

Determinants of Health

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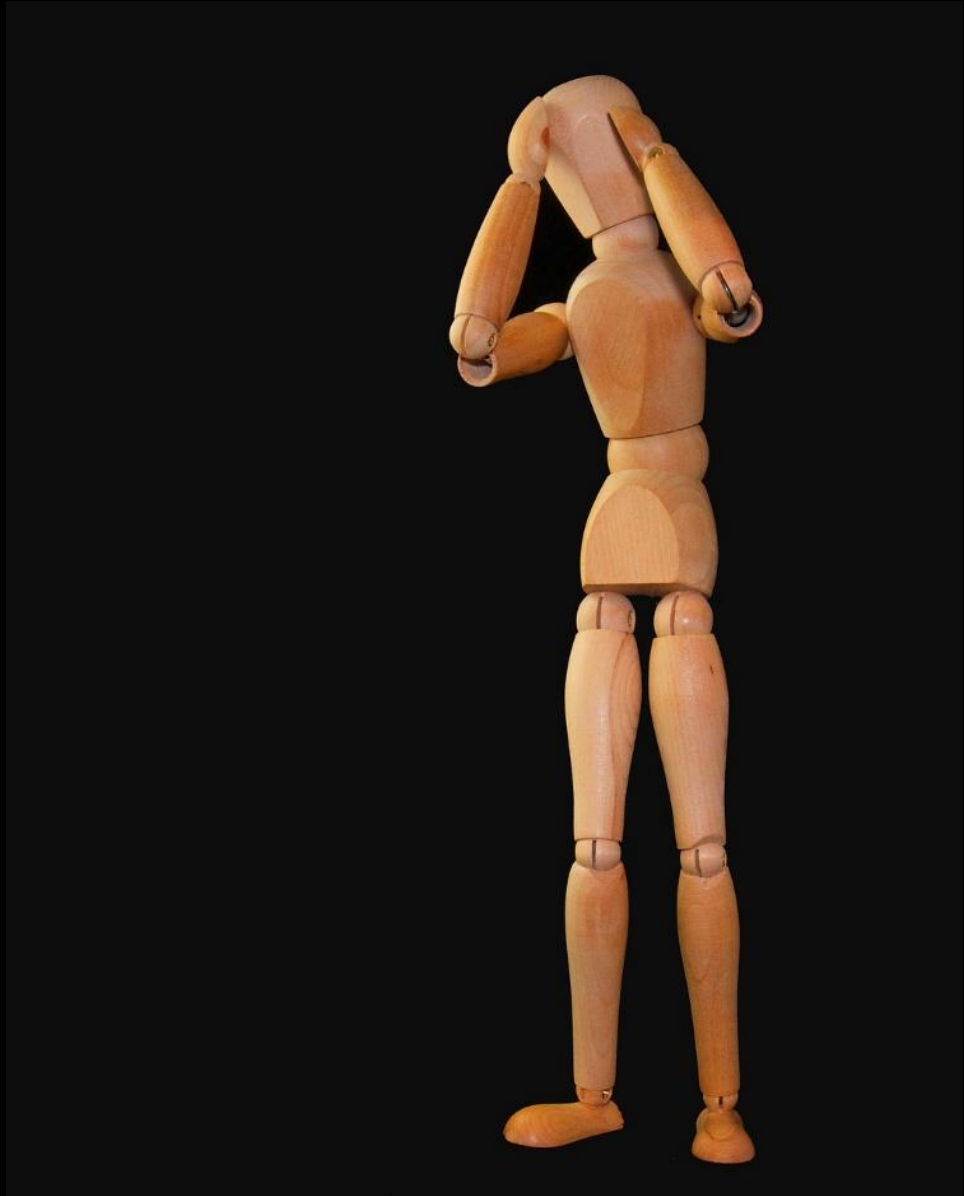
COMM 311 - Community Medicine Course

September 16th, 2018 1-2 p.m.

