

# [Socioeconomic and government strategy influences on health](https://assignbuster.com/socioeconomic-and-government-strategy-influences-on-health/)

Task 1A:

The effects of socio-economic influences on Mary’s health:

There are various effects of socio economic influences on Mary’s health. In the case, it can be found that Mary is an 18 years old girl who is a smoker and drinker and two months pregnant. She left school at the age of 15 years and she lives in the council flats in East London with her parents and she presently works 16 hours a week in a supermarket in London. This paper will look into the issue of smoking habit during pregnancy. Socio economic differences exist in society in terms of health. People in lower income group have significantly higher likelihood to suffer from health illness compared to the people with higher income group. In the case study, Mary left school at the age of 15 which can have significant negative impact on the behavior of Mary’s health. She is young and she is only 18 years of age. Instead of studying in the college, she works for 16 hours a week in supermarket which also has significant impact on her health and behavior. Her friends might be attending schools and colleges for studying various courses. She is also pregnant at the age of 18 which is also quite abnormal. So, the inequality exists between Mary and other people in the society. The economic condition of Mary is also not quite good which is evident from the case that she is living in the council flats. It is also possible that Mary is from a different country, who has been living in UK with her parents and it has created an inequality in the society. All these factors have significant effects on Mary’s health.

An assessment of the importance of government resources such as reports and research on inequalities in health in relation to the case study:

There are a number of reports have been published by the government of UK on the inequalities in health in relation to the case study. Among them, the most important one is the Black report which was a document that has been published in the year 1980 by Department of Health and Social Security in UK. It was a report of the expert committee into the matter of health inequality developed by Sir Douglas Black. The Black Report demonstrated that though the overall health had improved a lot since the introduction of the welfare state, there are different types of inequalities exist and the main reason behind the health inequality is the economic inequality. The report also stated that the death rate of the people in social class V is higher than the death rate of people in social class I and the gap between the two types of people has been increased a lot (Jon, 2013). The Black Report was commissioned in the year 1977 by David Ennals, the Labor Secretary of State followed by the publication of a two page article by Richard G. Wilkinson in New Society. On 11 th February in 2010, Sir Michael Marmot, published Fair Society, Healthy Lives which provided a report on the relationship between the poverty and health. In the case of Mary, the poverty can be connected with the health condition of her.

Identification and discussion of the reasons and any possible barriers to Mary accessing the health care:

Mary is a pregnant woman who is 18 years of age and she is into smoking habit for many years. She needs proper health care in order to make her own lifestyle better and health of the unborn child too. But, there are many reasons which might restrict her from getting proper health care. Among the, the first one is lack of insurance coverage. In many cases, it is found that the patients are more likely to postpone medical care and often they go without proper medical care and they often go without the prescribed medications. In UK, the people of minority groups get the insurance coverage at higher rates which might not be possible for Mary. The second barrier is the lack of regular source of care. As she is residing in the council flats, it might be quite difficult for her to have access to the regular source of care. Another possible barrier in case of Mary is lack of financial resources (Margaret and Martin, 2010). Mary is working in a department store for 16 hours a week. So, she might not have enough money to spend for the healthcare. There are legal barriers too for the health care services for the low income immigrants. Some structural barriers such as poor transportation, inability to make an appointment etc can have significant impact on Mary to access proper health care services.

Task 1B:

Identification and analysis of the links between the government strategies and models of health promotion in relation to the case study:

There are many government strategies and models present of health promotion which can be related to the case study of Mary. Among them the most important model is the Precede-Proceed planning model. The model is entirely based on the recognition of the multiple determinants of health and it starts with an assessment of the quality of life and the social problems as the ultimate goals and health is a contributory factor of it. The model proposes a sequence of the diagnostic phases which focus on the organizational and environmental factors which influence the health behavior. The model also depends on the predisposing factors which can also be considered as the personal factors such as the motivation, beliefs and knowledge attitudes. The model also focuses on the reinforcing factors such as the behavior and attitudes of the role models, peer etc and the other one is the enabling factors which means the resources and skills which are meant to either support or change the behavior (Bollini & Siem, 2012). The Health and Social care Department of UK follows the model and they have instructed the healthcare settings to follow the model. The Royal Society for Public Health was developed in the year 2008 by the merger of the Royal Society for the Promotion of Health and Royal Institute of Public Health. They follow the model for promoting health in the NHS. In case of Mary, the health care setting should follow the model while assessing the problems of Mary.

