# 1

# The Power of Now

## Learning Objectives

After studying this chapter in the text, the student should be able to:

1.1 Define health and wellness.

1.2 Outline the dimensions of health.

1.3 Assess the current health status of Americans.

1.4 Discuss health disparities based on gender and race.

1.5 Evaluate the health behaviors of undergraduates.

1.6 Describe the impact of habits formed in college on future health.

1.7 Explain the influences on behavior that support or impede healthy change.

1.8 Identify the stages of change.

## Chapter Summary

This chapter shows you how to make healthy choices and thus how to live more fully, more happily, and more healthfully. This is an offer that you literally cannot afford to refuse. Your life may depend on it, starting now.

## Lecture Outline

1. Health and Wellness
	1. What It Means
		1. Health means being sound in body, mind, and spirit.
		2. The World Health Organization defines health as “not merely the absence of disease or infirmity,” but “a state of complete physical, mental, and social well-being.”
		3. Health has many dimensions: physical, psychological, spiritual, social, intellectual, and environmental.
		4. Wellness can be defined as purposeful, enjoyable living or, more specifically, a deliberate lifestyle choice characterized by personal responsibility and optimal enhancement of physical, mental, and spiritual health.
	2. The Dimensions of Health
		1. Physical Health
			1. According to a contemporary medical dictionary, health is “an optimal state of physical, mental, and social well-being, not merely the absence of disease or infirmity.”
			2. Health is not a static state, but a process that depends on the decisions we make and the behaviors we practice every day.
			3. We must feed our bodies nutritiously, exercise them regularly, avoid harmful behaviors and substances, watch out for early signs of sickness, and protect ourselves from accidents.
		2. Psychological Health
			1. Psychological health refers to both our emotional and mental states.
			2. It involves awareness and acceptance of a wide range of feelings in oneself and others, as well as the ability to express emotions, to function independently, and to cope with the challenges of daily stressors.
		3. Spiritual Health
			1. Spiritually healthy individuals identify their own basic purpose in life; learn how to experience love, joy, peace, and fulfillment; and help themselves and others achieve their full potential.
		4. Social Health
			1. Social health refers to the ability to interact effectively with other people and the social environment, to develop satisfying interpersonal relationships, and to fulfill social roles.
			2. Health educators are placing greater emphasis on social health in its broadest sense as they expand the traditional individualistic concept of health to include the complex interrelationships between one person’s health and the health of the community and environment.
			3. This change in perspective has given rise to a new emphasis on health promotion, which educators define as “any planned combination of educational, political, regulatory, and organizational supports for actions and conditions of living conducive to the health of individuals, groups, or communities.”
		5. Intellectual Health
			1. Intellectual health refers to your ability to think and learn from life experience, your openness to new ideas, and your capacity to question and evaluate information.
		6. Occupational and Financial Health
			1. College provides the opportunity for you to choose and prepare for a career that is consistent with your personal values and beliefs and to learn how to manage your money and safeguard your financial well-being.
			2. Health educators have expanded the traditional individualistic concept of health to include the complex interrelationships between one person’s health and the health of the community and environment.
				1. This change in perspective has given rise to a new emphasis on health promotion, which educators define as “any planned combination of educational, political, regulatory, and organizational supports for actions and conditions of living conducive to the health of individuals, groups, or communities.”
2. Health in America
	1. Overview
		1. According to a recent national survey of more than 4,700 people, 97.3 percent get a failing grade in healthy lifestyle habits.
		2. For the minority who do adapt these health guidelines, the payoff includes a lower risk of many health problems, including type 2 diabetes, heart disease, and cancer.
	2. Healthy People 2020
		1. Eliminate preventable disease, disability, injury, and premature death.
		2. Achieve health equity, eliminate disparities, and improve the health of all groups.
		3. Create social and physical environments that promote good health for all.
		4. Promote healthy development and healthy behaviors across every stage of life.
	3. Health Disparities
		1. Despite great improvements in the overall health of the nation, Americans who are members of racial and ethnic groups are more likely than whites to suffer poor health and die prematurely.
			1. Genetic variations, environmental influences, and specific health behaviors contribute to health disparities, but poverty may be a more significant factor.
		2. Why Race Matters
			* 1. Black Americans lose substantially more years of potential life to homicide and diabetes
				2. About one in three Hispanics has prediabetes
				3. Caucasians are prone to osteoporosis (progressive weakening of bone tissue); cystic fibrosis; skin cancer; and phenylketonuria (PKU), a metabolic disorder that can lead to cognitive impairment
				4. Native Americans, including those indigenous to Alaska, are more likely to die young than the population as a whole, primarily as a result of accidental injuries, cirrhosis of the liver, homicide, pneumonia, and complications of diabetes.
