The Use of Visual Aids in Teaching Patients

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The importance of nutrition in the maintenance of good health is being increasingly recognized. The need to plan special diets so that they provide as nearly as possible the normal requirements of the individual and fit in to his daily routine is generally accepted and is the foundation of all teaching in an enlightened and progressive dietetic department. This being so, the physician and dietitian have an excellent opportunity, when instructing a patient in the management of his special diet, to influence the dietary habits not only of the patient but indirectly of his whole family.

The use of visual aids in teaching patients is the main point of my paper. The principles underlying the choice and proper use of these aids, if understood for normal nutrition, can be modified and adapted readily to special circumstances.

Types of visual aids

The visual aids at our disposal can be classified as follows : posters, charts, models, practical demonstrations or displays of foods, film strips, films.

In the preparation of any of these there is one important question to ask : for whom are these aids intended ? Any poster, chart or other aid that becomes available is apt to be seized upon by all manner of teachers to instruct audiences of many differing grades of intelligence. A number of teachers complain, and criticize the producers of such aids when, in reality, their own powers of selection of material for teaching are at fault. A producer of any visual aid must select just the right material, must know what to leave out and must decide upon the most suitable way to present material to the particular audience. This is difficult and needs careful study, and I would suggest that the type of teaching that can be carried out in an out-patient department calls for special care and skill in selection of material. For this reason, home-produced visual aids are probably the most satisfactory because they can be designed to meet an exact need. Careful thought should also be given to the information which it is appropriate and desirable to disseminate in this way to out-patients.

In few out-patient departments is it possible to plan and carry out any systematic teaching. For this reason it is important not to attempt too much. A few well-selected posters which teach one point only may be most suitable at first. This very simple level of teaching may be used in a busy welfare clinic where mothers can sit and absorb these facts while waiting. In these circumstances such posters should be changed frequently or used in rotation, not left hanging, as so often happens, until curled up with age, dust and dehydration. An advance on this is a

series of posters or charts to illustrate more than one point. Again, no formal instruction is necessary but the patient's attention can be drawn to charts illustrating : three functional food groups, meal patterns, nutritional needs, comparative food values.

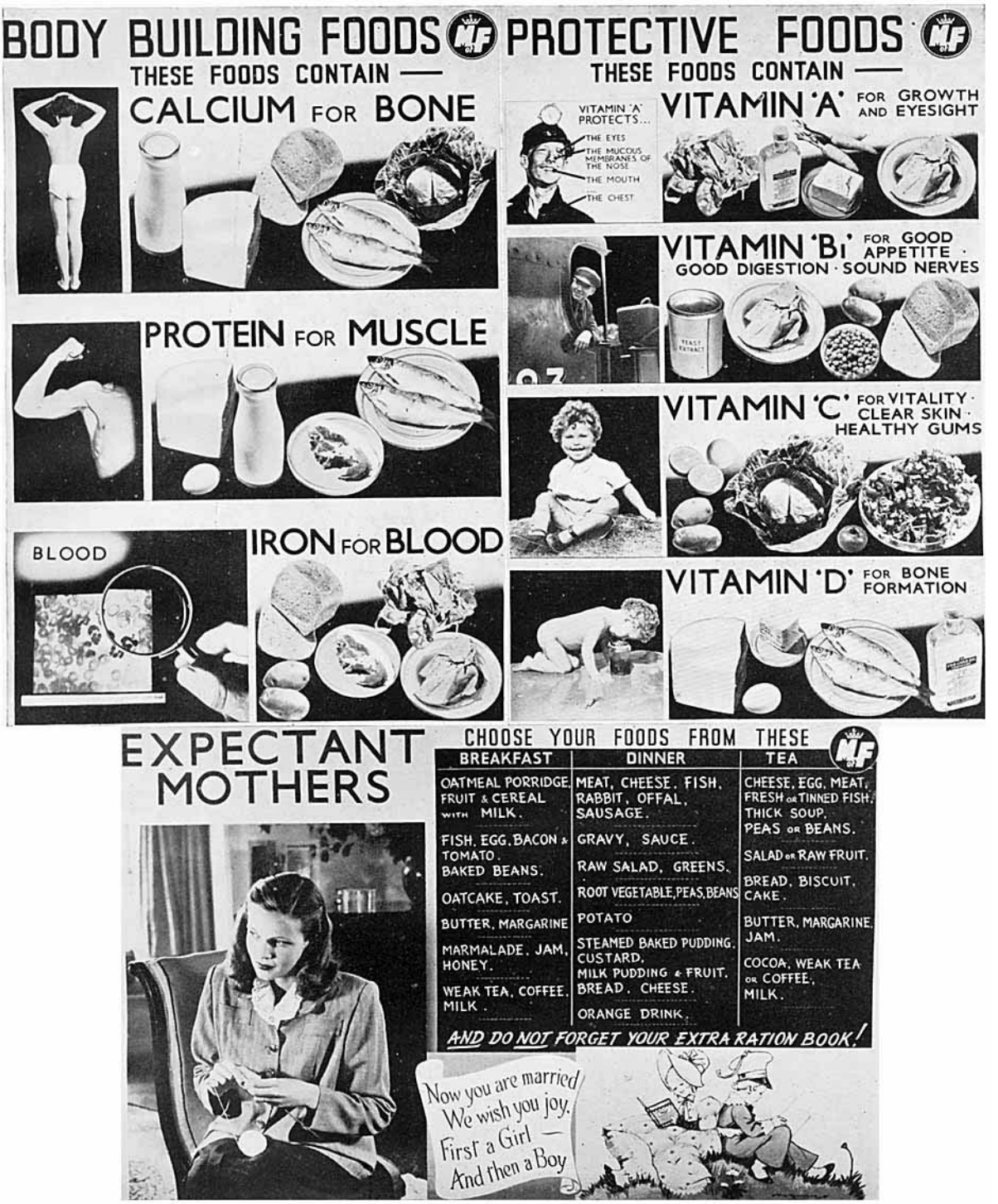
By use of these charts the need for various groups of foods, the ways in which one food can be substituted by another, and the care in preparation needed to preserve nutrients may be taught and become familiar to patients. Three such charts prepared by the Ministry of Food, are shown in Pl. 1.