Objectives

By the end of this lecture, students should be able to:

1. Explain the spectrum of health in relation to health and sickness
2. Define: health, disease, illness, and wellbeing
3. Define the term “determinants of health”
4. Recognize different types of determinants of health [biological, behavioral, socio and cultural, environmental, socioeconomic, health services, aging, and gender]
5. Recognize the terms “right to health “ and “health for all”



Spectrum of Health

- Health and disease lie along a continuum, and there is no single cut-off point
- The lowest point on the health-disease spectrum is death and the highest point corresponds to the WHO definition of positive health
- The health of an individual is not static; it is a dynamic phenomenon and a process of continuous change
- There are degrees or "levels of health" as there are degrees or severity of illness. As long as we are alive there is some degree of health in us.

Spectrum of Health cnt'



[Fig.2 The health sickness spectrum. Park's textbook. pg:18]

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Is this person in good health?



Health- A relative concept

It is relative to

- where on the spectrum of health this patient is.
- the health dimensions (physical, mental, social, spiritual, emotional, vocational dimensions)
- local conditions and health standards.

For ex: a newborn baby in India weighs 2.8 kg on an average compared to 3.5 kg in the developed countries, and yet compares favorably in health.

Defining Health

- Communities have their concepts of health, as part of their culture.
- The oldest definition is that health is the "absence of disease".
- World Health Organization (1948)

"Health is a state of complete physical, mental and social well-being and not merely an absence of disease or infirmity"

- In recent years, this statement has been amplified to include the ability to lead a "socially and economically productive life"

Defining Disease and Illness (2)

Disease

“A condition in which the body health is impaired”

Illness

“A phenomenon in which one or more natural functions of the body are so disturbed that the affected individual cannot meet the natural requirements of everyday life.”

- if disturbance is severe+ short duration >> acute illness
- Long duration+ without disability >> chronic illness

Defining Wellbeing

**There is no satisfactory
definition of the term
well-being!**

wellbeing



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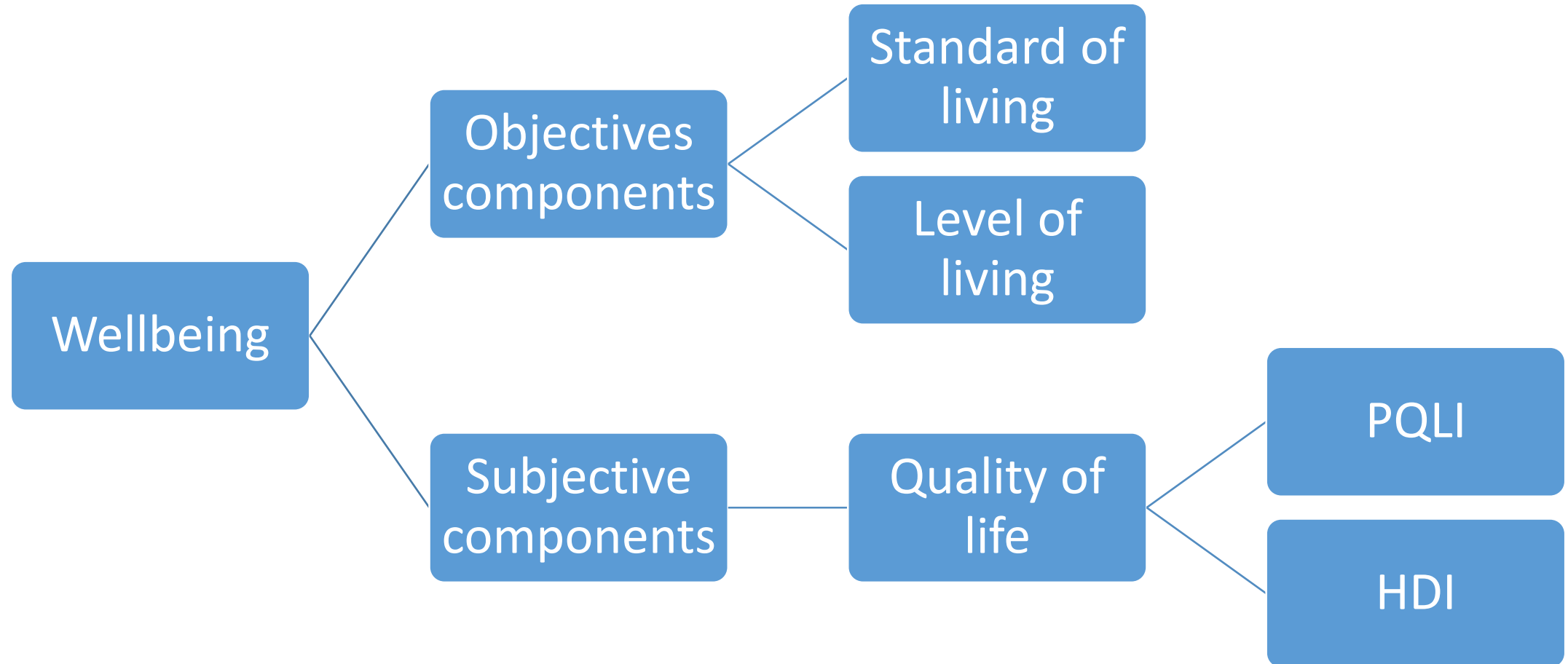
health mental employee model spiritual woman emotional physical personal social human



