

Exploring the Efficacy of Solution-Focused Counselling in Enhancing Communication Skills for Health Education: A Case Study of Selected Communities in Delta State

¹Lokoyi Ose-Lovet Osita (PhD), ²Nwadei Mary Oluchukwu & ³Nwadei Arthur Solomon

¹Department of Science Education

²Department of Language and Communication Education

Department of Primary Education Studies

Federal College of Education (Technical)

Asaba, Delta State, Nigeria

Phone: +2347033441419; +2348030470831; +2348039367693

E-mails: saintloveth@gmail.com; nwadeioluchi@gmail.com; nwartsol@gmail.com

ABSTRACT

This study investigates the efficacy of solution-focused counseling in enhancing communication skills for health education across diverse educational institutions in Delta State. Encompassing primary, secondary, and tertiary levels, the research aims for comprehensive population coverage, leveraging Delta State's socio-cultural diversity and relevance to health education in Nigerian communities. Employing random sampling, 1000 questionnaires were distributed among stakeholders involved in health education activities, yielding a robust 991 responses. Through quantitative analysis using SPSS, participants generally perceived solution-focused counselling positively for communication skills enhancement. Nonetheless, challenges persist in translating these gains into sustained behaviour change. Factors such as resource availability, cultural appropriateness, and organizational support significantly influence the adoption and implementation of counselling initiatives. Recommendations to bolster sustainability and effectiveness include developing counsellor training programs, fostering partnerships with community leaders, conducting regular impact assessments, and integrating culturally tailored elements into counselling curricula. This research underscores the potential of solution-focused counselling to enhance communication skills and foster positive behaviour change within Delta State communities. Addressing identified challenges and implementing recommended strategies can amplify counselling initiatives' impact, ultimately contributing to improved health outcomes and community well-being.

Keywords: Solution-Focused Counselling, Communication Skills Enhancement, Health Education, Strengths-Based Approach

Journal Reference Format:

Lokoyi Ose-Lovet Osita, Nwadei Mary Oluchukwu & Nwadei Arthur Solomon (2025): Exploring the Efficacy of Solution-Focused Counselling in Enhancing Communication Skills for Health Education: A Case Study of Selected Communities in Delta State. *Social Informatics, Business, Politics, Law, Environmental Sciences & Technology Journal*. Vol. 11, No. 3. Pp 17-28. www.isteams/socialinformaticsjournal. [dx.doi.org/10.22624/AIMS/SIJ/V11N3P2](https://doi.org/10.22624/AIMS/SIJ/V11N3P2)

1. INTRODUCTION

Communication skills are widely acknowledged as a cornerstone of effective healthcare delivery, with profound implications for patient-provider interactions, treatment adherence, and health outcomes (Maeda and Socha-Dietrich, 2021). Effective communication not only facilitates the exchange of information but also nurtures mutual understanding, trust, and cooperation between healthcare professionals and patients, thereby enhancing the quality of care and patient satisfaction. This sentiment is echoed by Denniston et al., (2017), who emphasize the growing recognition of communication skills training as an essential component of healthcare education curricula, aimed at equipping future practitioners with the requisite competencies for meaningful patient engagement. However, perspectives on the methods and emphasis of communication skills training within healthcare education vary among scholars. While some researchers advocate for a traditional approach that prioritizes didactic lectures and role-playing exercises (Barranquero-Herbosa, et al., 2022). This diversity of viewpoints underscores the on-going debate within the field regarding the most effective strategies for imparting communication skills to healthcare professionals.

Furthermore, there is a growing recognition of the need to move beyond deficits-based models of communication skills training, which focus primarily on identifying and addressing weaknesses, to embrace strengths-based approaches that capitalize on individuals' existing competencies and resources (Enriquez, 2023). This shift in perspective aligns with the principles of positive psychology, which emphasize the cultivation of strengths and virtues to promote personal growth and well-being (Niemic, 2023). By adopting a strengths-based approach, communication skills training programs may be better positioned to empower healthcare professionals to develop authentic and impactful communication styles that resonate with patients and colleagues alike. While there is consensus regarding the importance of communication skills in healthcare education and practice, there exists divergence in opinion regarding the most effective methods and philosophical underpinnings of communication skills training.

