

Inactive lifestyle

Data on different lifestyles shows that inactivity has significant health risks. Being active is an important way that individuals can improve their physical health.

Physical effects of inactivity and activity

Inactivity	Recommended level of activity
👎 increases risk of breast cancer by 17.9% and colon cancer by 18.7%	👍 lowers the risk of breast and colon cancer by 20%
👎 increases risk of type 2 diabetes by 13%	👍 lowers risk of developing type 2 diabetes by 40%
👎 increases risk of coronary heart disease by 10.5%	👍 lowers the risk of heart disease by 35%
👎 leads to obesity	👍 helps to maintain a healthy weight
👎 leads to joint pain	👍 builds strong bones and healthy muscles

The role of health care organisations

In the UK, health care organisations:

- gather data (statistics) about levels of activity and inactivity
- analyse data and advise about the health risks associated with inactivity
- encourage people to take part in physical activity
- advise on activity levels for improving the health of the whole population.

UK facts about inactivity

- Inactivity contributes to a wide range of health conditions.
- 16.9% of all premature deaths are caused by an inactive lifestyle.
- Active people have a lower risk of premature death.
- People who are inactive visit their GP more often.
- Inactive adults are likely to spend 38% more time in hospital.

Personal data

Health professionals may ask:

- how often the person takes exercise
- the type of exercise a person takes.



Collecting data about an individual's activity levels helps health professionals to advise on the risks to an individual's health and wellbeing, and to support lifestyle changes.

Now try this

Give three reasons to explain the importance of gathering lifestyle data.

Use information on this page and what you have revised on pages 26 and 27 to answer this question.

Person-centred approach

The person-centred approach is **holistic** and puts the individual at the heart of health care planning, so that the whole range of physical, intellectual, emotional and social health needs are met.

Partnership

In a person-centred approach there must be a partnership between the individual and the health professional. In this approach, the partnership also extends to include family members and carers.

The approach is rooted in the **care values** (standards or rules) that health professionals must follow.

Health professionals should use a person-centred approach and care values when working with a person to devise their health improvement plan (a plan to benefit an aspect of health or wellbeing).

Care values

Care values inform the person-centred approach (see pages 30 and 31).

Care values are:

- 1 Empowerment
- 2 Dignity
- 3 Respect
- 4 Communication
- 5 Anti-discriminatory practice
- 6 Confidentiality
- 7 Safeguarding

REVISE IT!
You might need to use this Component 2 knowledge in your assessment.

Needs, wishes and circumstances

Effective planning for health improvement takes into account the person's needs, wishes and circumstances.

Needs	Physical, intellectual, emotional and social health needs
Wishes	Likes and dislikes, choices, desired health goals
Circumstances	Illness or disability, access to facilities, previous experiences, family and relationships, responsibilities

Benefits of a person-centred approach

When a person-centred approach, based on the care values, is used to devise a health improvement plan, the person:

- 👍 will feel involved
- 👍 is more likely to trust a health professional who listens to them
- 👍 will feel more secure
- 👍 is more likely to follow the plan and achieve the targets
- 👍 will take responsibility for their own health.

A family member or responsible person can empower a person by helping them to express their needs and wishes.



Now try this

Vicky is a single mother with two children under three years old. She has been feeling tired, so visited her health centre. BMI results show that Vicky is obese and her blood pressure is slightly raised. After looking at the results the practice nurse gave Vicky a diet sheet, told her to follow it and return in one month.

Give three examples of how the practice nurse could have taken Vicky's needs, wishes and circumstances into account.

Try to give one example for each aspect – needs, wishes and circumstances.