

Proposal: Formal and informal HIV Health education at La Clinica.  
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This paper will focus on HIV the health education programs delivered at West Side Community Health Services La Clinica. The main goal is to analyze a specific health education session by connecting its curricula and best practices to philosophers' educational foundations and then making improvements. Educational philosophers considered are : Maxine Green, Jean-Fracois Lyotard, Neil Postman, Paulo Freire, Seymour Sarason and David Tyack.

Educational health institutions provide formal knowledge to students and communities (Apple, Gandin, & Moreira, 2001) by teaching what knowledge is to institutions. Formal and informal health education support public health by improving the health of the community, however, they struggle with political and social issues through their implementation which is discussed in this paper. The imbalances of formal and informal education are distorting the system rather than enriching it (Hargreaves, 2001).

Merging both formal and informal education brings the opportunity to learners to combine knowledge and interactions. Through learners' participations and knowledge about HIV education, formal and informal education at La Clinica is intertwined by following government trainings on HIV and encouraging community members' participation in both development and curricula implementation on health. The following paragraphs describe five philosophers' educational foundations and their connections with health surrounding strategies on HIV.

This proposal follows the National Minority AIDS on Council formal II, which follows four sections. Section I includes the topic of the presentation. Section II describes

issues which dictate problems or needs to discuss during the presentation. Section III explains the learning objectives and describes what the audience will learn from the presentation. Section IV explains the strategies, methods, and examples when merging philosophers' educational foundations with specific HIV health education training evaluation. This assessment will be developed by the facilitator and will include asking the audience to develop new strategies, discussions, and improvement areas. This tool will connect HIV educational interventions at La Clinica to previous philosophers' educational foundations, training scopes, discussions and areas of improvement. The audience will implement this mechanism at their workplace to improve current HIV educational programs.

This presentation is intended for audiences with mature knowledge about health education, formal and informal.

## Section II. Proposal topic.

The audience will apply philosopher's educational foundations explained in section I to specific health education programs when identifying formal and informal educational key points of the programs they provide to patients. The audience will design quality improvement projects and its major activities based on formal and informal HIV health education in the programs in which they work.

WSCHS La Clinica provides health care and is located in St. Paul, MN. La Clinica offers educational sessions to improve the health of the communities. La Clinica brings formal and informal education about HIV to patients and communities. Classes are set up in different formats: workshops for patients and/or other community members, individuals, or by sending the health message through media.

Via formal education, patients are taught by implementing the government approved curricula (trainings, face-to-face meetings, or individual sessions with a health educator, in public places as bars, restaurants or on streets). Students' feedback is important to assess the level of understanding about the information learners share. Furthermore, laboratory results and doctors' assessments are the formal tests patients have at La Clinica.

Among interactions and guidelines, learners develop a social environment in which they celebrate differences and construct knowledge. Learners use the knowledge they acquire surrounding HIV to improve their health. Health learners do not have a formal certification when they attend classes. The assessment of the program is based on government guidelines. Patients' tests are managed by doctors' diagnoses. In addition, the program develops strategies for those patients for whom reinforcement of the

knowledge is necessary. Physician's assessments and health educators' certify their knowledge and patients can discuss their well being. Their health knowledge will reduce emergency visits by maintaining a routine for follow up visits, taking their medications as prescribed by their physicians.

This presentation will focus on HIV health education programs delivered at West Side Community Health Services La Clinica. Programs connect its curricula design and implementation to thinkers' educational foundations when they describe formal and informal education and strategies to improve health programs. The selected thinkers are: Maxine Green, Jean-Francois Lyotard, Neil Postman, Paulo Freire, Seymour Sarason and David Tyack.

### Section III. Dictating specific issues to teach and discuss.

Patients need to enhance their formal and informal knowledge about HIV. By doing this, they will strengthen their immune systems by applying their knowledge to improve their own health. Individuals will spread their health message to others. As a consequence, learners are interacting by exchanging health education messages to their communities. This participation will involve community members, organizations and the government to develop, implement and construct the best health educational programs.

The philosophers' educational foundations improve the assessment of quality improvement (QI) projects on HIV. QI projects involve the participation of individuals, community members, organizations, facilitators and grantees. This QI's projects implement a robust HIV health education message following experts' foundations. This exercise is explained in Section IV.