1.1 Statement of the problem

The field of health education in Delta State faces a significant challenge regarding the enhancement of communication skills among health educators and community members. Despite the recognized importance of effective communication in health promotion and disease prevention efforts (McKenzie, 2022), there exists a noticeable gap in understanding the most effective strategies for fostering robust communication within this context. Traditional approaches to communication skills training often lack specificity to the unique needs and challenges encountered by health educators and community members in Delta State. Furthermore, existing literature predominantly focuses on communication skills training within clinical settings, overlooking the distinct dynamics of health education in community settings.

Within the context of Delta State communities, there is a pressing need to evaluate the efficacy of solution-focused counselling as a potential solution to this communication skills deficit. Solution-focused counselling represents a promising approach that emphasizes strengths-based interventions and collaborative goal-setting (Seko, and Lau, 2022). However, its application within the realm of health education in Delta State remains largely unexplored.

By addressing this gap in knowledge, this study seeks to elucidate the viability of solution-focused counselling as a means of enhancing communication skills among health educators and community members, thereby contributing to more effective health promotion efforts within the region. Moreover, while numerous studies have investigated the short-term impacts of communication skills interventions, there is a paucity of research examining the sustained effects of such interventions over time within the specific context of Delta State communities. This gap in knowledge hinders the development of evidence-based practices tailored to the long-term needs of health education programs in the region. By investigating the long-term effects of solution-focused counselling on communication skills retention and behaviour change among targeted Delta State communities, this study aims to address this critical knowledge gap and provide insights into the durability of communication skills improvements within community-based health education initiatives.

1.2 Research Objective

The objectives were formulated to guide this study

1. Evaluate solution-focused counselling's effectiveness in enhancing communication skills for health educators and community members in Delta State.
2. Measure the impact of solution-focused counselling on community members' comprehension and application of health education messages in selected Delta State communities.
3. Investigate factors affecting the adoption and implementation of solution-focused counselling for improving communication skills in health education within Delta State communities.
4. Analyse the long-term effects of solution-focused counselling on communication skills retention and behaviour change in health education practices among targeted Delta State communities.

1.3 Research Questions

1. How does solution-focused counselling contribute to enhancing communication skills among health educators and community members in Delta State?
2. What are the observed changes in community members' comprehension and application of health education messages following participation in solution-focused counselling sessions in selected Delta State communities?
3. What are the key factors influencing the adoption and implementation of solution-focused counselling for improving communication skills in health education within Delta State communities?
4. What are the sustained effects of solution-focused counselling on communication skills retention and counselling change in health education practices among targeted Delta State communities over an extended period?

1.4 Conceptual Clarification

Solution-focused counselling (SFC) is a strengths-based, goal-oriented approach to counselling that focuses on helping clients identify and build upon their strengths and resources to achieve their desired goals (King et al., 2022). SFC is based on the belief that clients are the experts in their own lives and that they can find solutions to their problems. In the context of health education, SFC can be used to help clients develop the communication skills they need to effectively manage their health (Martenstyn and Grant, 2022).

Solution-focused counselling, derived from solution-focused therapy (SFT), embodies a distinct therapeutic approach that diverges from traditional deficit-based models commonly found in counselling and therapy (Heffner, and Cowan, 2022). Rather than dwelling on identifying and rectifying weaknesses or problems, solution-focused counselling places a strong emphasis on recognizing and amplifying individuals' existing strengths and resources (Bannink, 2015). This shift in focus from deficits to strengths is fundamental to the philosophy of solution-focused counselling. One of the central tenets of solution-focused counselling is its collaborative nature. Therapists work alongside clients in a partnership, aiming to co-create solutions and build on clients' inherent abilities (Richter, 2015). This collaborative approach fosters a sense of empowerment and autonomy within clients, as they actively participate in the therapeutic process and take ownership of their progress.

Moreover, solution-focused counselling adopts a future-oriented perspective, focusing on clients' goals and aspirations rather than past problems or failures. Therapists help clients envision their desired outcomes and explore the steps needed to achieve (Richter, 2015). By directing attention towards a positive future trajectory, solution-focused counselling instils hope and motivation in clients, inspiring them to take actionable steps towards their goals. In the context of communication skills enhancement, solution-focused counselling applies its principles to empower individuals to develop effective communication abilities. Rather than fixating on deficiencies in communication, therapists identify and amplify clients' existing communication strengths and resources (Holland and Nelson, 2018). This strengths-based perspective cultivates confidence and self-efficacy in individuals, enabling them to harness their innate abilities to navigate interpersonal interactions more effectively.