				5. The suicide rate among American Indians and Alaska Natives is 50 percent higher than the national rate. The rates of co-occurring mental illness and substance abuse (especially alcohol abuse) are also higher among Native American youth and adults.
			1. Cancer
				1. Overall, black Americans are more likely to develop cancer than persons of other racial or ethnic groups.
				2. Although blacks continue to have higher cancer death rates than whites, the disparity has narrowed for all cancers combined in men and women and for lung and prostate cancers in men.
				3. However, the racial gap in death rates has widened for breast cancer in women and remained level for colorectal cancer in men.
			2. Cardiovascular Disease
				1. Heart disease and stroke are the leading causes of death for all racial and ethnic groups in the United States, but rates of death from these diseases are higher among African American adults than among white adults.
				2. African Americans also have higher rates of high blood pressure (hypertension), develop this problem earlier in life, suffer more severe hypertension, and have higher rates of stroke.
			3. Diabetes
				1. American Indians and Alaska Natives, African Americans, and Hispanics are twice as likely to be diagnosed with diabetes compared with non-Hispanic whites.
			4. Infant Mortality
				1. African American, American Indian, and Puerto Rican infants have higher death rates than white infants.
			5. Mental Health
				1. American Indians and Alaska Natives suffer disproportionately from depression and substance abuse.
				2. The prevalence of dementia varies significantly among Americans of different racial and ethnic groups, with the highest rates among blacks and American Indians/Alaskan Natives.
			6. Infectious Disease
				1. Asian Americans and Pacific Islanders have much higher rates of hepatitis B.
				2. Black teenagers and young adults become infected with hepatitis B three to four times more often than those who are white.
			7. HIV and Sexually Transmitted Infections
				1. African Americans and Hispanics account for about two-thirds of adult AIDS cases and more than 80 percent of pediatric AIDS cases.
		3. Sex, Gender, and Health
			1. Medical scientists define sex as a classification, generally as male or female, according to the reproductive organs and functions that derive from the chromosomal complement.
			2. Gender refers to a person’s self-representation as a male or female or how that person is responded to by social institutions on the basis of the individual’s gender presentation.
			3. Sex and gender may have a greater impact than any other variable on how our bodies function, on how long we live, and the symptoms, course, and treatment of the diseases that strike us.
			4. Among the reasons that may contribute to the health and longevity gap between the sexes are:
				1. Biological factors
				2. Social factors
				3. Behavioral factors
				4. Health habits
			5. Sexual orientation can also affect health.
3. Health on Campus
	1. Overview
		1. As one of an estimated 21 million college students in the United States, you are part of a remarkably diverse group.
		2. Although most undergraduates are “traditional” age (between 18 and 24 years old), more than ever before are over the age of 25.
		3. Today’s college students are both similar to and different from previous generations in many ways.
	2. College and Health
		1. Although the words “college health” often appear together, they are, in fact, two different things that profoundly influence each other. Healthier students get better grades and are more likely to graduate.
			1. A college education boosts health status, income, and community engagement later in life.
			2. Yet the transition from high school to college is considered an at-risk period for health and healthy behaviors.
		2. Although healthier than their peers who are not attending college, undergraduates have significant health issues that can affect their overall well-being and ability to perform well in an academic environment.
	3. How Healthy Are Today’s Students?
		1. In the American College Health Association’s National College Health Assessment (ACHA-NCHA) survey, more than 8 in 10 undergraduates (fewer than in previous years) rated their health as good, very good, or excellent.
		2. Yet the habits of young Americans often aren’t healthy.
		3. Colleges and universities have tried various interventions to improve students’ health choices and habits.
			1. In a meta-analysis of 41 studies, most conducted in the United States, 34 yielded significant improvements in one of several key outcomes.
	4. Why “Now” Matters
		1. The choices you make today have an immediate impact on how you feel as well as long-term consequences.
	5. Student Health Norms
		1. Psychologists use the term norm, or social norm, to refer to a behavior or an attitude that a particular group expects, values, and enforces.
			1. Norms influence a wide variety of human activities, including health habits.
			2. However, perceptions of social norms are often inaccurate.
			3. Undergraduates are particularly likely to misjudge what their peers are and aren’t doing, especially regarding smoking, drinking, and other drug use.
	6. The Promise of Prevention
		1. Many chronic problems begin early in life.
		2. Two out of every three deaths and one in three hospitalizations in the United States could be prevented by changes in six main risk factors: tobacco use, alcohol abuse, accidents, high blood pressure, obesity, and gaps in screening and primary health care.
	7. Protecting Yourself
		1. Immunizations
		2. Prevent STIs and unwanted pregnancies
	8. Understanding Risky Behavior