Role of different professionals in health and social care to meet the health promotion targets set by the government:

Different types of health and social care services are available for the people with various types of problems such as Mary in the case study. They are:

Doctors: Doctors provide different types of services to the patients. They are the key persons responsible for assessing and diagnosing the problem in the patients and take appropriate steps for the treatment.

GP: The GPs are usually local doctors who can take care of the general health of the people. The GP can diagnose the specific condition first and they also conduct various tests to diagnose the problem properly.

Nurses: There are different types of nurses present in UK who can work with the patients in different aspects. The Community mental health nurses who are also popular as the psychiatric nurses work in the community. They can provide treatment, support and care to the people with different types of mental health problems (Subramanian, Smith & Subramanyam, 2006).

Social care staff: There are a number of helpful care services available in any community which can be arranged through the local council of the social services department. There are different types of cares provided to the people in the health care settings in the local areas. They determine how the services will be delivered to the patients, providing meals, home care and they also provide day care services. There are many local authorities present that offer the services in collaboration with other organizations.

Social workers: The social workers have some specific training as well as qualifications. They can assess the needs for the services of the persons and they also plan and advise the services to the clients.

Role of routines in promoting healthy living with respect to Mary in the case study:

Mary is into smoking habit and she is pregnant. In such condition, it is quite important for Mary to change the lifestyle to benefit her own and the health of the unborn child. If Mary follows a routine, she will be able to manage all the activities throughout the day appropriately and she won’t face any problem (Subramanian, Smith, & Subramanyam, 2006). Maintaining the routine will also help Mary to keep engaged in different types of work throughout the day which will not keep her depressed which will improve her health condition.

Task 2:

Identification of the theories of health behavior and explanation of how health beliefs are translated into behavior in relation to Mary and the case study:

The Transtheoretical Model (TTM): This is a concept used to describe, explain, predict, and influence intentional behavioral change. The system was developed by James O. Prochaska from the University of Rhode Island and his colleagues. This model is based on the assumption that change processes can happen through several qualitatively different and successive steps that build on each other. Therefore, the Transtheoretical Model is also known as multi-stage model of behavior change (“ Stages of Change”). The model was adapted to different health behaviors, such as tobacco smoking, alcohol consumption, diet, physical activity / sports (Levere, 2010). In the provided case, the stages of behavior change of Mary are as follows:

* Pre-contemplation: In this stage, Mary has no intention to change her problematic behavior of smoking.
* Contemplation: In this stage, Mary will realize the threats of smoking during pregnancy and will have the intention to eventually change the problematic behavior.
* Preparation: In this stage, a concrete plan will be created to change the problematic behavior of Mary and the first steps towards a change in behavior will be taken.
* Action: In this stage, Mary will implement the plan to change her behavior.
* Maintenance: In this stage, Mary will have abandoned the problematic behavior for a long period of time.
* Termination: In this final stage, the old behavior is permanently abandoned, the new behavior is internalized and maintained (Nelson, 2013).

The Health Belief Model: This is a model of health behavior used to analyze and predict health-related behavior and find the health psychology application. The crucial variable is the value of the target and the probability of target achievement. The model is based on the assumption that certain behaviors, involve the probability of increasing a particular disease. The model aims to reduce this risk changes in individual behavior (Dusenbury, 2013). The belief that a particular activity helps avoid a disease is crucial for the assumed probability of goal attainment. The health behavior is conscious of cost – benefit considerations. In the provided case, it can be considered that initially, Mary has the belief that smoking during pregnancy is not a negative thing and that smoking does not have any harmful effects on the baby/fetus. Based on this belief, her behaviour will involve smoking during pregnancy. In order to improve this scenario, health promotion can be used to increase awareness about the negative impacts of smoking during pregnancy. This will change the belief of Mary. If a new belief is established that by quitting smoking, Mary can avoid the negative impacts on the baby/fetus, this new belief will influence a new behaviour which will involve Mary’s staying away from smoking (Okuyemi, 2012).

From these two models of health behaviour it can be seen how health beliefs are translated into behavior.