Communication skills encompass a range of abilities, including verbal and nonverbal communication, active listening, empathy, and conflict resolution. Effective communication skills are essential for conveying information, building rapport, and fostering mutual understanding in healthcare and educational settings (Meadus, 2023). Within the context of this study, communication skills refer to the capacity to convey health education messages clearly and effectively to diverse audiences in Delta State communities. Health education involves the dissemination of information and the promotion of health-related behaviours to individuals and communities (Stellefson et al., 2015). It encompasses various strategies, such as workshops, campaigns, and community outreach programs, aimed at empowering individuals to make informed decisions about their health.

2. THEORETICAL FRAMEWORK

The Social Cognitive Theory

Social Cognitive Theory (SCT) started as the Social Learning Theory (SLT) in the 1960s by Albert Bandura. It developed into the SCT in 1986 and posits that learning occurs in a social context with a dynamic and reciprocal interaction of the person, environment, and behaviour. The unique feature of SCT is the emphasis on social influence and its emphasis on external and internal social reinforcement. SCT considers the unique way in which individuals acquire and maintain behaviour, while also considering the social environment in which individuals perform the behaviour.

The theory takes into account a person's past experiences, which factor into whether behavioural action will occur. These past experiences influence reinforcements, expectations, and expectancies, all of which shape whether a person will engage in a specific behaviour and the reasons why a person engages in that behaviour.

The Basic Tenets of Social Cognitive Theory

1. **Observational Learning:** SCT posits that individuals learn by observing others' behaviour, particularly when the observed behaviours followed by positive consequences or rewards. This process, known as observational learning or modelling, allows individuals to acquire new skills, behaviours, and attitudes through imitation and reinforcement.
2. **Self-Efficacy:** Central to SCT is the concept of self-efficacy, which refers to individuals' beliefs in their ability to successfully perform specific tasks or behaviours. Bandura proposed that self-efficacy beliefs play a crucial role in determining motivation, effort, and persistence in goal-directed activities. High self-efficacy individuals are more likely to set challenging goals, exert greater effort, and persevere in the face of obstacles.
3. **Reciprocal Determinism:** SCT emphasizes the bidirectional relationship between individual characteristics, behaviour, and the environment. According to this principle of reciprocal determinism, individuals not only influence their environment through their actions but are also influenced by environmental factors. This dynamic interplay shapes behaviour over time, with individuals actively selecting and interpreting their experiences based on cognitive processes.
4. **Behavioural Reinforcement:** SCT recognizes the role of reinforcement and punishment in shaping behaviour. Positive reinforcement, such as praise or rewards, increases the likelihood of a behaviour being repeated, while negative reinforcement, such as criticism or punishment, decreases the likelihood of a behaviour occurring again. Through reinforcement processes, individuals learn which behaviours are desirable and which are not within their social environment.

Social Cognitive Theory is particularly suitable for understanding behaviour change in various contexts, including health education. Its emphasis on observational learning highlights the importance of modelling and vicarious experiences in acquiring new skills and behaviours. In the context of health education, SCT provides insights into how individuals learn health-related behaviours by observing others' actions, such as health educators or peers. Additionally, the concept of self-efficacy is highly relevant for understanding individuals' confidence in their ability to adopt and maintain health-promoting behaviours. By considering environmental influences and behavioural reinforcement, SCT offers a comprehensive framework for designing effective interventions aimed at promoting behaviour change and improving health outcomes. Overall, Social Cognitive Theory's multidimensional approach makes it well-suited for exploring the complex interplay between cognitive, behavioural, and environmental factors in health education and behaviour change initiatives.

3. METHODOLOGY

The study area for this research encompasses Delta State communities, selected through a random sampling method. These schools represent a diverse range of educational institutions, including primary, secondary, and tertiary levels, to ensure comprehensive coverage of the population. Delta State was chosen as the research setting due to its socio-cultural diversity and relevance to the study's focus on health education and communication skills enhancement within Nigerian communities.

A random sampling technique was employed regions within Delta State. Within each selected school, 1000 questionnaires were distributed among students, teachers, and other relevant stakeholders involved in health education activities. The questionnaires were designed to gather quantitative data on participants' perceptions, attitudes, and experiences related to communication skills in health education.

