

Public attitudes towards health



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Attitudinal determinants: Public attitudes

1. The public concepts of what health is
2. The public concepts of what illness is
3. The importance the public put on health
4. Public attitudes towards health and medical professionals

1. The concept of health refers to a person's social, mental and physical health. According to the World Health Organization health is a characteristic of a complete physical, mental, emotional, intellectual and social well-being of a person in terms of being free from any ailments or diseases. The community health professional places a strong importance on wellness; it includes the quality to establish a potential fulfilling and productive life. A client and a health care provider often define wellness and health in different ways. One of the foremost vital things in life is to be healthy, not simply physically, but also mentally and emotionally likewise.

2. Concepts of Illness

Is a personal state in which the person feels unhealthy physically, emotionally, intellectually, socially, developmentally or the spiritual functioning is weakened or impaired contrast with previous experience.

Illness refers to the subjective sense of feeling sick or feeling unwell. Illness does not define a specific pathology; it refers to a person's subjective

experience of it, such as discomfort, tiredness, anxiety, confusion or general malaise. The way patient address symptoms sometimes it influenced culturally and social background. illness is a wickedness and unpleasantness it is a unhealthy condition of a body and mind. A person's health was greatly influenced by ventilation, noise, cleanliness, diet, temperature. Cultural differences affect patients' attitudes about medical care and their ability to understand, manage, and cope with the course of an illness, the meaning of a diagnosis, and the consequences of medical treatment. culture specific values influence patient roles and expectations, how much information about illness and treatment is desired, how death and dying will be managed, bereavement patterns, gender and family roles, and processes for decision making.

3. The focus of public health intermediate is to improve health and quality of life through the prevention and treatment of disease and other physical and mental health conditions, through surveillance of cases and health indicators, and through the promotion of healthy behaviors. Some examples of common public health measures are the promotion of hand washing, breastfeeding, family planning, vaccine preventable disease, and distribution of condom to control the spread of sexually transmitted diseases. The modern public health practice requires multidisciplinary teams of professionals including physicians specializing in public health/community medicine/infectious disease, epidemiologists, biostatisticians, public health nurses, medical microbiologists, environmental health officers/public health inspectors, pharmacists, dental hygienists, dietitians and nutritionists, veterinarians, public health engineers, public health lawyers, sociologists,

community development workers, communications experts, bioethicists, and others. The World Health Organization (WHO) is the international agency that coordinates and acts on global public health issues.

4. The public is making more demands on health professionals and pursuing more engagement in decisions about their care. Dignity and respect and the relational aspects of care are core drivers of satisfaction of both health and social care services. There is important room for improvement in this aspect of care within the NHS, but particularly in social care. Attitudes among the public alter from the completely unconcerned to a small proportion of the public that has strong views on privacy either from a sense of a private to privacy or because of some sensitive episode in the past that they wish to protect. The majority of the public seem to rely on trust in clinicians & the health care system. It is clear that in modern healthcare the public are unclear on the potential roles of medical records. The public develop to be enhancing more comfortable with technology which may reduce fears over privacy but with growing expectation over security & choice about access to their records.

Reference:

Caplan, Arthur L. 1993. The concepts of health, illness and disease. In: ed. William F. Bynum & Roy Porter (eds.), Companion Encyclopaedia of the History of Medicine, London: Routledge, pp. 233-48.

Detmer D. Your privacy or your health – will medical privacy legislation stop quality health

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care. Int J Qual Health Care 2000; 12: 1-3.

<http://www.slideshare.net/drjayeshpatidar/concept-of-illness>

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