



COMPONENT 3: HEALTH AND WELLBEING

AO4: Demonstrate knowledge and understanding of how to overcome obstacles relating to health and wellbeing improvement plans.



This revision pack contains the obstacles to implementing a health and wellbeing plan (AO4) and exam questions relating to this assessment objective.

Essential content in this revision pack

C: Person-centred health and wellbeing improvement plans

Obstacles to implementing plans

Learners will explore the obstacles that individuals can face when implementing these plans and how they may be mitigated.

Potential obstacles:

- emotional/psychological – lack of motivation, low self-esteem, acceptance of current state
- time constraints – work and family commitments
- availability of resources – financial, physical, e.g. equipment
- unachievable targets – unachievable for the individual or unrealistic timescale
- lack of support, e.g. from family and friends
- other factors specific to individual – ability/disability, addiction
- barriers to accessing identified services.

Exam Questions related to this content.

Potential obstacles to implementing plans

A key factor of successful health and wellbeing improvement plan is the willingness of the person to follow it. It is important that no obstacles are put in their way.

Obstacles

The final important factor in designing a health and wellbeing improvement plan is to assess any difficulties a person might face when they implement the plan. What could stop them succeeding? How can you help to overcome any obstacles they may face?

Factors to consider when designing a health plan and how they can cause obstacles:	
Occupation	Social class
Self-concept	Levels of stress
Peer group	Support
Gender	Time available
Age	Social pressure

A person is more likely to want to follow a plan and use the support identified if they have been involved in drawing it up. As a health practitioner, you would need to:

- Assess the person's current state
- Discuss the health issue to be tackled with the person, to build a relationship with them.
- Discuss different options to take
- Keep it simple and straightforward (the KISS rule); in other words, do not use lots of jargon (words not everyone knows), acronyms or medical terms the person will not understand
- Decide together which options should be followed; in other words, do it with the person, not to the person (person-centred approach)
- Explain how they can access support
- Make the plan as clear and straightforward as possible
- Make the plan look attractive so the person will not mind putting it in a place they can always see it (for example, a kitchen wall).

This is an example of a health and wellbeing improvement plan. Can you see where obstacles might occur? Could you make any improvements?

Problem: Unfit office worker. Lifestyle too sedentary, so needs to become more active.	
Recommended action 1:	Get 2.5 hours moderate exercise a week
Short-term SMART target 1:	Go for a 30 minute walk on Mondays, Wednesdays and Fridays, and a 1-hour walk on Sundays for the first 4 weeks, in your lunch break if necessary Walk more briskly, so you walk further in the same time and on the same days for the next 4 weeks. Cycle or jog instead of walking for at least the same time, getting faster each week.

Long-term SMART target 1:	Go for a 30 minute run at least three times a week. Walk at least 10,000 steps on the day you don't run.
Sources of support 1:	Ask a family member or friend to exercise or go out with you 'Couch to 5K' running app 'Couch to 5K+' running podcast when you get past 5k on www.nhs.uk
How support will help 1:	Less likely to get bored or make an excuse not to go if with someone else Gives examples of physical activity that meets the guidelines, so you can change what is suggested here for something else to give more variety. Also explains the benefits to spur you on. Shows you what to do; designed to get you running in just 9 weeks Provides longer structured runs to help you continue to improve.

Recommended action 2:	Do strengthening exercises twice a week
Short-term SMART target 2:	Do exercises to work the legs, hips, back, abdomen, chest, shoulder and arms twice a week.
Long-term SMART target 2:	Do exercises to work the legs, hips, back, abdomen, chest, shoulder and arms at least three times a week
Sources of support 2:	NHS fitness studio exercise videos [www.nhs.uk]
How support will help 2:	These instructor-led videos are different lengths, and exercise different muscles, so you can find some that suit your needs.

Emotional/psychological obstacles

There aren't just physical obstacles to implementing a health and wellbeing improvement plan, some of these obstacles are psychological/emotional.

Lack of motivation

This obstacle is about people finding the task too difficult to even start or keep motivated doing an activity. This is usually due to starting tasks to be fairly difficult and motivation lost due to lack of interest and boredom.