Upon retrieval of the questionnaires, a total of 991 responses were obtained, representing a high response rate. Quantitative analysis was conducted using statistical software to analyse the data collected from the questionnaires. Quantitative data was analysed using appropriate statistical software SPSS was employed for data processing and analysis.

4. DATA ANALYSIS AND PRESENTATIONS

Research Objective 1: Evaluate solution-focused counselling's effectiveness in enhancing communication skills for health educators and community members in Delta State.

S/N	Items	X	Decisions
1	I feel more confident in my ability to communicate effectively after participating in solution-focused counselling.	2.6	Agree
2	Solution-focused counselling has helped me identify and utilize my existing communication strengths in health education settings.	2.8	Agree
3	The communication skills training provided through solution-focused counselling has improved my interactions with colleagues and community members.	2.7	Agree
4	I believe solution-focused counselling has enhanced my understanding of the importance of effective communication in health education.	3.2	Strongly Agree
5	Solution-focused counselling has equipped me with practical strategies for addressing communication challenges encountered in health education practice.	2.6	Agree

The findings of research question 1 reveal that participants generally perceive solution-focused counselling as effective in enhancing their communication skills within the context of health education in Delta State communities. With respondents reporting average scores of 2.6 for feeling more confident in their ability to communicate effectively, 2.8 for recognizing and utilizing their existing communication strengths, and 2.7 for experiencing improvements in interactions with colleagues and community members, the study suggests a positive impact of solution-focused

counselling. Moreover, participants strongly agreed ($X = 3.2$) with gaining a deeper understanding of the importance of effective communication in health education.

Additionally, the counselling was perceived to equip individuals with practical strategies for addressing communication challenges encountered in their practice, reflected in an average score of 2.6. These findings imply that solution-focused counselling holds promise as a valuable intervention for enhancing communication skills among health educators and community members in Delta State. By bolstering confidence, improving interactions, and providing practical strategies, this approach can contribute to more effective health education delivery and engagement, ultimately leading to improved health outcomes and community well-being.

Research Objective 2: Measure the impact of solution-focused counselling on community members' comprehension and application of health education messages in selected Delta State communities.

S/N	Items	X	Decisions
6	The health education messages delivered through solution-focused counselling were clear and easy to understand.	2.6	Agree
7	I feel motivated to apply the health education messages learned through solution-focused counselling in my daily life.	2.7	Agree
8	Solution-focused counselling has helped me better retain and recall the health education messages discussed during the sessions.	2.5	Agree
9	I have noticed positive changes in my health-related behaviours as a result of participating in solution-focused counselling.	2.8	Agree
10	Solution-focused counselling has increased my awareness of the importance of adopting healthy behaviours for overall well-being.	3.0	Strongly agree

The findings from research question 2 underscore the positive impact of solution-focused counselling on community members' comprehension and application of health education messages within selected Delta State communities. Participants perceived the health education messages delivered through solution-focused counselling as clear and easy to understand, indicating an average score of 2.6, while expressing motivation to apply these messages in their daily lives with an average score of 2.7. Additionally, solution-focused counselling was seen to enhance retention and recall of health education messages, as indicated by an average score of 2.5. Notably, participants reported positive changes in their health-related behaviours resulting from participating in solution-focused counselling, with an average score of 2.8, and demonstrated a strong agreement on the increased awareness of the importance of adopting healthy behaviours for overall well-being, with an average score of 3.0. These findings suggest that solution-focused counselling is instrumental in fostering comprehension, application, and retention of health education messages, thereby promoting positive health outcomes and behaviours within Delta State communities.

Research Objective 3: Investigate factors affecting the adoption and implementation of solution-focused counselling for improving communication skills in health education within Delta State communities.

S/N	Items	X	Decisions
11	The availability of resources (e.g., trained counsellors, and materials) positively influenced my experience with solution-focused counselling.	2.9	Agree
12	Organizational support (e.g., from school administration, and community leaders) facilitated the implementation of solution-focused counselling sessions.	2.5	Agree
13	The cultural appropriateness of solution-focused counselling interventions positively affected my engagement and participation.	2.3	Disagree
14	I found the scheduling and logistics of solution-focused counselling sessions convenient and accessible.	2.5	Agree
15	Personal motivation and interest significantly influenced my willingness to participate actively in solution-focused counselling.	3.0	Strongly agree

The findings from research question 3 illuminate the diverse factors shaping the adoption and implementation of solution-focused counselling aimed at enhancing communication skills in health education within Delta State communities. Participants highlighted the positive influence of resource availability, such as trained counsellors and materials, indicating an average score of 2.9. While organizational support from school administration and community leaders was perceived as facilitating counselling implementation, scoring an average of 2.5, cultural appropriateness of the interventions received a lower rating, averaging at 2.3.

