Using trevor's and dahlia's accounts from activity 2.3 in learning guide



In the context of health and illness, a model will specify what factors are of importance in determining whether a person is ill, (and conversely, by implication, what factors are not relevant). It will also specify the nature of the interrelationships between these factors and being ill (Wade, 2009) I will begin by talking about the Biomedical Model of Health. This model is considered to be the epitome of scientific, objective and reproducible medications. The main features of this model, are that health is 'absence of disease' and being 'functionally fit'.

Doctors and specialists can diagnose, treat and cure. They can explain the disease or illness, within a biological network and this emphases the nature of the disease. The Biological Model provides diagnostic categories, provides an easy identifiable structure, provides effective treatment and produces experts who highly specialise in their field (The Open University, 2012) The biomedical model, which primarily assumes that all illness arise from within the body and is caused by an initial dysfunction of a part of the body, is the current dominant model of illness.

However, Biomedicine is criticised for omitting things such as lifestyle behaviours, individual needs and social support/choice. These are things that impact individual experience on Health & Social Care . I will now discuss the Social Model of Health. This model focuses on the social distribution of health and illness, i. e. , death rates can vary greatly between social classes . This model tends to take a preventative approach and would mainly interest in the environmental and social causes of ill-health .

Recently doctors have begun to acknowledge the importance of social influences on health, i. e., stress factors and lifestyle. 'Good Health' is now recognised as 'merely an absence of a disease'. The World Health Organisation (WHO) defines it as 'a state of complete physical, mental and social wellbeing'(K217, Block 1, p. 28). Sociologists use the term 'illness' to describe individual subjective experience of 'feeling unwell'. The term sickness refers to social status, which is defined professionally, i. e. by a doctor who issues a sick note, while disease is a term to describe a biological malfunction (Stow AC Social science) In order to answer this question I need to explain what factors, from both models, with help to improve Trevor's quality of life. Using evidence from course material I will talk about quality of life and wellbeing, in relation to Health and Social Care. From a clinical perspective (Biomedical), wellbeing is defined as the absence of negative conditions. From a psychological perspective (Social), wellbeing is defined as the prevalence of positive attributes. Barwais 2011). Quality of life is measured in terms of life expectancy, health and social problems, levels of income, number of social contacts, and participation in education and employment (Doyal and Gough 1991). Holism and the Biomedical Model go hand in hand. It allows a complete a 'whole' or complete picture of one's health and illness. Holism recognises many different factors that have an impact on individual health and illness. This means the individual themselves, are central to their 'whole' wellbeing.

This includes their health, their personal choices, and recognising their own identities. Using this approach to health and social care physicians can combine all aspects of the individual, i. e. , their physical, mental and

emotional 'health' (K21, Block 1, and P. 38). Holistic healthcare refers to an approach to analysing illness and providing healthcare that acknowledges and responds to all factors relevant to the health (or illness) of a person. The term itself does not signify what those factors are or how they are classified.

The word holistic is also used to suggest a morally better and often an alternative non-allopathic treatment approach to illness. Depending on the individual's medical condition, deciding which care is needed, and how best to give this, will have many factors on deciding who needs to do what, and why. From the aspect of Trevor's care, evidence from course material shows Trevor receives care from both models I have discussed. Both Trevor, and his daughter Dahlia, have very high expectations of the level of care that Trevor both wants, and needs.

Trevor completely understand how sick he is, but he does not allow this to stop him from doing what he wants to do every day and has his own expectation of how his needs must be met. Dahlia also ensures her father's wants and needs are more than met, along with her own expectations of the care workers themselves and also the level of work expected from them every day . Dahlia's expectations for her father's care are things like, cleanliness of Trevor's home, the surrounding environment to be kept to certain standard and also for it to be comfortable for him.

She also expects Trevor to be given good, nutritious food and expects nothing less than high standards of care. (The Open University, 2012)

Trevor's own expectations are very much alike to Dahlias; however, he does speak of his own needs. He talks about his laptop; he sees this as his lifeline!

He also goes to the day centre which is great for him. Being able to get out and about ensures that Trevor has some feeling that he is still an independent man with his own wants and needs met.

Trevor also tells us that he is a very trusting man. He enjoys having people looking after him when he knows, them as he knows they do a very good job. He also speaks on enjoying TV. All of the needs discussed above would be the Social Model. It is vitally important for Trevor that all these needs are met; otherwise his condition will deteriorate, as he will have the feeling of having no control over his condition, or how it affects his daily life. I feel, from this aspect, the Social Model is just as important as the Biomedical Model.

The Biomedical Model is used by his clinician/nursing staff to treat his pain and manage all medical aspects of his condition. The Biomedical Model is not enough on its own to give Trevor the full treatment and quality of life he needs, nor is the Social Model alone, as without the Biomedicine Trevor's condition could not be managed and therefore he would be unable to take part in his daily activities and hobbies. Models have their pros and cons, however, I feel overall, they can both, in their own way, benefit all patients who have long term health problems or disabilities.

The more course material I studied, the more I discovered, that gradually, over time, more and more health professionals are seeing benefits from those who have had the Social Model included in their care plan. Before this however, medical professionals believed that Biomedicine was the only way that they could get a patient back to full health. Word Count: 1209

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