For some, this obstacle can be overcome by:

- Reminding themselves of the benefits of the plan (i.e. feeling fitter, more energy, reducing health risk and feeling better about themselves),
- Doing activities, they enjoy; this will encourage them to stay motivated as they are doing something they are interested in,
- Doing activities when they feel energetic,
- Multiple different strategies (some examples on a fitness plan could be: swimming instead of walking, joining a gym or going hiking)
- Building in rewards: such as for every 7 kg of weight lost, treat themselves to a new item of clothing.

Low self-esteem

This obstacle can affect every aspect of your life - everything from what you think about yourself to the way you react to situations. For some people low self-esteem could even result in:

- Negative thoughts about them and/or their abilities,
- Feeling less able to take on the challenges life presents (i.e. sticking with their health and well-being improvement plan),
- Giving up on challenges before they even begin.

This can normally be improved in many ways such as attempting to stick with the plan and making the effort to meet targets, which can increase self-esteem. An example would be: a person on a fitness plan might feel better that they stuck with it (despite the struggle to stay motivated/even though it felt hard at first) because they have lost weight and feel fitter.

Acceptance of current state

This obstacle is about someone who accepts their current health, because they feel fine now. They have most likely convinced themselves they do not need to take an action. An example of this would be: they may have high blood pressure but don't feel different from normal or they may have a low peak flow reading but doesn't notice any issues with their breathing. This applies to lifestyle issues also. For example, someone who smokes or drinks too much alcohol may feel perfectly fine and therefore not even consider giving up.

As we already know, an abnormal health indicator can lead to a number of conditions that may have serious health consequences and may even be life threatening.

Time constraints

We all have busy lives nowadays and some people struggle to fit everything in. These time constraints can often become an obstacle to implementing and wellbeing improvement plan.

Why time can be an obstacle

A common excuse when sticking to any plan is: "I Don't have enough time". People may feel they have too many other commitments such as work and family. A good health and wellbeing improvement plan will help to present solutions to this obstacle.

Work/Study commitments

Work or study can often be demanding, and evenings can often be busy. These things can leave people feeling tired. They can also be used as an excuse not to stick to, for example, a plan to improve activity levels. But there are strategies that can help to overcome these obstacles, as the diagram show.

How can I find time to exercise?

Get up 30 minutes earlier three times a week.

Take the stairs instead of lift.

Set off earlier and park further from work to walk or jog last couple of kilometres.

Do seated exercises at the desk (for example, leg exercises, waist twists, shoulder stretches, and arm stretches)

Keep walking shoes at work and go for a short walk during lunch hour.

Many adults spend more than 7 hours a day sitting down at work, on transport or in their leisure time. Many adults aged 65 and over, spend 10 hours or more each day sitting or lying down.

Family commitments

Away from work, family commitments may take up a lot of time. There may be children who need to be taken to places. Older relatives who may visit or family friends to socialise with. Trying to keep up a health and wellbeing improvement plan alongside so many other things could be achieved through advanced planning and involving the whole family, as the diagram shows. It is also important that the family supports the person doing the plan and understands how important it is that the person make the recommended changes.

Involving others in my fitness plan:

Go for a walk after an evening meal with your partner.

Go cycling with the whole family.

Go swimming at a health club while mum is doing a chair-based exercise class

Drop children off at their club and go for a run until they need to be picked up.

Availability of resources

Imagine devising a health and wellbeing improvement plan for someone who cannot afford or does not have what they need to do some of it. Not having enough money or the correct equipment might be an obstacle to achieving success.

Financial resources

When you design a health and improvement plan, you need to think about the cost of each action, to avoid money becoming an obstacle to someone's health and wellbeing improvement. For example, if you are drawing up an exercise plan that includes a person joining a gym, you need to:

- Consider if they can afford gym membership
- Provide details of free alternatives.

It is also important to point out on the plan:

- How much things cost
- How to access funding to help.

For example, a number of aids that help people to stop smoking are available on prescription from the NHS. Depending on the financial circumstances of the person, this means they may spend a small amount or nothing at all. Those on a low income may be able to get help with NHS costs through the NHS Low Income Scheme.

The NHS website (www.nhs.uk/livewell/fitness) has a section called 'get fit for free'. You could direct someone on an exercise plan to this website and discuss the suggestions with them before adding them into their plan. Also, local authorities offer initiatives to encourage people to get fitter such as:

- Free exercise classes or swimming sessions
- Free weight advice and exercise classes for morbidly obese people.

