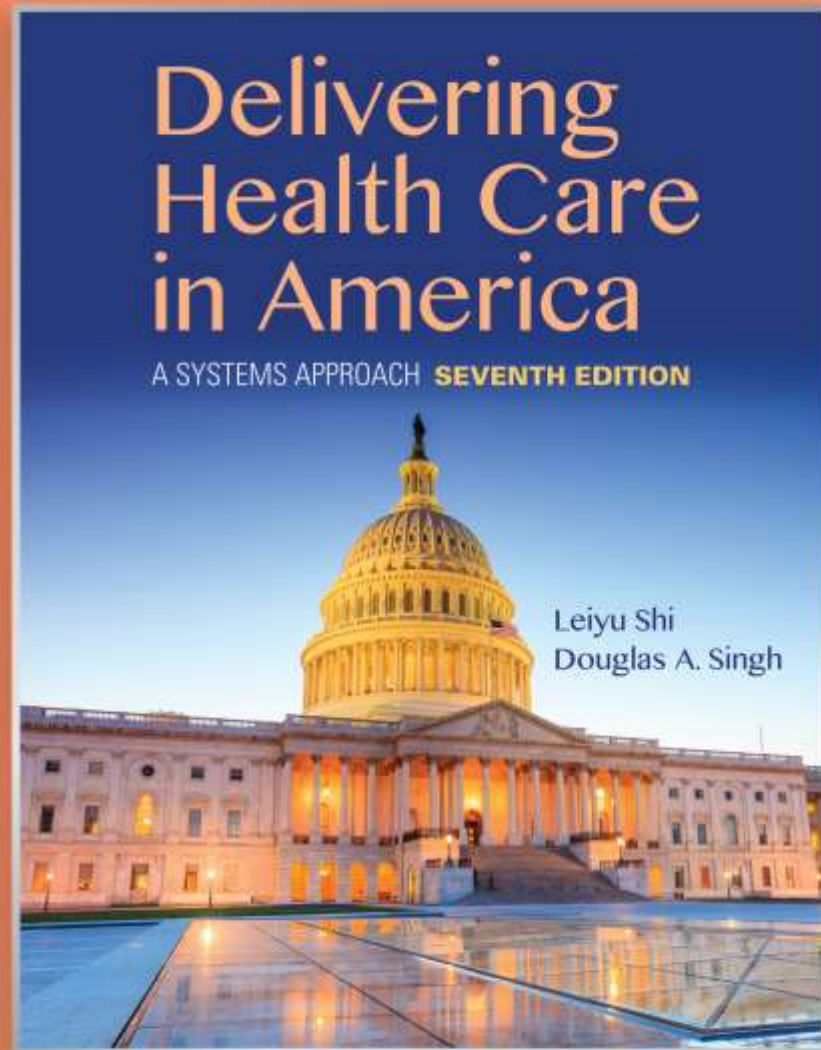


Chapter 2

Beliefs, Values, and Health



Learning Objectives

(1 of 2)

- Concepts of health and disease, risk factors, and role of health promotion and disease prevention
- Disease prevention requisites under the ACA
- Public health and its expanding role in health protection in the U.S. and globally
- Determinants of health and measures related to health

Learning Objectives

(2 of 2)

- American anthro-cultural values and their implications for health care delivery
- Justice and equity in health care according to contrasting theories
- Integration of individual and population health

Introduction

- 10-year Healthy People initiatives
- Influence of anthro-cultural factors
- Evolution of health services
- Equity in the distribution of health services

Significance for Managers and Policymakers

- Health of a population determines health care utilization.
- Design appropriate educational, preventive, and therapeutic initiatives.
- Evaluating the effectiveness of health care organizations.
- Measures of health status and utilization.

Basic Concepts of Health

- Health
 - The medical model defines health as the absence of illness or disease.
 - Sociologists define health as the state of optimal capacity.
 - Biopsychosocial model.
 - Holistic view.

Figure 2-1: The Four Dimensions of Holistic Health.



