Example of current debates in health and health policy: the case of diabetes mell...

Health & Medicine, Diabetes



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#### Introduction

Several people in present times are currently suffering from diabetes mellitus - known to many simply as diabetes, a health condition pertaining to high blood sugar levels. People suffering from diabetes acquire it through either genetic inheritance or poor lifestyle practices, particularly in terms of diet. In the realm of public health, the full incurability of diabetes serves as a major concern. At most, patients with diabetes have relied on treatment that is mostly palliative in nature to relieve themselves of various related symptoms. Yet, knowing how to deliver the right kinds of treatment to patients of diabetes requires recognizing the contribution of two fields in the social sciences, namely history and sociology, alongside the perceived influence of public policy pertaining to diabetes.

Does public policy have a profound difference on outcomes related to diabetes? This study aims to provide strength to the position that applications related to social science could prove and strengthen the

difference public policy makes in treating patients with diabetes. A comprehensive discussion of public policy issues on diabetes comes first as a primer emphasizing the significance of the disease in public health. History and sociology stand as the two fields in the social sciences that helps explain the importance of treating patients with diabetes, alongside making such efforts more effective. To cover the discussion on the foregoing aspects, the study conducts a perusal of previous studies from the available literature as a manner of analyzing various developments. The study concludes not only through a concise detail of the findings, but also through the presentation of various recommendations made in consideration of social science perspectives coming from history and sociology.

### **Diabetes as a Public Policy Issue**

At the supranational level, the World Health Organization (WHO) stands as the main organization that constructs and distributes policy concessions concerning different kinds of diseases. The WHO has especially noted diabetes for the high number of patients suffering from it, finding that it affects around 200 million people worldwide on an annual basis. Diabetes is especially problematic for the WHO due to the number of patients that have yet to receive proper diagnosis. For instance, around 8% of the population of the United States (US) constitutes 15 million people who currently have diabetes, yet most of them have not seen a doctor yet to confirm through diagnosis (Rocchiccioli and O'Donoghue, 2004). As a disease that has yet to find a formidable cure, it is therefore necessary to implement various public policies that would inspire movements to curtail the growth of cases

involving diabetes. Any form of political pronouncement coming from the government stands as a strong catalyst for mitigating the spread of diabetes through measures pertaining to public policy. Yet, construction of public policies on diabetes prevention and mitigation could not push through effectively without due consideration of the contributions of history and sociology - two essential fields in the social sciences that help explain how said disease has come about and affects the lives of different kinds of people. Considering that patients of diabetes thrive within distinct realities, explanations from the perspectives of both history and sociology contributes to a better understanding on the impact of said disease, as well as the rationale behind the creation of related public policies. Future public policies could derive credit from the findings established not just by past or current counterparts, but also those produced with rigorous academic efforts of historians and sociologists (Raphael et al., 2010; Veatch, 1991). In the case of the US, the spread of diabetes has stood as a compelling problem, in that the federal government has yet to resolve it through public policies. Although several states have sought to provide public policies on diabetes, the subsequent problem that arises is the resultant lack of consistency and uniformity with one another. Moreover, a prevailing problem among state-level policies on diabetes is the lack of cultural appropriateness, in that the absence of a skeletal federal policy has led to the inevitable failure of establishing checks and balances related to the culture of patients of diabetes. Yet, there is hope for the US to revert its current trend on diabetes-related public policies, as long as it chooses to institute federallevel measures that would serve as favorable policy frameworks. By noting

the importance of ensuring balanced access to health care provisions for diabetes and cultural appropriateness, healthy policymakers could significantly resolve cases of diabetes in the US (Rocchiccioli and O'Donoghue, 2004).

Poverty or lack of adequate resources has driven many patients of diabetes not to seek treatment for their sickness. Such is a vital point of concern public policies must resolve. For example, Canada has a sizable population living below the poverty line that is suffering from type 2 diabetes acquired via observing an unhealthy lifestyle, especially through an imbalanced diet. Many poverty-stricken Canadians suffering from type 2 diabetes do not have the means to avail of specialized health care services; therefore, it is crucial that the government of Canada respond through suitable public policies. Through creating public policies aimed at eradicating or alleviating cases of diabetes, the government of Canada would be able to turn the situation into a positive one by making poverty-stricken diabetes patients more productive once they receive treatment, given that they could gain greater physical strength to engage in several forms of employment. Moreover, public policies aiming to resolve diabetes should ensure accountability to, and collaboration among stakeholders, since both are components of health policymaking. Building the legitimacy of public policies on health, as with other health-related public policies, is pivotal for guaranteeing desired effects (New Zealand House of Representatives, 2008; Raphael, et al., 2012).

