Health culture essay

Health & Medicine, Disease



The Contribution of the Biomedical Model of Health

The Biomedical model postulates that all diseases are as a result of processes which are physiological (Stretch, 2002). This model does not consider the role of psychological or social factors in disease spread and treatment. While this model has been associated with significant strides in health care, it is however not responsible for the reduced rates of mortality and morbidity. This is because studies reveal that a reduction in mortality occurred before medical interventions were available as in the cases of influenza, pneumonia, tuberculosis and other diseases (Stretch, 2002, p. 56). The reduced mortality that was seen was as a result of the social factors which lead to the spread of these diseases and not as a result of prophylactic or chemotherapeutic measures.

Impact of Health Concepts in Healthcare in the Society

Concepts of health care are important in determining the health standards in any given society. This is because if the society ascribes to the traditional biomedical model, then it will concentrate only on prophylactic and/or chemotherapeutic methods only and health standards will undoubtedly be low. By understanding other factors that play a role in disease like social and psychological factors, the society will explore many avenues of reducing disease (Smith and Shaw, 2002). For example understanding the role of lifestyle patterns may impact the rates of lifestyle illnesses like lung cancer, obesity or hypertension, thus reducing the rates of morbidity and mortality in the enlightened society.

Two Heath Cultures and their Differing Approaches to Health and Medicine

One health culture embraces the biomedical model of health. According to this model, disease is as result of physiological factors only (Smith And Shaw, 2002). It advocates that all efforts should concentrate solely on eliminating the causative substances from the being with no regards to other factors that may be contributing to the spread of the disease. Another health culture is the biopsychosocial health model. This model integrates all factors that may be contributing to diseases for example: biological factors like bacteria, and viruses; psychological factors like cognition and emotion; and social factors like the family or community. The biopsychosocial model provides a more comprehensive and effective approach to reducing morbidity and mortality when compared to the biomedical model (Stretch, 2002).

Inequalities in Health in the UK according to the Black Report of 1980

The Black Report was a document published by Sir Douglas Black in the United Kingdom (Maguire, 2002). This report was tabled after an exploration into the status of health inequalities in the UK. According to this report, overall health care had witnessed improvements across all social classes, but health inequalities remained widespread (Maguire, 2002). These inequalities have been blamed on the complex issue of social class which corresponds to economic inequality and which therefore create health inequalities.

Analyze Cultural Differences in Perceptions and Responses to Health and Illness

Cultural differences play a great role in how illness and health is perceived in different cultures. In case the causes of illness are understood and accepted, then the disease is more easily controlled. An example is the HIV/AIDS pandemic which has affected the developing world like Africa, the Caribbean and Asia which have borne the greater burden of this disease. In these communities, the HIV/AIDS spread was propagated by the lifestyle of the people for example polygamy and even beliefs that the illness was a result of witchcraft (Stretch, 2002).

Conclusion

The theory that best describes health inequalities is the biopsychosocial model (Smith and Shaw, 2002). This model considers factors like social class and psychological factors as being contributory factors to disease. The health inequalities are attributed to differences in social class which affect the spread, perception and treatment of disease among different social classes (Maguire, 2002).

References

Maguire K, 2002, ' The Black Report and Inequalities in Health', Available at http://www. ucel. ac. uk/shield/Default. html Smith G & Shaw M, 2006, ' Cultures of Health, Cultures of Illness', International Journal of Epidemiology, 35 (2): 502-3 Stretch B, 2002, BTEC Health Studies, Oxford, Heinemann Educational Publishers.