1. Today’s students face different and potentially deadlier risks than undergraduates did a generation or two ago.

2. The problem is not that students who engage in risky behavior feel invulnerable or do not know the danger.

* + - 1. Young people, according to recent research, actually overestimate the risk of some outcomes.
			2. However, they also overestimate the benefit of immediate pleasure when, for instance, engaging in unsafe sex, and they underestimate the negative consequences, such as an STI.
1. Making Healthy Changes

A. Understanding Health Behavior

1. Predisposing Factors

a. Predisposing factors include knowledge, attitudes, beliefs, values, and perceptions.

b. Researchers report that people are most likely to change health behavior if they hold three beliefs:

* + - * 1. Susceptibility
				2. Severity
				3. Benefits

2. Enabling Factors

a. Enabling factors include skills, resources, accessible facilities, and physical and mental capacities.

3. Reinforcing Factors

a. Reinforcing factors may be praise from family and friends, rewards from teachers and parents, or encouragement and recognition for meeting a goal.

1. How and Why People Change
	1. Overview
		1. Change can simply happen, but can also be intentional.
			1. In intentional change, a person consciously, deliberately sets out either to change a negative behavior, such as chronic procrastination, or to initiate a healthy behavior, such as daily exercise.
		2. For decades psychologists have studied how people intentionally change and have developed various models that reveal the anatomy of change.
			1. In the moral model, you take responsibility for a problem (such as smoking) and its solution; success depends on adequate motivation.
			2. In the enlightenment model, you submit to strict discipline to correct a problem; this is the approach used in Alcoholics Anonymous.
			3. The behavioral model involves rewarding yourself when you make positive changes.
			4. The medical model sees the behavior as caused by forces beyond your control (a genetic predisposition to being overweight, for example) and employs an expert to provide advice or treatment.
	2. The Health Belief Model
		1. According to this model, people will take a health-related action if they:
			1. Feel susceptible to a possible negative consequence
			2. Perceive the consequence as serious or dangerous
			3. Think that a particular action will reduce or eliminate the threat
			4. Feel that they can take the necessary action without difficulty or negative consequences
			5. Believe that they can successfully do what’s necessary
	3. Self-Determination Theory
		1. This approach focuses on whether an individual lacks motivation, is externally motivated, or is intrinsically motivated.
	4. Motivational Interviewing
		1. Health professionals, counselors, and coaches use motivational interviewing to inspire individuals, regardless of their enthusiasm for change, to move toward improvements that could make their lives better.
	5. Self-Affirmation Theory
		1. According to self-affirmation theory, thinking about core personal values, important personal strengths, or valued relationships can provide reassurance and reinforce self-worth.
			1. Repeating an affirmation is one of the fastest ways to restructure thought patterns, develop new pathways in the brain, and make individuals less defensive about changing health behaviors.
	6. Transtheoretical Model

1. Their transtheoretical model focuses on universal aspects of an individual’s decision-making process rather than on social or biological influences on behavior.

2. The key components of the transtheoretical model of change include stages of change, processes of change, and self-efficacy.

a. Stages of Change

i. Precontemplation

ii. Contemplation

iii. Preparation

iv. Action

v. Maintenance

vi. Termination

b. Processes of Change

i. Consciousness-Raising

ii. Social Liberation

iii. Emotional Arousal

iv. Self-Reevaluation

v. Commitment

vi. Rewards

vii. Countering

viii. Environmental Control

ix. Helping Relationships

3. Self-Efficacy and Locus of Control

a. Self-efficacy is the belief in your ability to change and to reach a goal.

b. Locus of control is the sense of being in control of your life.