Additionally, participants found the scheduling and logistics of counselling sessions to be convenient and accessible, with an average score of 2.5. Moreover, personal motivation and interest emerged as significant drivers, with participants strongly agreeing, scoring an average of 3.0. Overall, these findings underscore the importance of considering various factors, including resource availability, organizational support, cultural appropriateness, and personal motivation, to ensure the successful adoption and implementation of solution-focused counselling initiatives within Delta State communities.

Research Objective 4: Analyse the long-term effects of solution-focused counselling on communication skills retention and behaviour change in health education practices among targeted Delta State communities.

S/N	Items	X	Decision
16	I continue to apply the communication skills learned through solution-focused counselling in my interactions with others.	2.8	Agree
17	The benefits of solution-focused counselling on my communication skills have persisted over time.	2.6	Agree
18	I have noticed sustained improvements in my health-related behaviours as a result of participating in solution-focused counselling.	2.3	Disagree
19	Solution-focused counselling has positively influenced my overall approach to health education practices in my community.	2.6	Agree
20	I believe that the effects of solution-focused counselling will continue to benefit me in my future health education endeavours.	2.7	Agree

The findings from research question 4 shed light on the enduring effects of solution-focused counselling on communication skills retention and behaviour change in health education practices within targeted Delta State communities. Participants affirmed their continued application of the communication skills acquired through counselling, reflecting an average score of 2.8, while acknowledging the persistence of counselling benefits on their communication skills over time, with an average score of 2.6. However, participants expressed disagreement regarding sustained improvements in health-related behaviours resulting from counselling, scoring an average of 2.3. Nonetheless, they recognized the positive influence of counselling on their overall approach to health education practices in their community ($X = 2.6$) and remained optimistic about its continued benefits in future health education endeavours, with an average score of 2.7. These findings suggest that while solution-focused counselling yields positive outcomes in communication skills retention and overall approach to health education practices, challenges may exist in achieving sustained changes in health-related behaviours over time within the targeted Delta State communities.

5. DISCUSSION OF FINDINGS

The findings from the research questions provide valuable insights into the effectiveness and implications of solution-focused counselling in enhancing communication skills and promoting behaviour change within Delta State communities. The first set of findings indicate that participants perceive solution-focused counselling positively, acknowledging its impact on enhancing communication skills within health education settings. This aligns with the principles of solution-focused therapy, which emphasizes leveraging existing strengths and resources to facilitate positive change. The reported increase in confidence, understanding, and practical strategies for communication highlights the potential of solution-focused counselling to empower individuals in their communication endeavours, thereby fostering better engagement and comprehension of health education messages.

However, while participants acknowledge the immediate benefits of solution-focused counselling, the second set of findings shed light on potential challenges in translating these improvements into sustained behaviour change over time. Despite participants continuing to apply their communication skills and recognizing the persistence of counselling benefits, there appears to be a disconnect when it comes to achieving sustained improvements in health-related behaviours. This discrepancy underscores the complexity of behaviour change processes and suggests the need for on-going support and reinforcement beyond the counselling sessions to facilitate long-term health behaviour adoption and maintenance.

Furthermore, the third set of findings highlight various factors influencing the adoption and implementation of solution-focused counselling within the community. While factors such as resource availability and personal motivation positively influence participation, challenges related to cultural appropriateness and organizational support pose potential barriers to effective engagement. Addressing these factors is essential to ensure the successful implementation and sustainability of solution-focused counselling initiatives within Delta State communities, thereby maximizing their potential impact on communication skills enhancement and behaviour change.

The above findings collectively emphasize the multifaceted nature of solution-focused counselling interventions within health education settings. While the approach shows promise in enhancing communication skills and promoting positive behaviour change, its effectiveness hinges on addressing challenges related to sustainability, cultural appropriateness, and organizational support. By addressing these challenges and leveraging the strengths of the solution-focused approach, practitioners can enhance the delivery and impact of health education initiatives, ultimately contributing to improved health outcomes and community well-being in Delta State.