Educational health institutions provide formal knowledge to students and communities (Apple, Gandin, & Moreira, 2001) by teaching what the current HIV knowledge is to institutions. Formal and informal health education support HIV programs by improving people's health; however, it struggles with political and social issues through its implementation which is discussed in this presentation. Communities' requirements on HIV need a balance of formal and informal education.

The government and communities are supporting formal and informal HIV education by using a pluralistic model to deliver the HIV health education messages. However, they are not encapsulating communities when promoting social interactions to transform public health. This perspective will help patients or students learn about democratic

pluralism. By developing a disciplined mind, individuals will understand and respect their opinions (Gardner) and manage the uncertainty of future events and enhance their creativity. The audience implements a disciplined mind by setting up their work methodology, dialoging, and discussing issues in different ways. Discussion can increase their tension, because their perceptions or connections might be one of seeing their workplace as an environment of crisis; however, it helps them to develop better teamwork connections because they open doors for a wider intelligence (Senge, 2008).

#### Section IV. Learning objectives.

This presentation will focus on HIV health education programs delivered at West Side Community Health Services (WSCHS) La Clinica. There is a connection between the HIV Health Education programs and philosophers' educational foundations. The audience will evaluate their own HIV educational programs or materials looking for opportunities to improve and state the future actions to be performed through project management initiatives. In this training, this presentation will focus on current health interventions and their areas for improvement. By performing and discussing the proposed exercise, the audience will relate to HIV education programs. Affected communities and organizations will transform the knowledge they have on HIV.

The following philosophers' educational foundations will be related to this curricula provided at WSCHS La Clinica to these educational foundations and they are:

- Maxine Green (Shen, 2001) believed that the purpose of formal education is for each student to gain multiple perspectives through common experiences with classmates. This will help students learn about democratic pluralism, life narrative and ongoing social change. She stated that informal education strengthens community and individual perspectives and provides multiple constructions of reality. She worries that we will become a largely isolated society that only cares about building new and improved technology.
- Jean-Francois Lyotard (Zemblas, 2001) believed that the purpose of education is to teach people to think rather than what to think. He believed in lifelong learning.

Lyotard (Zemblas) asserted that people do not learn from consensus but from the celebration of our differences. Lyotard (Zemblas) focuses on the importance of the development of language as a way to learn. As informal education, Lyotard (Zemblas) states that in informal education performance knowledge cannot teach someone to judge what is true and what is beautiful.

- Former elementary teacher, Neil Postman (Inbar, 2001) believes that schools are the fountain of knowledge, and that students attend to learn. The main purpose of informal education is the "connection between forms of human communication and the quality of culture." (Inbar, 2003, pp. 234). His argument here is essentially that without human interaction, face to face, our culture slowly is being degraded to the point that we lose our cultural heritage and identity.
- Paulo Freire (Apple, Gandin & Moreira, 2001) states that both students and teachers are unfinished human beings. Schools, which represent the formal education, have taught informal communities. He states that the current formal education excludes millions of people when illustrating inequalities in the social, political and economic system. Due to this exclusion, Freire argues the classroom must go beyond their current boundaries, implementing and transforming both formal and informal education into a robust unified system.
- Seymour Sarason (Hargreaves, 2001) states that the overarching purpose of schooling is to stimulate, capitalize on, and sustain the kind of motivation, intellectual curiosity, awe, and wonder that children possess when they begin schooling. He believes that the overarching purpose of education was to free, not indoctrinate, minds, to produce questioners and not narrow or mindless

conformists, to inculcate the morality undergirding freedom, not a morality that closed minds to new or alternative ideas. Seymour Sarason (Hargreaves) states that informal education is a set of actions altering the real educational community is using to assist society and students to create their unique cultural and historical characteristics.

- Tyack (2003) states that the founders of the nation were convinced that the republic could survive only if its citizens were properly educated. Thus the common school provided a place to educate for the collective purpose to discover common civic ground in preserving political beliefs. He viewed the homogeneous citizen as being the ideal product of public school and believed that Americans would remain free only to the degree that citizens shared political principles and civic virtues.

Section V. Teaching or discussing strategies and methods that will be employed. Include models or examples, if possible.

This strategy connects La Clinica HIV health education sessions to philosophers' educational foundations explained in section IV.

The learning method consists of relating educational foundations with specific training on HIV. Then, the facilitator will propose actions to improve current health interventions.