Quality of Life

- Overall life satisfaction during and following health care delivery system encounter
- Indicator of how satisfied a person is with their health care experience
- Overall satisfaction with life and self-perceptions of health after intervention

Risk Factors and Disease

(1 of 3)

- Risk factors increase the likelihood of developing a particular disease or health condition.
 - Epidemiology Triangle

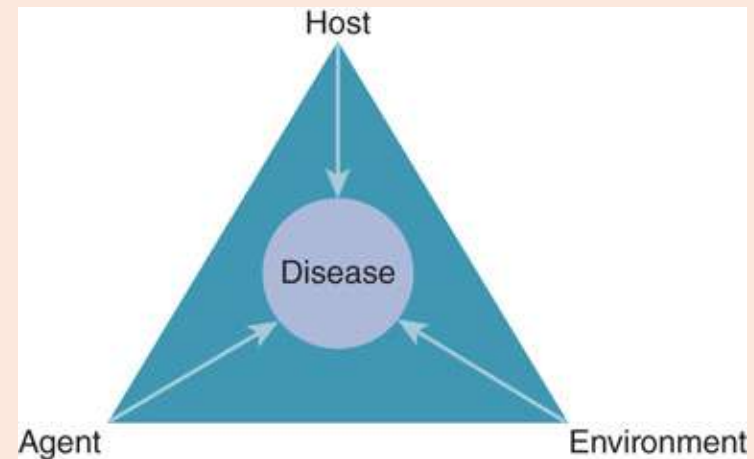


Figure 2-2 The Epidemiology Triangle.

Risk Factors and Disease

(2 of 3)

- Behavioral risk factors

Behavioral Risks	Percentage of Population	Year
Alcohol (12 years and older)	52.7	2014
Marijuana (12 years and older)	8.4	2014
Cocaine use (12th graders)	1.0	2014
Cocaine use (10th graders)	0.6	2014
Cocaine use (8th graders)	0.5	2014
Cigarette smoking (18 years and older)	16.8	2014
Hypertension (20 years and older)	30.4	2011–2014
Overweight and obese (20 years and older)	69.5	2011–2014
Serum cholesterol (20 years and older)	12.1	2011–2014

Table 2-1 Percentage of U.S. Population with Behavioral Risks

Data from National Center for Health Statistics (NCHS). 2016. Health, United States, 2015. Hyattsville, MD: Department of Health and Human Services. pp. 2, 192, 194, 202, 216.

Risk Factors and Disease

(3 of 3)

- Acute, subacute, and chronic conditions
 - Three reasons for the rise of chronic conditions
 1. New diagnostic methods, medical procedures, and pharmaceuticals
 2. Screening and diagnosis
 3. Lifestyle choices

Health Promotion and Disease Prevention

- Three principles of a health promotion and disease prevention program
 1. Health risk appraisal
 2. Interventions for counteracting the key risk factors
 3. Adequate public health and social services

Disease Prevention Under the Affordable Care Act

- Prevention and Public Health Fund (PPHF)
- CDC established the National Diabetes Prevention Program (NDPP)
 - Organizations nationwide offer diabetes prevention lifestyle programs
- Funding to establish and evaluate comprehensive workplace wellness programs

Public Health

- Public health deals with promoting optimal health for the society as a whole.
- Health protection and environmental health.
- Health protection during global pandemics.
 - Protecting populations from a variety of old and new threats through global cooperation

Table 2-3: Leading Cause of Death, 2014

Cause of Death	Deaths	Percentage of All Deaths
All causes	2,626,418	100.0
Diseases of the heart	614,348	23.4
Malignant neoplasms	591,699	22.5
Chronic lower respiratory diseases	147,101	5.6
Unintentional injuries	136,053	5.2
Cerebrovascular diseases	133,103	5.1
Alzheimer's disease	93,541	3.6
Diabetes mellitus	76,488	2.9
Influenza and pneumonia	55,227	2.1
Nephritis, nephrotic syndrome, and nephrosis	48,146	1.8
Suicide	42,773	1.6

Data from National Center for Health Statistics (NCHS). 2016. Health, United States, 2015. Hyattsville, MD: Department of Health and Human Services. p. 107.