# **Diabetes under the Lens of History**

As an upstream field in the social science, history serves as a formidable tool for analyzing public policies on diabetes. Studying the history of patients of diabetes that tend to involve their medical records and individual experiences with the disease could provide fitting backgrounds for related public policies. Skills utilized by historians such as the construction of inquiry plans could help determine findings coming from patients of diabetes.

Doctors specializing in diabetes could have more ideas on the origins of the diseases once they gather and examine case-basis data from patients using tools and mechanisms related to history. Such could contribute to the construction of guidelines aiming to prevent and manage diabetes, which in turn could influence health policymakers to construct relevant public policies leading to reforms through various programs. The specificity of the possible origins of diabetes greatly requires the application of history and its tools for health policymaking (American Diabetes Association, 2006; Brown et al., 2002; Wikler, 2002).

Anthropology serves as a supplementary social science field to history, in that it focuses on the phenomenon of community building among humans. Treading alongside the upstream path of history, anthropology could serve as an essential recommendatory tool alongside sociology for influencing health policymaking. Medical anthropology, in particular, posits that diabetes have urged communities to form related systems, most especially through common practices leading to unhealthy lifestyles. Tracing the history of such community systems may lead to health policymaking for diabetes that is

culturally appropriate, that there would be no sectors deprived of access to health services (Lieberman, 2004; Park, 2009).

## **Diabetes under the Lens of Sociology**

As a disease largely associated with poor lifestyle maintenance, diabetes inevitably finds coverage under sociological premises. The exploratory nature of sociology makes it a suitable social science field applicable for public policies on diabetes in the sense that it is instrumental in investigating on the causes of diabetes among individuals within several social settings. At the same time, sociology provides recommendatory perspectives in that its findings are instrumental for health policymakers to provide amenable resolutions through public policies. Sociology merges formidably with history in that causal explanations that emerge provide possible perspectives influential to the construction of public policies related to diabetes. Doctors specializing in diabetes and other medical professionals find significance in sociology because of its methodological tools that could provide insights on the origins of diabetes, as assessed through lifestyle trends within various communities. As an example, type 2 diabetes patients tend to get medical advice urging them to practice an improved lifestyle before getting a more suitable job, especially if the current one involves irregular working hours (Bury, 2006; Hearnshaw and Lindenmeyer, 2006). Another concern on health policymaking on diabetes that finds coverage under sociology is the pattern of compliance of those suffering from said disease. For example, a diabetes patient refusing to comply with the medical advice given to him may possess certain forms of behavior driven by various sociological factors. The use of

sociology could enable concerned experts specializing in diabetes and related policymaking activities to identify the reasons why patients refuse to comply with medical advice. Resolutions could thus follow through the formation of strong health policies designed to curtail cases of diabetes (Formosa & Mandy, 2011; Lutfey & Wishner, 1999).

### **Conclusion**

Public policies have a profound effect on preventing the spread and complication of diabetes cases, but such would not find due intensity without the application of relevant social science perspectives, such as history and sociology. History provides an upstream approach to social science inquiry on diabetes through tools enabling the discovery of crucial facts related to the origins of the disease, which are instrumental for constructing the contents of subsequent public policies. Sociology, on the other hand, is a downstream social science that aims to discover the reasons behind certain behavioral aspects of diabetes, including the recommendations of specialized doctors and noncompliance of patients to medical advice, among many other cases. Given the constructive analysis both history and sociology has given towards health policymaking on diabetes as based on existing literature, it is essential for health policymakers dealing with said disease to consider several social science perspectives as a matter of gaining insightful ideas that could contribute to the substance of future related policies. Human interactions are essential to determining reasons behind the occurrence of diabetes.

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