Through this exercise, the audience analyzes the specific health education session and connects with previous philosophers' educational foundations. There is a connection to what philosophers understand formal and informal education is. Finally, the opportunities and planning management strategy is developed.

In this exercise, the facilitator related the specific training "Making sure your health care is the best", developed by AIDS Institute in New York. This exercise will connect previous philosophers' educational foundations to this specific training on HIV. The National Quality Center (NQC) (2010) published it on its web site. In this exercise, the facilitator focuses on these specific goals connecting to formal and informal education. Patients learn to understand what clinical indicators are such as (a) CD4 T-Cells counts, (b) medical visits, (c) tuberculosis screening, (d) syphilis screening, (e) high antiretroviral medications for people with AIDS. Depending on the participants number the number of indicators will be established. It is

recommended to have three participants per indicator. The audience will analyze and discuss their health care priorities.

The facilitator will present the following table. It merges philosophers' educational foundations with specific HIV intervention training. Finally, the facilitator will explain the areas to improve for this specific HIV training which include the quality improvement projects. La Clinica and the attendees to this workshop strengthens their patients' health because of the execution of the QI's projects, which are the outcomes of this proposal.

Philosopher's educational foundation	Philosopher's education foundation	Current interventions on training	Areas for improvements
Maxine Green (Shen, 2001)	<p>The purpose of formal education is for each student to gain multiple perspectives through common experiences with classmates. This will help students learn about democratic pluralism, life narrative and ongoing social change. She states that informal education strengthens community and individual perspectives and provide multiple constructions of reality. She worries that we will become a largely isolated society that only cares about building new and improved technology.</p>	<p>This training includes discussing patients' and grouping' health priorities. Learners will compare their priorities with their small group and then to the general audience.</p> <p>Learners' priorities care are: doctors discussions, lab results discussions, get and understand medications, etc.</p> <p>Participants will focus on their priorities and think about them if they have never have thought about them. Then, they will create the most important to less important needs list and discuss with others. Doing this, learners are gaining multiple perspectives with their classmates. They are making plural their health life priorities by performing a social health exchange.</p> <p>Both learners and facilitators can improve current methodology to detect priorities and its analysis. Updating this process will create a unified community of learners and will improve the technology used.</p>	<p>Improving current methods to detect health priorities inventories.</p> <p>Design new exercises to discuss and assess learners' individual and general priorities. How will learners assimilate other's priorities? How will learners contradict their health priorities?</p> <p>Create new methods to manage priorities and its analysis. Teaching the method in which only two priorities are analyzed at same time. Then continue the analysis until all priorities are finished. At the end, the most priority selected in the most important to each learner.</p>

Philosopher	Philosopher's education foundation	Current interventions on training	Areas for improvements
Jean-Fracois Lyotard(Zemblas, 2001)	The purpose of education was to teach people to think rather than what to think. He believed in lifelong learning. Lyotard (Zemblas) asserted that people do not learn from consensus but from the celebration of our differences. Lyotard (Zemblas) focuses on the importance of the development of language as a way to learn. As informal education, Lyotard (Zemblas) states that in informal education performance knowledge cannot teach someone to judge what is true and what is beautiful.	By their classes, learners will have a certain level of knowledge about quality indicators. However, does education means the same for learners? After health intervention, are all students equal?  Facilitators will design best practice to allow learners to assimilate, contradict and accommodate knowledge at their own speed, avoiding judgments, but sharing experts' knowledge.	Improve current exercise to compare learners' explanations about quality indicators and experts' opinion. Facilitator can develop a technique to increase assimilation avoiding learners' rejections.
Neil Postman (Inbar, 2003)	Schools are the fountain of knowledge, and that students attend to learn. The main purpose of informal education is the "connection between forms of human communication and the quality of culture." (Inbar, 2003, pp. 234). His argument here is essentially that without human interaction, face to face, our culture slowly is being degraded to the point that we lose our cultural heritage and identity.	Learners attend classes and acquire knowledge about quality indicators and their health priorities and understanding their right to receive a good medical service. Through their discussions, learners are communicating their experiences in different situations they connected to WSCHS La Clinica, its services and employees.	Continue teaching what customer service is and what they receive at La Clinica. Teach how to make a complaint without fear.  Improve current small groups exercise to communicate issues patients have had in La Clinica.  Develop strategies about current patients can support each other. Through their interactions, learners strengthen their cultural heritage and identity.