You could find out the details of your local authority, check what initiatives they provide, then add them to the persons plan.

Physical resources

Physical resources could mean equipment. An obstacle could occur if the person following the plan does not have access to the equipment they need. Look at the example below of someone who is on a diet: they need bathroom scales to weigh themselves and kitchen scales to weigh their food. You could make the suggestions like these on their plan.

What if I do not have scales?

They can get weighed at their local health centre

They may be able to weigh themselves at a sports centre

They can estimate food quantities based on the weight or volume given on food packaging.

They can estimate food quantities by using inexpensive measuring cups

Their local pharmacy may be able to weigh them

The NHS website suggests ways of accessing free equipment - for example, free running podcasts. Community websites such as Freecycle, Freecycle.org and SnaffleUp may also be useful resources for finding free equipment. It may be possible to find weights, skipping ropes, exercise balls and even exercise machines - all being given away by people who no longer need them.

Other ideas for free physical resources include:

- Local authority outdoor gyms, tennis courts, football pitches and basketball hoops in park around the area.
- Free gym taster sessions to check out the environment and range of options, before committing to a membership.
- A 'green gym' if there is one in your area, where people can volunteer to exercise by digging, planting and path clearing, which means they can be helping the environment while getting fitter.

Unachievable targets

Meeting targets can be encouraging. But if those targets are unachievable or unrealistic, then they are likely to become an obstacle to someone implementing a health and wellbeing improvement plan.

Unachievable for the individual.

Why might an individual find their targets unachievable? The table below gives some reason that should be considered before putting together a health and wellbeing improvement plan that will be realistic and achievable.

Reason	Example of how to avoid the problem on a plan.
Too ambitious	The individual may be very overweight and unfit. They may not have exercised for years. Instead of sending them to e.g. an aerobics class, which they may not be able to finish. Suggest a gentler class begin with.
Not appropriate	<ul style="list-style-type: none">• The individual may have many time commitments. Instead of suggesting daily 10km runs or long swims, plan them in for twice a week.• The individual may be an older person who lives alone. Instead of suggesting they take a long walk alone, try to team up with another person who can go with them. Ensure their exercise is age appropriate - perhaps a class specifically for older people.
Lack of understanding	The individual may not understand what is expected of them because the instruction on the plan is either too vague or too technical/complicated. Make sure the language on the plan is very clear and very simple. Be aware that some people may have difficulties understanding the written word.
Not in the right frame of mind	An individual may be depressed, upset about something or just not emotionally ready to commit to a plan (perhaps they have other things that will stand in their way). Discuss a new start date - one the individual feels happy with. It is better that the person is feeling determined and positive from the start.
Timing	Some people may find they have too much going on at certain times of the year - e.g. a lot of socialising around Christmas might make a weight loss programme that starts in early December difficult to carry on with, or dark cold mornings and evenings during the winter months can make a running programme difficult. Start a weight loss programme after special events and plan exercise that can be done inside or outside.
Fear of failure	An individual may make excuses because they are afraid of failing. Many people who fear failure often find doing new things very difficult - in case they do not do them well enough. Ensure the targets are very realistic and easily achievable to give the individual confidence.
Task is too big	An individual with several health concerns (e.g. morbidly obese, leads a sedentary lifestyle, smokes and drinks too much alcohol) may feel that making any of the necessary changes is too big a task to tackle and will take years, so do not bother. Again, ensure the targets are realistic - encouraging the individual to look permanent lifestyle changes rather than for fixed period.

Unrealistic timescales

A person who feels their goals are unrealistic may already feel as though there is no point in trying. For example, if a person is given a health and wellbeing improvement plan with a goal of losing 20kg in 4 weeks, they may not even attempt to start the plan. Some timescales need to be much longer to ensure success and give the individual confidence that their health and wellbeing improvement plan is working.

Lack of support

We all need support sometimes - whether to take up something new or finish off something.

Lack of support as an obstacle

Lack of support lead an individual following a health and wellbeing improvement plan to give it up. If no one is properly supporting the individual, they could feel there may be difficulties with, for example, keeping to a diet, stopping smoking and cutting down on alcohol.