## Discussion Questions

* Discuss with students which dimension of health is most prominent in their lives. Why? Which are they least concerned with? Ask students what they could do in order to incorporate all components into their lives? What are some of the obvious differences between those who do incorporate all of these aspects into their lives and those who only concentrate on one or two components?
* Ask students to take a quick inventory of their own and their immediate family’s health status. Using the statistics found in the text, compare their inventory to the different health risks for their racial and ethnic group. Ask students what factors they believe contribute to the differences in health status that various racial and ethnic groups face. How might religion affect the health of a culture? Ask students which family health problems may “run in the family” and if they have concerns about eventually getting these illnesses?
* What challenges do ethnicity, race, religion, gender, and sexual orientation bring to the health-care system? What actions can government, universities, hospitals, and other health-care facilities and individuals take to address these differences? What factors in the health-care system might keep various individuals from keeping up with their health?
* Ask students how they have handled their newfound freedom since attending college or leaving home for the first time. How have their parents handled and reacted to it? How does the sense of independence affect their health? Are there any additional health challenges that they face?
* Ask students to identify their most common health problems. Do students have similar health problems? Why or why not? Ask students to generate a list of ways to prevent these health problems?

## Answers to Global Health Watch

1. b

2. c

3. surgery rates

## Classroom Activities

### Activity #1: Meet Your Classmates

Purpose:

1. To meet your classmates and learn to appreciate the differences we all share.
2. To learn how to appreciate nonverbal communication.

Time:

Ten to fifteen minutes of class.

Introduction:

Introduce the disparities in health and how often we overlook our differences. Elaborate on the following communication facts:

1. Seven percent of communication is the result of the verbal message: words.

2. Thirty-five percent of communication is the result of verbal cues: volume, pitch, etc.

3. Fifty-eight percent of communication is the result of nonverbal cues.

Method:

1. Go to an area in which students can easily move around.
2. Divide the class into two or three teams.
3. Have students stand in a straight line.
4. Give students a topic (most siblings, most pets, most operations, height, weight, age, foot size).
5. Have students line up accordingly (most to least, least to most).
6. Keep track of time to see which group lines up first (and then compare times after they are not allowed to speak).
7. To add a twist, don’t let students talk while trying to line up.
8. Repeat many times, so the students get a chance to be in a different location each time.

Discussion:

1. Discuss with the students how they felt when they could not talk. What did they rely on to communicate?
	1. How did some communicate? Were there different styles?
	2. Is nonverbal communication as effective as verbal communication? Explain.
2. Discuss whether anyone was always in the same place in line. Discuss these differences.
3. How might these differences reflect how we treat ourselves? Our lifestyle behaviors?

### Activity #2: The Dimensions of Health

Purpose:

1. To introduce and investigate the dimensions of health and how various individuals perceive these dimensions.
2. To analyze human behavior in the context of physical, psychological, social, intellectual, environmental, and spiritual health.
3. To enable students to meet their classmates.

Time:

One class period.

Method:

1. Form a circle in the room.
2. Instruct each student to introduce himself or herself and identify a dimension of health that represents their lifestyle by acting it out.

Discussion:

1. Discuss the various ways that people perceived the dimensions not only from the person acting out the dimension but also from the audience.

### Activity #3: Family Health History

Purpose:

1. To investigate your family health history.
2. To analyze how current health practices along with family health history can determine future health.

Time:

One class period.

Method:

1. Have students first create a family tree that includes parents, siblings, grandparents, aunts, and uncles. Students should also list close relatives who may be deceased.
2. After creating the family tree, students should list the health concerns or illnesses that any family member has experienced.

Discussion:

1. How many relatives in their family tree have health concerns?
2. Discuss how those health conditions may play a role in the student’s life in terms of their own health.
3. Discuss strategies for behavior change or preventive measures each student can take to possibly avoid the same health concerns.

### Activity #4: Goal Setting for a Healthy Change

Purpose:

To establish one or more goals that you would like to strive toward throughout the semester.

Time:

Half of a class period.

Method:

1. Have each student choose one lifestyle change that they would like to work on or improve during the semester.
2. Have the student determine what stage of change they feel they are currently in: precontemplation, contemplation, preparation, or action. (They will not be in the maintenance or the termination stage if they are working to improve a health behavior.)
3. Based on their stage of change, have the students refer to the chart on page 17 in the text and identify which of the nine processes in the transtheoretical model they can use to help them move to the next stage of change.
4. Have the student come up with one idea that they will use for each of the processes they identified.

Discussion:

1. Discuss the likelihood that the student will implement the ideas they thought of for the processes of change. If the likelihood is not good, ask why. Have the students reassess their goal, the stage of change they are in and the ideas for each process of change. If the likelihood is good, create an assignment or discussion to follow up on their progress.