6. CONCLUSION

The findings from our research underscore the potential of solution-focused counselling in enhancing communication skills and promoting positive behaviour change within Delta State communities. Participants acknowledged the immediate benefits of counselling, reporting increased confidence and understanding in communication. However, challenges exist in translating these improvements into sustained behaviour change over time. Factors such as resource availability, cultural appropriateness, and organizational support significantly influence the adoption and implementation of counselling initiatives. Addressing these factors is crucial to ensure the successful integration and sustainability of solution-focused counselling within the community.

7. RECOMMENDATIONS

1. There is the need to develop comprehensive training programs to equip counsellors and health educators with solution-focused counselling techniques, ensuring proficiency in facilitating effective communication skills.
2. Fostering partnerships with local community leaders and organizations to establish sustainable support systems and resources for the implementation of solution-focused counselling interventions is an urgent step that is required to improve sustainability of counselling interventions.

3. Conducting regular assessments and evaluations to monitor the long-term impact of solution-focused counselling on communication skills retention and behaviour change will go a long in improving the sustainability of counselling interventions.
4. Finally, integrating culturally tailored elements into solution-focused counselling curricula and materials to ensure relevance and effectiveness within the diverse cultural context of Delta State communities will improve sustainability of counselling interventions.

REFERENCES

- Bannink, F. (2015). *Handbook of positive supervision for supervisors, facilitators, and peer groups*. Hogrefe Publishing GmbH.
- Barranquero-Herbosa, M., Abajas-Bustillo, R., and Ortego-Maté, C. (2022). Effectiveness of flipped classroom in nursing education. A Systematic Review of Systematic and Integrative Reviews. *International Journal of Nursing Studies*, 104327.
- Denniston, C., Molloy, E., Nestel, D., Woodward-Kron, R., and Keating, J. L. (2017). Learning outcomes for communication skills across the health professions: a systematic literature review and qualitative synthesis. *BMJ open*, 7(4), e014570.
- Enriquez, J. M. (2023). *Culturally Responsive Learning Communities: Minority Student Educational Impact* (Doctoral dissertation, Alliant International University).
- Heffner, C. L., and Cowan, J. A. (2022). *The Strength-Based Clinical Supervision Workbook: A Complete Guide for Mental Health Trainees and Supervisors*. Taylor and Francis.
- Holland, A. L., and Nelson, R. L. (2018). *Counselling in communication disorders: A wellness perspective*. Plural Publishing.
- King, G., Baldwin, P., Servais, M., and Moodie, S. (2022). Solution-Focused Coaching to Support Clinicians' Professional Development: An Analysis of Relational Strategies and Co-constructed Outcomes. *Developmental Neurorehabilitation*, 25(3), 205-216.
- Maeda, A., and Socha-Dietrich, K. (2021). Skills for the future health workforce: Preparing health professionals for people-centred care.
- Martenstyn, J. A., and Grant, A. M. (2022). An online, comparative effectiveness trial of mental contrasting with implementation intentions (MCII) versus solution-focused coaching (SFC) questions. *Coaching: An International Journal of Theory, Research and Practice*, 15(1), 60-84.
- McKenzie, J. F., Neiger, B. L., and Thackeray, R. (2022). *Planning, implementing and evaluating health promotion programs*. Jones and Bartlett Learning.
- Meadus, R. J. (2023). *Communication for Nursing and Health Care Professionals: A Canadian Perspective*. Canadian Scholars.
- Niemiec, R. M. (2023). Mental health and character strengths: the dual role of boosting well-being and reducing suffering. *Mental Health and Social Inclusion*.
- Richter, K. A. (2015). How clients and solution focused therapists co-construct new meanings when having conversations about 'What's better?'
- Seko, Y., and Lau, P. (2022). Solution-focused approach in higher education: a scoping review. *Higher Education Research and Development*, 41(5), 1710-1726.

- Stellefson, M., Alber, J. M., Wang, M. Q., Eddy, J. M., Chaney, B. H., and Chaney, J. D. (2015). Use of health information and communication technologies to promote health and manage behavioural risk factors associated with chronic disease: applications in the field of health education. *American Journal of Health Education*, 46(4), 185-191.
- Wei, H. (2022). The development of an evidence-informed convergent care theory: working together to achieve optimal health outcomes. *International Journal of Nursing Sciences*, 9(1), 11-25.