.
- Singh, A., Tripathi, P., & Gupta, R. (2020). The state of healthcare in Assam: Challenges and opportunities. *Journal of Public Health*, 42(4), 762-769.
- St. Leger, L. (2001). Schools, health literacy and public health: Possibilities and challenges. *Health Promotion International*, 16(2), 197-205.
- Tones, K., & Tilford, S. (2001). *Health promotion: effectiveness, efficiency and equity*. Nelson Thornes.
- World Health Organization. (2019). *Global health risks: Mortality and burden of disease attributable to selected major risks*. World Health Organization
- World Health Organization. (2020). *Health Education: A Comprehensive Approach*.