Health Protection and Preparedness in the U.S.

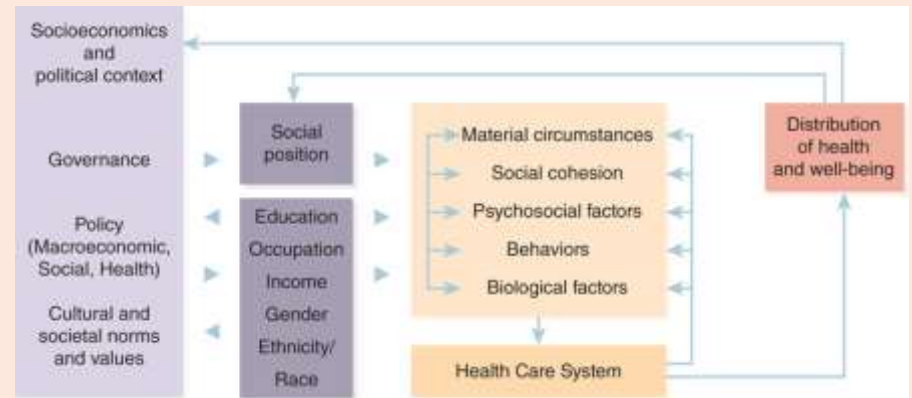
- Dealing with threats requires large-scale preparations.
 - Tools and training for workers in medical care
 - Public health
 - Emergency care
 - Civil defense agencies at the federal, state, and local levels

Determinants of Health

(1 of 2)

- Blum's model of health determinants
 - Environment
 - Lifestyle
 - Heredity
 - Medical care

Figure 2-3 WHO Commission on Social Determinants of Health conceptual framework.



Reproduced from Centers for Disease Control and Prevention (CDC). 2010a. Establishing a holistic framework to reduce inequities in HIV, viral hepatitis, STDs, and tuberculosis in the United States. Available at: <https://www.cdc.gov/socialdeterminants/docs/SDH-White-Paper-2010.pdf>. Accessed April 2017. Modified from Solar O., and A. Irwin; World Health Organization (WHO). 2010. A conceptual framework for action on the social determinants of health. Social Determinants of Health Discussion Paper 2 (Policy and Practice). Geneva, Switzerland: WHO.

Determinants of Health

(2 of 2)

- Contemporary models of health determinants

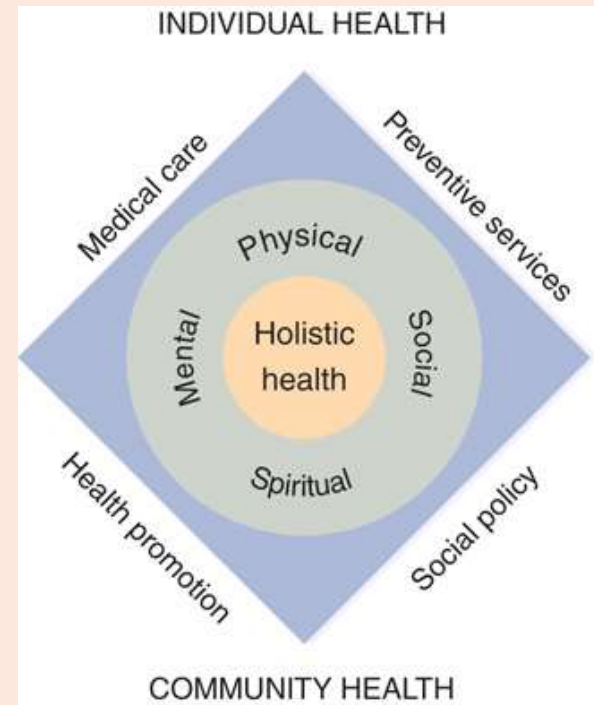


Figure 2-4 Integrated model for holistic health.

