CHAPTER ONE

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CONCEPT OF HEALTH

The quality of life of a society is assessed in terms of many factors. There is agreement that the general health of individuals is one of the important among such factors. Yet health - like such related terms as wellness, sickness, and disease - is actually an elusive concept.

ABSENCE OF DISEASE

Henslin (1993:528) compares the elusiveness of the concept of health with the attempt to reach for a bar of soap in a bathtub. He notes:

Trying to define [health] is like reaching for a bar of soap in a bathtub - just as you think you have it in your hand, it manages to slip away. A commonsense definition of health is the absence of disease or injury, but that is like defining marriage by saying that it is the absence of singleness. It only says what it is not, not what it is.

Anyhow to a lay person, health is absence of disease or illness, and illness would logically mean absence of health. As long as people are normal and have no disease or illness, they think that they are healthy. This view may be called “medical model” of health (Newback and Glasberg,
1996). Not only lay persons, but also physicians and academics go by medical model of health.

People generally think of disease as a serious, prolonged condition. The word *disease* literally means “dis-eased”, not feeling at ease. It is a condition in which an organism does not function properly. That is why Mechanic (1962) defines disease as a deviation from the normal functioning which may adversely affect the future health (cited by Schaefer and Lamm, 1992).

In short, disease means the malfunctioning of the organism. Yet this malfunctioning is not viewed as one concerning an organ in which it occurs, but the organism on the whole. It is on this basis that Brody and Sobel define disease as a pattern of disruption that manifests itself in different ways at different levels (e.g., cellular, organic, behavioural, societal) rather than as a discrete entity located in one organ or tissue” (as quoted in Pokarna, 1994: 72-73).

Since a diseased person is unable to perform his normal social activities in the condition of malfunctioning of the organism, his behaviour is viewed as deviant and hence dysfunctional by the society. So it undertakes to cure him as early as possible to make him normal.

As long as the organism does not malfunction and individuals are normal in their activities, the condition is believed to be of health. Though
a condition is viewed as a disease by the medical scientists, as long as it entails no malfunctioning of the organism or disruption to the normal functioning of the organism, the people do not consider it a disease. For instance, as Rene Dubois points out, early in the 20th century the contagious skin disease, yaws was so common among people in tropical Africa that it was considered normal (cited by Macionis, 1989:520). Zola (1983) refers to a similar case which constitutes a disease in the medical opinion but a normal condition in the view of the people. In one South American Indian tribe, dyschron spirochetosis, a disease characterised by parts of various colours on the skin is so common among the people that the individuals who are not spotted are seen as the unhealthy ones. As the “disease” does not cause any malfunctioning of the organism and as those having such disease are normal in their activities, the tribal people do not consider it a disease. Indeed, the few single men who do not suffer from this disease are seen as the strange and they are excluded from the tribe’s social activities (cited by Schaefer, 1989: 472).

Even if a syndrome is described as a disease by the medical scientists, the people who have such a syndrome do not consider themselves as having a disease. In such a condition, they behave as if they had no health problem. When such a syndrome is culture-bound, the people do not consider it as a health matter and the syndrome is taken as a normal aspect of behaviour For example, anorexia nervosa, a condition centering on an
intense fear of becoming obese and a distorted image of one's body is viewed as a disease in the medical opinion. But in the western society, people take it as a normal activity in conformity to the existing cultural standards. The western culture emphasises slimness of the body and typically portrays the slim, youthful body as healthy and beautiful, whereas the fat person is viewed as ugly and lacking in self-discipline. So it is a common sight in the western society that the people, particularly young women in their teenage years or twenties, drastically reduce their body weight and try to make themselves excessively slim by eating little and secretly vomiting of what they do eat. Though what they do is symptomatic of anorexia nervosa, the actors do not feel that they have a disease and are not healthy by the medical standards (Swartz, 1985, cited by Schaefer, 1989: 472-473).

ILLNESS

Whether there is an agreement between the medical scientists and the people on whether a condition is a disease or a normal one as described supra, disease means an objective phenomenon characterised by malfunctioning of the body as a biological organism. The terms illness and sickness are related to disease; they carry the connotation of disease. Illness is the sense we have that we are affected by a disease. While disease is an objective condition characterised by malfunctioning of the body, illness is a subjective phenomenon in which individuals feel that they
are not well and that their body does not function normally. In the condition of disease, the individuals do not act normally as they were before. In the condition of illness, the individuals feel that they are not normal and do not act normally whether they have actually disease or not.

**SICKNESS**

Illness and sickness are thus related to disease. But illness constitutes a subjective condition and it is the actor concerned who feels ill himself. On the other hand, sickness is an objective condition. Others see the actor concerned to be sick. When a person is viewed to be sick by others, the sick role is thrust on him/her. On the assumption of the sick role, the sick person, according to Parsons (1951), takes on the following characteristics.

- He/she is exempt from his / her usual social roles and responsibilities. He/she need not attend school or go to work, and other people will not censure him/her for doing so.
- He/she is not thought to be at fault for his / her condition. Being sick is a physical matter, not a moral one.
- He/she has the duty to get well and ‘not to enjoy himself/herself too much’. Because being sick is an undesirable state, he/she is obligated to seek competent help from medical practitioners.
- He/she should cooperate with medical practitioners and follow their instructions.
The general notion thus links health with absence of disease, or disease-related condition. It suggests that health is simply the absence of disease. Taking a more sociological viewpoint, however, the World Health Organisation (WHO), in the Preamble to its Constitution, states that health is not only the absence of disease, but "a state of complete physical, mental, and social well-being" (1943:3). Such approach to health underscores the nature of health - health is as much a social as a biological issue.