Well being components

Objective components	Subjective components
<p>1- Standard of living</p> <ul style="list-style-type: none">• The scale of our expenditure, the goods we consume, and the services we enjoy.• comparison can be made using the per capita GNP (gross national product)	<p>Quality of life</p> <ul style="list-style-type: none">• A composite measure of physical, mental, and social well-being <u>as perceived</u> by each individual or by a group of individuals.• Difficult to measure. Possible measures are the physical quality of life index (<u>PQLI</u>) and the Human development Index (<u>HDI</u>)
<p>2- Level of living</p> <p>Parallel term used by the United Nations</p>	

Recap



Measures of Quality of Life

	physical quality of life index (PQLI)	Human development Index (HDI)
Indicators used in calculating this index	<ol style="list-style-type: none"> 1. Infant mortality 2. Life expectancy <u>at age one</u> 3. literacy 	<ol style="list-style-type: none"> 1. Life expectancy <u>at birth</u> (longevity) 2. Mean years of schooling (knowledge) 3. Expected years of schooling (knowledge) 4. GNI, gross national income, per capita (income/ decent standard of living)
scale	From 0-100 0 is worst performance and 100 is best performance	Values from 0 to 1
It measures	<ul style="list-style-type: none"> • The results of social, economic, and political policies. • Does NOT measure economic growth 	It reflects achievements in the most basic human capabilities

Both allow for national and international comparison

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Determinants of Health

“Many factors combine together to affect the health of individuals and communities.” (3)

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Types of determinants of health

1. **Biological:** genetic predisposition
2. **Behavioral and socio-cultural:** cultural and behavior patterns, life long habits developed from socialization (eg: smoking), lifestyle
3. **Environment:** internal, external (macro-environment: things you're exposed to after conception.)
4. **Socio-economic:** this determinant encompasses
 - a) Economic status: per capita GNP
 - b) Education
 - c) Occupation
 - d) Political system

Types of determinants of health cnt'

5. Health services: services for treatment of disease, prevention of illness and promotion of health.

To be effective, the health services must:

- reach the social periphery,
- equitably distributed,
- accessible at a cost the country and community can afford,
- and socially acceptable

6. Aging

7. Gender

8. Other: information technology, health related systems like agriculture and food



Types of determinants of health

1. Biological
2. Behavioral and socio-cultural
3. Environment
4. Socio-economic
5. Health services
6. Aging
7. Gender
8. Other: information technology, health related systems like agriculture and food

AROUND THE WORLD

The El-Tal El-Kebir Story: An example of social accountability from Egypt

WAGDY TALAAT & YASSER EL-WAZIR

Suez Canal University, Egypt

Abstract

Background: In 1985, the Faculty of Medicine at Suez Canal University responded to a request from the people of El-Tal El-Kebir, a district in Ismailia Governorate, Egypt, to assist them in addressing their poor health statistics. After an initial visit, the team realized that any long-term solution in dealing with and improving their community health problems needed a true inter-sectoral collaborative approach, with the involvement of other sectors such as agriculture, veterinary medicine, and education. The team also realized that establishing a true partnership with the community as well as the local governmental agencies was indispensable in order to maintain any long-term effects.

