# **Training of Health Care Professionals**

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#### **Editorial**

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### **EDITORIAL**

There are questions regarding what part of the brain allows us to be self-aware and how we are biologically programmed to be self-aware. V.S. Ramachandran has speculated that mirror neurons may provide the neurological basis of human self-awareness. In an essay written for the edge foundation in 2009, Ramachandran gave the following explanation of his theory: "... I also speculated that these neurons can not only help simulate other people's behavior but can be turned inward as it were to create second order representations or meta representations of your own earlier brain processes. This could be the neural basis of introspection, and of the reciprocity of self-awareness and other awareness. There is obviously a chicken or egg question here as to which evolved first, but... The main point is that the two co-evolved, mutually enriching each other to create the mature representation of self that characterize modern humans."

In health and medicine, body awareness is a construct that refers to a person's overall ability to direct their focus on various internal sensations accurately. Both proprioception and interception allow individuals to be consciously aware of multiple sensations. Proprioception allows individuals and patients to focus on sensations in their muscles and joints, posture, and balance, while interception is used to determine sensations of the internal organs, such as fluctuating heartbeat, respiration, lung pain, or satiety. Over acute body awareness, under acute body awareness, and distorted body awareness are symptoms present in a variety of health disorders and conditions, such as obesity, anorexia nervosa, and chronic joint pain. For example, a distorted perception of satiety present in a patient suffering from anorexia nervosa.

Bodily self-awareness in human development refers to one's awareness of their body as a physical object, with physical properties, that can interact with other objects. Tests have shown that at the age of only a few months old, toddlers are already aware of the relationship between the proprioceptive and visual information they receive. This is called first-person self-awareness.

At around 18 months old and later, children begin to develop reflective self-awareness, which is the next stage of bodily awareness and involves children recognizing themselves in reflections, mirrors, and pictures. Children who have not obtained this stage of bodily self-awareness yet will tend to view reflections of themselves as other children and respond accordingly, as if they were looking at someone else face to face. In contrast, those who have reached this level of awareness will recognize that they see themselves, for instance seeing dirt on their face in the reflection and then touching their own face to wipe it off. The WHO Secretariat supports countries to review policy options, including regulatory frameworks, management and information systems for human resources for health, and education systems that can meet current and future needs of communities.

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Slightly after toddlers become reflectively self-aware, they begin to develop the ability to recognize their bodies as physical objects in time and space that interact and impact other objects. For instance, a toddler placed on a blanket, when asked to hand someone the blanket, will recognize that they need to get off it to be able to lift it. This is the final stage of body self-awareness and is called objective self-awareness.