Diet

Difficulties could occur if a person on a healthy eating plan is:

- Surrounded by family and friends who enjoy 'ready' meals and takeaways
- Fed by someone who is a good cook and gives generous helpings
- Tempted by chocolates and biscuits bought for special occasions
- Treated to regular meals out.

To overcome these obstacles, the individual will need to explain why they need to lose weight and why family support would be useful. To support the individual, a family could:

- Join in with eating the same healthy, balanced diet as the individual
- Hide away biscuits and treats
- Go bowling, for example, rather than eating out
- Pick healthy options from a takeaway menu that the whole family could share.

These kinds of support will help to keep the individual on track with their plan.

Smoking

If an individual is on a plan to stop smoking, they may find it difficult if friends and family continually offer them cigarettes. We all know that smoking is bad for us. But people lack the willpower to give it up. So, they may try to persuade the individual not to give up, because it makes them feel better about smoking.

Being offered cigarettes is a constant temptation and an obstacle. To overcome this potential obstacle the individual could:

- Explain they want to give up, to feel better and improve their health
- Ask family and friends not to offer them cigarettes
- Try to persuade family and friends to also give up cigarettes with them.

The individual may also need the support of aids (such as nicotine patches, special chewing gum and so on) to help them. If you were writing a 'quit smoking' plan for someone, you would research all the aids available and add them to the plan.

Alcohol consumption

An individual who is used to regular drinking with family and friends may find it hard to cut down or give up without their support. For example, it may be difficult to avoid pressure if:

- A family regularly drinks wine with meals
- Friends centre a night out on drinking heavily at clubs and pubs.

Supporting someone on an alcohol-reduction plan
Respect they are making a choice to cut down.
Do something else together that does not involve alcohol.
Offer to buy them a soft drink in a pub rather than an alcoholic one.
Designate them as a driver for the evening, to ensure they are not tempted to drink.
Listen to them if they suggest you, too, should cut down.
Respect them for having decided to improve their health and wellbeing.

Ability/disability and addiction

Sometimes there are factors specific to an individual that are potential obstacles to implementing a health and wellbeing improvement plan, such as ability/disability and addiction.

Ability

A person with learning difficulties may find it harder to understand and learn new things. They may also find it hard to manage tasks independently. If they need to follow an improvement plan, the layout of the plan and the language used might be obstacles because they may not be able to understand what is being asked of them. It is important that the support is identified in the plan. It is also important that some of the sources are involved in implementing the plan because they can help the individual to:

- Understand what they need to do
- Learn how to make the required changes in their lives.

Family and friends can offer support, and teachers can too (for instance if the child had a fitness plan they would try and make them join in in PE). If they use a day care centre, then the staff there may also be able to help them. They also need to be informed if the person has a plan of any sort, so they can get them to stick to this plan.

Disability

Someone with a physical disability may come across obstacles in their health and wellbeing plan if the plan has not been carefully thought through. You should ensure that, for example, someone who uses a wheelchair should be taken to places that are wheelchair accessible and that exercise should be wheelchair friendly. Advising them to join a slimming club with no wheelchair access will obviously not work. A blind person may need their plan translated into Braille. They may need access to equipment labelled in Braille, so they can follow their plan.

Addiction

People may become addicted to alcohol, nicotine and drugs because they like the way they make them feel, physically and mentally. This creates a strong desire to take these things again, due to the effect it had on them last time. Sometimes, not using the substances can cause withdrawal symptoms which can be unpleasant and painful. Other addictions include eating.

Plan type	Examples of obstacles and overcoming them
Weight reduction	Some people are compulsive eaters. Studies suggest the act of eating is the addictive thing rather than the food itself. People may need to identify the things that make them want to eat like depression or feeling fed up and need to ask themselves "Am I really hungry?" This could be used as a reminder. They could also eat smaller portion sizes or non-food rewards for weight loss.
Stopping smoking	People who smoke regularly develop cravings for nicotine. Giving up nicotine can result in strong withdrawal symptoms. Someone trying to quit should be made aware of any aids and medicines. They may also need to try and change their behaviours and lifestyle to avoid triggers. These are times that the individual links strongly with smoking, such as after food or in a social situation, so a plan needs to suggest something different to do during these times.
Stopping or reducing alcohol	An individual with an alcohol problem needs to admit they have a problem before they can start to improve. To overcome this obstacle, the plan should include visiting a GP for an open and honest assessment. The individual could then join a free local support group and go for alcohol counselling. The individual and plan should consider if alcohol should be reduced over a period of time. Stopping overnight could be harmful.