Philosopher	Philosopher's education foundation	Current interventions on training	Areas for improvements
Paulo Freire	<p>Both students and teachers are unfinished human beings. Schools, which represent the formal education, have taught informal communities. He states that the current formal education excludes millions of people when illustrating inequalities in the social, political and economic system. Due to this exclusion, Freire argues the classroom must go beyond their current boundaries, implementing and transforming the both formal and informal education into a robust unified system.</p>	<p>By participating more, the students or patients will become newcomers to the current HIV, health education curricula. It will reduce negative patients' perception about the educational system. Health educators can design and update current curricula based on communities needs. Ask permission to avoid copyrights issues.</p> <p>By teaching and facilitating what formal health knowledge is, it is not sufficient to create a common knowledge, but rather to share their professional experiences? Some facilitators, including myself, teach their informal knowledge. It describes health education as political and the role of the government must be more intense when developing curricula to transform into a better society and into a robust unified educational system (Apple et al., 2001) (Reagan, 2005).</p>	<p>Increasing training frequency. Design the Gantt chart to analyze number of trainings, connected to other resources such as available facilitators and rooms, educational materials and students. Inventory of cultural traditions, symbols, groups and subgroups. Managing cultural issues related to patients' formal and informal HIV education and philosophers' educational foundations.</p>

Philosopher	Philosopher's education foundation	Current interventions on training	Areas for improvements
Seymour Sarason (Hargreaves, 2001)	Learners are free to change and apply current exercised related to HIV/HAB indicators (Informal Educ.). The purpose of schooling is to stimulate, capitalize on, and sustain the kind of motivation, intellectual curiosity, awe, and wonder that a child possesses when he or she begins schooling (Formal Education).	Improving level of students' involvement on governmental decision related to HIV education curricula.	Design the need assessment form to prioritize patients HIV knowledge based on: (a) Level of education on HIV (Formal and informal), (b) Years living with HIV/AIDS, (c) Generations' perception on HIV.
David Tyack	The founders of the nation were convinced that the republic could survive only if its citizens were properly educated. Thus the common school provided a place to educate for the collective purpose to discover common civic ground in preserving political beliefs. They thought of the homogeneous citizen as being the ideal product of public school. They believed that Americans would remain free only to the degree that citizens shared political principles and civic virtues.	<p>My students are becoming better citizens because through their classes, they are accessing federal budgets to stop the spread of HIV by transforming public health. As a consequence, my students and I are supporting the U.S. government health initiatives.</p> <p>LA Clinica's HIV federal grant focuses on the Latino population. This grant is successful by focusing on one specific population. However, it individualizes and promotes distinctions and creates injustices (Tyack) when patients from outside the specific population require access to services and they cannot get them.</p> <p>The government is developing HIV education programs to assimilate immigrants, making plural the</p>	<p>Both the government and communities are supporting formal and informal ways by using a pluralistic model to deliver HIV health education messages, not encapsulating communities when promoting social interactions to transform public health. This will help students learn about democratic pluralism, life narrative, and ongoing social change (Shen, 2001).</p> <p>Develop strategies for a wider perspective and being inclusive and expanding opportunities to informally educate both patients and providers.</p> <p>One failure is to focus on one specific population and comprehensive and cultural health funds.</p>

		<p>formal knowledge and promoting social interactions. It improves the public health, reducing new HIV cases, impacting citizens' behaviors and supporting health policies.</p>	<p>The individualizes services will increase discrimination against patients who do not belong to specific minorities.</p>
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Philosopher's educational foundation	Philosopher's education foundation	Current interventions on training	Areas of improvements
<p>Additional information about Paolo Freire</p>	<p>By creating a quality community in the HIV Program in La Clinica, patients are constructing knowledge by assimilating, accommodating and contradicting current quality indicators. Formal education and informal education are visible and intertwined in this exercise.</p>	<p>By following current curricula designed by AIDS Institute and formal facilitation, patients are contradicting current knowledge and assimilate new information. By participation in teams, patients discuss in small groups the meaning of each HIV quality indicator, accommodation, individual and group knowledge</p>	<p>Design a health care plan to revisit current knowledge about quality indicators to patients. Develop metrics to measure the equilibrium of knowledge (assimilation, accommodation and contradicting processes) Increase current trainings for all patients, reinforcing the knowledge equilibrium.</p>

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