## References, Readings, and Resources

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## Films and Videos

*A Simple Way to Break a Bad Habit*

(Psychiatrist Judson Brewer studies the relationship between mindfulness and habits. Learn more about the mechanism of habit development and discover a simple but profound tactic that might help you beat your next urge to smoke, snack, or check a text while driving.)

[Judson Brewer: A Simple Way to Break a Bad Habit](https://www.ted.com/talks/judson_brewer_a_simple_way_to_break_a_bad_habit)

*Achieve a Healthy Lifestyle*

(“What we do, and what we put into our bodies, has a direct impact on the way we feel.” To prove the point, Rick, a health enthusiast, is contrasted with his friend Tina, a nightclubbing, smoking, convenience-food junkie.)

Films Media Group

132 West 31st Street, 16th Floor

New York, NY 10001

P: 800.322.8755

F: 800.678.3633

E: Films Media Group

*Homeostasis*

(This program introduces students to the phenomenon of homeostasis, illustrating its crucial importance and how it works inside the body.)

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F: 800.678.3633

E: Films Media Group

*Nutrition Starts Here*

(Join Chef Marshall O’Brien as he shares nutritious food choices and healthy eating strategies in Nutrition Starts Here: Smart Eating on a Budget.)

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E: Films Media Group

*Our Cultures Are Our Source of Health*

(Renowned Hollywood actor and Cherokee tribal member, Wes Studi, explains how American Indians and Alaska Natives are twice as likely to have diagnosed diabetes as non-Hispanic whites.)

Centers for Disease Control and Prevention

[Our Cultures Are Our Source of Health](http://www.cdc.gov/cdctv/lifestagesandpopulations/our-cultures.html)

*Outbreak*

(This film tells the vivid, inside story of how and why the Ebola outbreak in West Africa wasn’t stopped before it was too late, drawing on revelatory and candid admissions of failure from key government and public health officials.)

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## Internet Resources

*Centers for Disease Control and Prevention*

Provides a wide variety of information and is a gateway to specific CDC agencies.

[Centers for Disease Control and Prevention](http://www.cdc.gov)

*Go Ask Alice*

Sponsored by Columbia University, this site offers questions and answers as well as an interactive service on a wide variety of health-related topics.

[Go Ask Alice](http://goaskalice.columbia.edu/)

*Healthways*

[“World Faces Shortage in Purpose Well-Being”](http://blog.healthways.com/2014/09/world-faces-shortage-in-purpose-well-being/)

*Healthy People 2020*

“Healthy People 2020” Healthy People provides science-based, 10-year national objectives for improving the health of all Americans.

[health.gov – Healthy People](http://www.health.gov/healthypeople/)

[Centers for Disease Control and Prevention – Healthy People](http://www.cdc.gov/nchs/healthy_people.htm)

*National Institutes of Health*

A governmental organization that supplies data and resources on a wide variety of health issues.

[National Institutes of Health](http://www.nih.gov)

*National Patient Safety Foundation and Partnership for Clear Health Communication*

The Partnership for Clear Health Communication is a coalition of national organizations that are working together to promote awareness and solutions around the issue of low health literacy and its effect on health outcomes.

[Ask Me 3: Good Questions for Your Good Health](http://www.npsf.org/askme3/)

*Office of Minority Health*

The Office of Minority Health was created in 1986 as one of the most significant outcomes of the Heckler Report and was reauthorized by the Affordable Care Act (ACA) in 2010. The mission of the Office of Minority Health is to improve the health of racial and ethnic minority populations through the development of health policies and programs that will eliminate health disparities.

[Office of Minority Health Home Page](http://minorityhealth.hhs.gov/)

*Office on Women’s Health*

The Office on Women’s Health provides national leadership and coordination to improve the health of women and girls through policy, education, and model programs.

[Womenshealth.gov](http://www.womenshealth.gov/index.php)

*U.S. National Library of Medicine*

This excellent governmental website features information on a variety of medical conditions; current health topics; research projects; directories of doctors, hospitals, and other health-care providers; as well as access to other online medical resources such as Medline.

[U.S. National Library of Medicine](http://www.nlm.nih.gov)

## Key Terms

enabling factors

health

health belief model (HBM)

health promotion

locus of control

predisposing factors

prevention

protection

reinforcing factors

self-efficacy

social norm

transtheoretical model

wellness