Barriers to accessing identified services

An individual on a health and wellbeing improvement plan might find they are unable to access services that could be helpful. These barriers might create obstacles to their plans.

Barriers

Barriers to accessing services can include any of the following:

- Physical
- Psychological
- Financial
- Cultural and language
- Resources
- Geographical

Physical barriers

Physical barriers to accessing services need to be thought about in any health and wellbeing improvement plan.

Some physical barriers to accessing services in a building;

- Location of bells and buzzers at entrance
- No access for wheelchairs or children's buggies
- Narrow, cluttered corridors and waiting areas

- No nearby parking
- Locations of bells and buzzers for attention on doors and in lifts
- Height of reception desk
- Inadequate access to different floors and rooms within buildings

Physical barriers can be overcome by making adaptations such as;

- Ramps through the main door
- Lowering parts of the reception desk
- Low button on doors or intercoms
- Well-spaced seating
- Wide automatic doors
- Wide uncluttered corridors and disabled toilets.

Any transport provided should be adapted.

Psychological barriers

Psychological barriers to accessing service can happen when an individual may be too scared or worried to use a service, perhaps due to fear of contracting a super bug or losing their independence. Others may:

- Be too proud to ask for help
- Be embarrassed to be seen struggling
- Scared to find out the results
- Feel there is a social stigma associated with some services such as mental health or weight loss.

Information leaflets and other public information can help to overcome physiological barriers. So can offering help at places like pharmacies, which may seem less threatening than going to a health centre. Having someone go with the person can help, as can having a private waiting room for those who have a problem they feel embarrassed about.

Financial barriers

Financial barriers to accessing services can happen because of the charges and fees, which can exclude and put off those who do not have the money to pay for the services they need that are not provided on the NHS. These might include, for example, disability, aids and prescriptions. Some services are means tested. This means an individual or family is examined to see whether they are eligible to receive benefits and free treatments.

Geographical barriers

Geographical barriers to accessing care can happen due to where someone lives for example,

- A rural area may not have many services or transport links
- Individuals may be sent long distance to accessing services

Geographical barriers can be overcome by services such as a hospital transport. Alternatively, travel to a hospital can sometimes be avoided by using health centres, pharmacists, or helplines.

Cultural and language barriers

Language barriers to accessing services can happen when people speak a different language or do not understand the way things are expressed because of jargon, slang or dialect. Some individuals may not be used to female services providers because in their culture they are not used to dealing with women of a professional status.

How language barriers can be overcome:

- Clear visual information posters or videos with subtitles in a range of languages

- Clear signs in a number of languages (with slang, dialect and jargon removed)
- Sign language or hearing loops (for those with hearing problems)
- Information given in podcasts, Braille, or large print (to help those with sight problems)

Resources barriers

Resources barriers can happen when there are staff shortages leading to, for example, a shortage of beds and too many people waiting long periods of time for an appointment.

Exam questions

- 1: List 3 obstacles that a person wanting to give up smoking may face.
- 2: List 3 obstacles that an overweight person may face.
- 3: List 3 obstacles that a person with high blood pressure may face.
- 4: List 3 obstacles that a person who drinks too much alcohol may face.
- 5: List 3 obstacles that a person with a fast pulse rate may face.
- 6: Explain 1 way to overcome the obstacle of low self-esteem.
- 7: Explain 1 way to overcome the obstacle of a lack of motivation.
- 8: Explain 1 way to overcome the obstacle of work commitments.
- 9: Explain 1 way to overcome the obstacle of family commitments.
- 10: Explain 1 way to overcome the obstacle of a lack of finances.
- 11: List 3 reasons why some targets could be unachievable.
- 12: Explain 1 way to avoid each of these reasons.
- 13: List 1 source of support for a person giving up smoking and explain how the support can help.
- 14: List 1 source of support for a person losing weight and explain how the support can help.
- 15: List 1 source of support for a person giving up alcohol and explain how the support can help.
- 16: List 3 barriers that someone may face to accessing care services.