These guide charts do not, however, overcome the dietitian's problem of assessing the quantity of food. The average person's judgment of a ' good helping ' or of ' a slice of bread ' may vary very considerably, yet the approximate assessment of dietary intake may be of considerable importance. Moreover, many a mother of young children is beset by the fear of over- or under-feeding her child and can derive great help from a practical demonstration of models prepared to scale of individual foods, or of composite dishes. While teaching quantities in this way, there is a good opportunity to discuss times of meals, irregular meals, the over-burdening of the stomach with large meals, and the omission of breakfasts. All these are practical points of good nutrition which cannot be stressed too much even to more intelligent patients.

The practical demonstration can be carried further by showing special recipes and diets for various disorders. The following are suggested for such demonstrations : bulky, low-calorie dishes for the obese ; meals for patients with gastric disorders illustrating the use of naturally coloured foods (i.e. foods of high vitamin and often high iron content) ; recipes for diabetic patients ; bad meals showing the excessive use of foods of high starch content ; meals for children. The way to avoid an excessive intake of carbohydrate in recipes for diabetics is worthy of emphasis. Typical meals for children can be demonstrated and the significance of the components explained. The emphasis should not be on cooking technique (a full cookery demonstration is inappropriate), but a well-labelled display, with recipes and leaflets to be taken away, will attract attention and arouse interest.

The economics of this kind of teaching at once spring to mind in these days of stringency. For reasons of cost and owing to lack of staff such methods are avoided or abandoned. The use of student-dietitians, of nurses in training, of students from domestic science colleges, or, dare I suggest, of medical students, may prove a solution. Many would consider it an interesting and valuable experience, given the right lead. They would disseminate practical knowledge of the principles of nutrition and would improve their own understanding of the way in which people use and misuse their food and their bodies. Where students are not available co-operation of local domestic-science teachers or of women's organizations might be sought.

Films and film strips are more suitable for formal teaching. They are used to a great extent in health education campaigns of local public health authorities. During these campaigns, mothers' clubs arrange special evenings when instruction on simple nutrition and 'feeding the family' competes with that on clothing, care



Visual aids prepared by the Ministry of Food

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of feet, and similar topics. It is more difficult to use these visual aids in out-patient clinics. The film strip, however, has greater possibilities than the film. As many or as few frames of the strip can be shown as are appropriate to the occasion.

The number of film strips dealing with simple nutrition is limited, and generally the treatment of the subject is serious and rather formal. The film strip, with coloured cartoons, is in demand in Canada and in the United States of America to teach nutrition and hygiene of food. Such film strips have a great appeal but are costly to produce.

Many nutrition films made in this country are again rather formal. They are intended for the more scholastic approach of the classroom in a grammar school or training college. The material is often excellent but a fair knowledge of biology, of elementary physiology and of chemistry is assumed. A set of three films, recently produced by the Ministry of Food, has, however, been found to have a wide appeal for lay audiences. The films are called : *Body Building Foods*, *Protective Foods* and *Energy Foods*. They were originally intended for use in the housecraft room of a secondary modern school for boys and girls aged 13–15 years. The films have already been shown to groups of house mothers in charge of children in residential homes, to cooks in school canteens, to students of mental health and of social science, and have aroused new interest in a subject which, regrettably, is often considered dull. Films, however, are not ideal for teaching the fundamental points of nutrition. From the three films three film strips are being prepared. These will have much of the essential information of the films. They will be used for day-to-day teaching. The film may later animate and co-ordinate the principles of simple nutrition taught by the strip. These film strips and films will we hope also be of use in teaching out-patients.

It is of fundamental importance to present nutrition as an interesting part of everyday life. The opportunities of dietitians, doctors and nurses are great. They can be greatly helped by the use of visual aids. These aids, to be effective, must be used with care and forethought.

SUMMARY

1. Visual aids can be used to teach normal nutrition even when the dietitian is dealing with the deviations from the normal found in hospitals and in clinics.
2. An outline is given of the types of visual aid available for such teaching.
3. The wider use of visual aids is urged.

Diet and Obesity

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Obesity is unquestionably the commonest nutritional disorder in present-day Britain and gives rise to more ill-health than all the vitamin deficiencies put together. The skill of a trained dietitian is invaluable in the treatment of this disease. Even