Aims: In this article, we will describe how the medical school mobilized other sectors to improve the community health.

Methods: The methodology adopted during this example of providing community outreach services was concordant with the principles of social accountability, which was later described by the World Health Organization.

Results: Our multi-sectoral team has established several projects for enhancing community participation in solving their own health problems.

Conclusion: Medical schools can lead a community development project in collaboration with the community.

Health problem/need or concern in 1992

1. Schistosomiasis
2. Malnutrition
3. Family planning problems
4. Water sanitation and sewage disposal problems
5. Hypertension
6. Diabetes mellitus
7. Addiction.
8. Viral hepatitis, cirrhosis & hepatic failure
9. Diarrhea and dehydration
10. Breast masses
11. Poliomyelitis
12. Tuberculosis
13. Food pollution
14. Urinary bladder cancer
15. Environmental pollution
16. Child abuse
17. Emergency problems
18. Endemic communicable parasitic diseases

Some of what they did
with this community ⁽⁴⁾

Created inter-sectoral
sustainable partnerships



Some of what they did
with this community ⁽⁴⁾

Training of community
health workers (CHW)



Some of what they did
with this community ⁽⁴⁾

Involving women in
small industries



Some of what they did
with this community ⁽⁴⁾

communication skills
training for informal
leaders and CHW >> lead
to acquiring a large
water pump for clean
water



Some of what they did
with this community ⁽⁴⁾

waste collection and
sorting >>organic waste
was turned into fertilizer
and sold to nearby
farmers.



Table 1. Prioritized community health needs and concerns in El Tal El-Kebir District in 1992 and in 2011.

Health problem/need or concern in 1992	Total score (Out of 200 points)	Health problem/ need or concern in 2011	Total score (200)
1. Schistosomiasis	195.60	1. Viral hepatitis, cirrhosis and hepatic failure	179.00
2. Malnutrition	189.40	2. Heart diseases	178.80
3. Family planning problems	184.20	3. Family planning problems	178.70
4. Water sanitation and sewage disposal problems	183.00	4. Breast masses	178.00
5. Hypertension	182.50	5. Diabetes mellitus	175.50
6. Diabetes mellitus	182.50	6. Water sanitation and sewage disposal problems	173.00
7. Addiction.	179.00	7. Hypertension	169.00
8. Viral hepatitis, cirrhosis & hepatic failure	178.80	8. Environmental pollution	176.40
9. Diarrhea and dehydration	178.70	9. Schistosomiasis	167.00
10. Breast masses	178.00	10. Addiction	167.00
11. Poliomyelitis	175.50	11. Diarrhea and dehydration	165.70
12. Tuberculosis	173.00	12. Tuberculosis	163.50
13. Food pollution	169.00	13. Urinary bladder cancer	163.50
14. Urinary bladder cancer	176.40	14. Food pollution	162.50
15. Environmental pollution	167.00	15. Bronchial asthma	160.00
16. Child abuse	167.00	16. Ante-post natal problems	160.00
17. Emergency problems	165.70	17. Anemia	154.00
18. Endemic communicable parasitic diseases	163.50	18. Road accidents	149.00

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Right to Health

- Historically, the right to health was one of the last to be proclaimed in the Constitutions of most countries
- Universal Declaration of Human Rights 1948: "Everyone has the right to a standard of living adequate for the health and well-being of himself and his family".
- WHO Constitution introduction affirms that it is one of the fundamental rights of every human being to enjoy "the highest attainable standard of health".

Health for all

- Decided by the 30th World Health Assembly in year 1977
- They decided that the main social target of governments and WHO in the coming decades should be "the attainment by all citizens of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life"

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References

1. Park's Textbook of Preventive and Social Medicine. 23rd edition. CH2 (p 13-21).*
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4. Talaat W, El-Wazir Y. The El-Tal El-Kebir story: an example of social accountability from Egypt. Medical teacher. 2012 May 1;34(5):354-60.

*The lecture mainly depends on this reference, hence it will not be specifically denoted on the slides.



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Thank You