DIMENSIONS OF HEALTH

The WHO definition envisages three specific dimensions - the physical, the mental and the social. These dimensions function and interact with one another. Yet each has its own nature, and for descriptive purposes, they are treated separately.

PHYSICAL DIMENSION

The physical dimension of health is probably the easiest to understand. The state of physical health implies the notion of "perfect functioning" of the body. It conceptualizes health biologically as a state in which every cell and every organ is functioning at optimum capacity and in perfect harmony with the rest of the body. However, the term "optimum" is not definable.
The signs of physical health in an individual are “a good complexion, a clean skin, bright eyes, lustrous hair with a body well clothed with firm flesh, not too fat, a sweet breath, a good appetite, sound sleep, regular activity of bowels and bladder, and smooth, easy coordinated bodily movements. All the organs of the body are of unexceptional size and function normally; all the special senses are intact; the resting pulse rate, blood pressure and exercise tolerance are all within the range of “normality” for the individuals irrespective of age and sex. In the young and growing individual, there is a steady gain in weight and in the mature this weight remains more or less constant at a point about 5 lbs (2.3 kg) more or less than the individual’s weight at the age of 25. This state of normality has fairly wide limits. These limits are set by observation of a large number of “normal” people, who are free from evident disease.

MENTAL DIMENSION

Mental health is not mere absence of mental illness. Good mental health is the ability to respond to the many varied experiences of life with flexibility and a sense of purpose. More recently, mental health has been defined as “a state of balance between the individual and the surrounding world, a state of harmony between oneself and others, a coexistence between the realities of the self and that of other people, and that of the environment”.
A few short decades ago, the mind and body were considered independent entities. Recently, however, researchers have discovered that psychological factors can induce all kinds of illness, not simply mental ones. They include conditions such as essential hypertension, peptic ulcer and bronchial asthma. Some major mental illnesses such as depression and schizophrenia have a biological component. The underlying inference is that there is a behavioural, psychological or biological dysfunction and that the disturbance in the mental equilibrium is not merely in the relationship between the individual and society.

Although mental health is an essential component of health the scientific foundations of mental health are not yet clear. Therefore we do not have precise tools to assess the state of mental health unlike physical health. Psychologists have mentioned the following characteristics as attributes of a mentally healthy person.

(a) A mentally healthy person is free from internal conflicts: he is not at "war" with himself.

(b) He is well adjusted, i.e., he is able to get along well with others. He accepts criticism and is not easily upset.

(c) He searches for identity.

(d) He has a strong sense of self-esteem.

(e) He knows himself: his needs, problems and goals (this is known as self-actualization).
(f) He has good self-control - balances rationality and emotionality.

(g) He faces problems and tries to solve them intelligently, i.e., coping with stress and anxiety.

Assessment of mental health at the population level may be made by administering mental status questionnaires by trained interviewers. The most commonly used questionnaires seek to determine the presence and extent of “organic disease” and of symptoms that could indicate psychiatric disorder. Some personal assessment of mental well-being is also made. The most basic decision to be made in assessing mental health is whether to assess mental functioning, i.e., the extent to which congenitive or affective impairments impede role performance and subjective life quality, or psychiatric diagnosis.

One of the keys to good health is a positive mental health. Unfortunately, our knowledge about mental health is far from complete.

SOCIAL DIMENSION

Social well-being implies harmony and integration within the individual between each individual, and other members of society, and between individuals and the world in which they live. It has been defined as the “quantity and quality of an individuals' interpersonal ties and the extent of involvement with the community”.
The social dimension of health includes the levels of social skills one possesses, social functioning, and the ability to see oneself as a member of a larger society. In general, social health takes into account that every individual is part of a family and of wider community and focuses on social and economic conditions and well-being of the "whole person" in the context of his social network. Social health is rooted in "positive material environment" (focusing on financial and residential matters), and positive human environment" which is concerned with the social network of the individual.

Thus, by encompassing multiple dimensions, the WHO definition provides a holistic view about health. Nevertheless the WHO definition of health is considered by some to be an idealistic goal rather than a realistic definition. Some consider it as irrelevant to every-day demand as nobody qualifies for health, i.e., perfect biological, psychological and social functioning. Criticism is also leveled against WHO definition. Because it considers health as a state, some argue that health cannot be defined as a state at all, but must be seen as a process of continuous adjustment to the changing demand of living and of the changing meaning we give to life itself. The ancient saying that "nothing stands still" is valid in the case of health. There is no satisfactory definition of the term "well-being". Another drawback is that health, like happiness, cannot be defined in exact measurable terms.
In spite of these limitations, the concept of health, as defined by WHO, remains broad and positive in its implications. It sets out the standard—the standard of positive health as a goal or ideal towards which people should strive. It conceptualizes health biologically, as a state in which every cell and every organ is functioning at optimum capacity and in perfect harmony with the rest of the body; psychologically, as a state in which the individual feels a sense of perfect well-being and of mastery over his environment; and socially, as a state in which the individuals capacities for participation in the social system are optimal.