Measures Related to Health

(1 of 3)

- Measures of physical health
 - Morbidity
 - Mortality
- Demographic change
 - Births
 - Migration

Table 2-4 U.S. Life Expectancy at Birth— 2002, 2007, and 2014

Year	Total	Male	Female
2002	77.0	74.4	79.6
White	77.5	74.9	80.1
Black	72.2	68.7	75.4
2007	78.1	75.5	80.6
White	78.5	76.0	80.9
Black	73.8	70.3	77.0
2014	78.8	76.4	81.2
White	79.0	76.7	81.4
Black	75.6	72.5	78.4

Data from National Center for Health Statistics (NCHS). 2016. Health, United States, 2015. Hyattsville, MD: Department of Health and Human Services. p. 95.

Measures Related to Health

(2 of 3)

- Measures of mental health
- Measures of social health
 - Breslow's social health dimensions
 - Social contacts and social resources
- Measures of spiritual health

Measures Related to Health

(3 of 3)

- Measures of health services utilization
 - Crude measures of utilization
 - Specific measures of utilization
 - Measures of institution-specific utilization
- Measures of global health
 - Direct indicators of global health
 - Indirect indicators of global health

Anthro-Cultural Beliefs and Values

(1 of 2)

- Beliefs and values in the American culture
 1. Belief in scientific advancement and the application of scientific methods to medicine
 2. Champion of capitalism
 3. Culture of capitalism promotes entrepreneurial spirit and self-determination
 4. Principles of free enterprise and a general distrust of big government

Anthro-Cultural Beliefs and Values

(2 of 2)

- Equitable distribution of health care
 - Market justice
 - Social justice
- Justice in the U.S. health care delivery system
- Limitations of market justice

Table 2-5 Comparison of Market Justice and Social Justice

Market Justice	Social Justice
<i>Characteristics</i>	
<ul style="list-style-type: none"> Views health care as an economic good 	<ul style="list-style-type: none"> Views health care as a social resource
<ul style="list-style-type: none"> Assumes free-market conditions for health services delivery 	<ul style="list-style-type: none"> Requires active government involvement in health services delivery
<ul style="list-style-type: none"> Assumes that markets are more efficient in allocating health resources equitably 	<ul style="list-style-type: none"> Assumes that the government is more efficient in allocating health resources equitably
<ul style="list-style-type: none"> Production and distribution of health care determined by market-based demand 	<ul style="list-style-type: none"> Medical resource allocation determined by central planning
<ul style="list-style-type: none"> Medical care distribution based on people's ability to pay 	<ul style="list-style-type: none"> Ability to pay is inconsequential for receiving medical care
<ul style="list-style-type: none"> Access to medical care viewed as an economic reward of personal effort and achievement 	<ul style="list-style-type: none"> Equal access to medical services viewed as a basic right
<i>Implications</i>	
<ul style="list-style-type: none"> Individual responsibility for health 	<ul style="list-style-type: none"> Collective responsibility for health
<ul style="list-style-type: none"> Benefits based on individual purchasing power 	<ul style="list-style-type: none"> Everyone is entitled to a basic package of benefits
<ul style="list-style-type: none"> Limited obligation to the collective good 	<ul style="list-style-type: none"> Strong obligation to the collective good
<ul style="list-style-type: none"> Emphasis on individual well-being 	<ul style="list-style-type: none"> Community well-being supersedes that of the individual
<ul style="list-style-type: none"> Private solutions to social problems 	<ul style="list-style-type: none"> Public solutions to social problems
<ul style="list-style-type: none"> Rationing based on ability to pay 	<ul style="list-style-type: none"> Planned rationing of health care

Integration of Individual and Population Health

- Healthy People initiatives
 - See Figures 2-5 and 2-6
- *Healthy People 2020*
 - Measurement of *Healthy People 2020*
 - Achievement of *Healthy People 2020*

Summary

- Medical model of health care delivery emphasizes illness rather than wellness.
- Understanding health determinants.
- *Healthy People 2020* continues its goals.
- Contrasting theories of market justice and social justice.