Identification and discussion of the potential effects of conflicts with local industry on health promotion with respect to Mary and the case study:

In UK, there have been a lot of efforts to fight against the local industries related to smoking. In order to control the negative impacts of smoking, the tobacco industry has been made to print warnings on the packets of cigarettes. There are a lot of legislations too which have impact in this matter. A smoking ban is established in England, banning smoking in work places in UK. Thiswas introduced on 1 July 2007 due to the Health Act 2006. Similar bans were established, in Scotland on 26 March 2006, Wales on 2 April 2007 and Northern Ireland on 30 April 2007 (Okuyemi, 2012). The conflicts with the local industry have led to enforcement of the ban. Thus, Second Hand Smoke has reduced. The ban is followed strictly in all parts of UK. Also, due to the conflicts, awareness has increased about the negative impacts of smoking, especially during pregnancy. There are a lot of restrictions on advertising of tobacco products too. In the 1997 election campaign, the Labour Party declared that advertisements of tobacco products would be banned. This ban was implemented through the Tobacco Advertising and Promotion Act 2002. This act banned almost all forms of advertising for tobacco products. Also, the selling of tobacco products in vending machines has been banned in UK from 2012 onward. There is a fine of £2500 in case of non-compliance (Nelson, 2013). Due the conflicts, Mary will find it difficult to access cigarettes. Also, she will not be able to smoke in public places. Thus, it will be easier for her to quit smoking.

Explanation of the importance of providing relevant health related information to the public with respect to the case study with examples:

Health promotion is a set of methods using which awareness is increased about specific health care issues. It is very important as in many cases, awareness is very low about the facts related to different health scenarios. The false information or false beliefs lead to unhealthy behaviour which affects health negatively. Health promotion ensures that people know the actual truth about different health care issues. In the provided case, awareness about the negative impacts of smoking during pregnancy is low. Health promotion is important to ensure that Mary realizes the threats and quits smoking. The smoking during pregnancy is a public health problem in industrialized countries in proportion to the increasing number of women smokers: it was estimated (in 2012) that 60% of pregnant women smoke. 60-70% of them stop spontaneously (or drastically reduce their consumption) (Chaloupka, 2013). The tobacco has consequences that can be dramatic during pregnancy and have negative impacts on subsequent child health. The rate of spontaneous miscarriage is three times higher among women who smoke during pregnancy. The rate of ectopic pregnancy (by altering the mobility of the egg in the fallopian tube) is three times higher among women who smoke 20 cigarettes per day. It is 1. 5 times higher in those who smoke 10 cigarettes per day. Thus, it can be seen that health promotion is needed to ensure good health of Mary as well as her baby (Biener, 2013).

Task 4 – Reflective account:

While working this essay and the PPT, I have realized the significance of health promotion. If have understood that low awareness leads to unhealthy behaviours, which in turn, can lead to serious health issues. Health behaviour is influenced heavily by health beliefs. In case a person has a false belief based on low awareness, he or she might indulge in behaviour or practices that can have detrimental effects on health. This can be prevented with the help of health promotion. From the given case study, I assessed that in all probabilities, Mary was not aware of the exact threats related to smoking. She felt that smoking is a matter or choice or lifestyle and she had the right to smoke. However, her belief was false due to the fact that she does not realize that smoking can be dangerous during pregnancy. The negative consequences of smoking during pregnancy include risk of late fetal growth (proportional to the number of cigarettes smoked per day: the daily consumption of a packet causes an average birth weight decrease by 250 grams). There is also the risk of fetal death and the risk can be multiplied by 2. 5 (Hedley, 2012). The risk of preterm delivery is multiplied by 3. Skin alterations in the mother responsible for stretch marks increase and there can be severe delay in healing in cases of episiotomy or cesarean section. I was shocked to learn the negative impacts. Though I was always aware that smoking should be avoided during pregnancy, I did not know the underlying reasons. This essay and PPT made me realize the threats of smoking during pregnancy. In terms of my understanding of the phenomenon of human health, the definition of a healthy lifestyle can involve all in human activities related to the preservation and promotion of health, everything that serves the human functions through activities to improve the living conditions – work, leisure, life. I have realized that components of HLS contain various elements relating to all areas of health – physical, mental, social and spiritual. The most important of them are – food (including consumption of safe drinking water, the required amount of vitamins, minerals, proteins, fats, carbohydrates, special foods and supplements), life (quality of housing conditions for passive and active recreation, the level of mental and physical safety in the life), working conditions (safety not only in the physical but also the mental aspect, incentives and conditions for professional development), physical activity (physical education and sports, the use of various systems of healing aimed at improving physical development, his support , recuperation after physical and mental stress) (Chaloupka, 2013). Thus, I can conclude that in order to understand the important of healthy lifestyle, awareness and access to special preventive procedures is important.