

Introduction: worked
are regarded,
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are universally

[Economics](#), [Budget](#)



Introduction: In this assessment, I am going to explore the concept of health in the relevance of quantitative research. This will be split into two sections; the first section will provide a brief explanation of the concept Health and how it is significant in social science research. Then, the second section will provide a review of the difficulty and the hardships of measuring health. I will also be providing graphs using Stata to further emphasise my argument.

Section 1: In order to complete this assessment, health must be defined; health is known as a person's mental or physical condition¹. Being in good health is imperative to everyone, not just on how it makes an individual feel but how one can function and participate in the community. The modern philosophy of health is predominantly centred by determining the nature of disease, illness and health from a scientific stance². Thus, health is now viewed as one of the most valued aspects in life due to its futility³. Most of Western and Eastern society hold the advancement of medicine as crucial as it is now universal to protect and enhance the longevity of life. This is highlighted with the importance that the doctors and other health workers are regarded, consequently they are universally amongst the most well paid in the majority of states.

Although there is a definition of what health is, the concept can be seen as subjective and awkward to define and difficult to measure. This is due to the fact that the idea of health incorporates a wide range of ideas and familiarities that it would be relative to social norms because many individuals and different groups in society may have a different perception of what constitutes as good health⁴. Although there is a commonly accepted

definition of the term health, Australia's health 2014 incorporates both physical and mental health as well as socioeconomic and environmental determinants⁵. Health continues to be tremendously relevant in social science research, as shown with the programs that the National Institutes of Health (NIH) have undertaken to improve social science contributions to health research⁶. This is highlighted through the NIH June 2000 conference as it solidified that the role of social sciences in obtaining research for health has helped progress the agenda for advancing such research⁷. Furthermore, the NIH devoted 10% (\$2.

64 billion) of their total budget to the social science research in 2002 highlighting the interdependent relationship of health and social science research. Social science research has also been able to expose the idea that health influences occur beyond the level of the individual and external to any healthcare system⁸. Social science research has identified that socioeconomic status, culture, education and food access are a few of several factors that can influence that health of a populace. An example of this research is apparent with Jens Ludwig, whom, in the 1990's unsystematically assigned women with children living in high poverty-stricken areas with either traditional housing vouchers or vouchers that were only redeemable if they moved to a low poverty area⁹. The study showed, that those receiving the low-poverty housing vouchers were less likely to become obese or have diabetes compared to the traditional vouchers. These types of studies are extremely important as it holds vital implications for population-level policies that strive to improve health.

Hence, why social science is still relevant to improving health. Section 2 The first attribute to assess the difficulties and measure will be mental health. Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. Mental health consists of both mental illness and mental wellbeing¹⁰. Mental wellbeing is made up of general happiness and life-satisfaction and emotional functioning, wholesome relationships with others and self-acceptance.

Mental illness is defined as a health condition that can affect emotion, behaviour and persons ways of thinking. ¹¹ The EQ-5D is an extensively used questionnaire for calculating mental health issues in healthcare. It replicates the influence of common mental health conditions such as mild to moderate depression however it seems to become increasingly more challenging for use in individuals with psychotic and severe and multifaceted non-psychotic disorders. The EQ-5D has elements where it is useful and valid and generally able to pick up on common conditions like mild to moderate depression and anxiety. However, this indicator can be amiss as it fails to identify participants with delusional or bipolar disorder. Furthermore, measuring mental health through questionnaires can be seen as unreliable as it is would be a subjective measure with whoever is marking it.

As well as this, it would also be problematic on a universal stance, as this instrument are based on Western perspectives on behaviour and the validation data originate from European or Anglo-America culture¹². Additionally, suicide rates can help measure mental health issues and mental wellbeing. Mental health illnesses such as depression substance abuse are

the causes of 90% of all suicides¹³. This indicator is a resultant of dividing the number of deaths caused by suicide and premeditated self-harm by the population, and then multiplying the result by 100 000. To make the indicator more reliable and valid, it can be calculated separately for male and female.

Standardised death rates are often used in comparison to global suicide rates and sex suicide rates comparison. On the other hand, this indicator offers only limited information about the occurrence of mental disorders thus it is unable to provide the causes for any of the illnesses. Furthermore, the procedures for keeping records of death by suicide are not uniform across countries. Social exclusion and poverty also play a factor determining suicide as cause of death. These factors limit the validity of. Changes in procedures and in cultural and social norms may also affect changes in suicide rates over time. The second attribute that is going to be explored is income. Income is defined as money that is earned from doing work or received from investments¹⁴.

In many developed countries, obesity is widely measured as a condition that affects the individuals of a lower social class. An indicator would be calculating the market valued assets of individuals with obesity or type 2 diabetes and observing the patterns of socioeconomic class. Although this would create a valid and accurate measure, this would be a tremendously impractical measure data collection due to the time it would take to conduct and the manpower it would cost to sift through. The alternative to this measure would be measuring the disposable income of each household of

the individuals with mass weight related problems as it would be a simpler research method to conduct and would give a somewhat valid conclusion.

The third attribute that will be examined is physical fitness. This is can be defined as the ability to carry out without ongoing fatigue. 15 One indicator of physical fitness is through external measurements such as Body Composition.

This means to measure body fat and higher body fat tends to correlate to diabetes and heart disease¹⁶. An appropriate instrument for measuring body composition, hydrostatic weighing¹⁷. This also has the potential to prove that body composition is a valid measure of obesity due to the strong correlation between high body fat and cardiovascular diseases. In addition to this, hydrostatic weighing is reliable and accurate if restrictions of the expectations are taken into account.

18 However, it is an extremely inconvenient method of measuring body fat, due to the vast space of this instrument, it would not be a practical way for healthcare centres to measure an individual's physical health as well as the fact that it is an expensive piece of equipment. Another indicator of physical fitness would be measuring blood pressure. Blood pressure measurement is universally performed in medical centres. This is exceedingly reliable as measuring blood pressure is both simple and quick, so much so it is measuring blood pressure can be done at home with patient's individual kits¹⁹. However, the validity can be questioned, as blood pressure is highly interchangeable, and can change consistently depending on the

physiological state of the patient. In addition, although high blood pressure does have a strong correlation with poor physical fitness, it is not lack of physical health is not always the cause of a high blood pressure²⁰.

Conclusion To conclude, the attributes that I picked out for the concept of health seem to have many difficulties within measuring the validity of the attributes. With the measuring mental health, the EQ-5D, although coherent at identifying mild to moderate depression and anxiety in a participant, it fails to identify more psychotic illnesses like bipolar disorder. Therefore, it is not a reliable instrument due to the limited use.

In measuring the second attribute, income, the indicator of data collection of price of marketed assets is a reliable instrument, however, it is extremely time consuming and expensive, making it impractical. Thus, the most efficient use would be to find out disposable income of patients. Finally, the third attribute, physical fitness can be difficult to measure due to the unfeasible equipment in health centres. Although the hydrostatic weighing would be incredibly reliable, it would again be very expensive and a very unrealistic experiment that could be carried out regularly. The difficulties measuring of these attributes highlights that health is a problematic concept to measure. 1 ' Health | Definition Of Health In English By Oxford Dictionaries' (Oxford Dictionaries | English, 2017)

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