

# [A healthy nation they say is a wealthy nation health essay](https://assignbuster.com/a-healthy-nation-they-say-is-a-wealthy-nation-health-essay/)

[](https://assignbuster.com/)[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/)

## INTRODUCTION

A healthy nation they say is a wealthy nation. Healthcare is important to the society because people get ill, accidents and emergencies do arise and the hospitals are needed to diagnose, treat and manage different types of ailments and diseases. Many of people’s aspirations and desires cannot be met without longer, healthier, happy lives. The healthcare industry is divided into several areas in order to meet the health needs of individuals and the population at large. All over the world, the healthcare industry would continue to thrive and grow as long as man exists hence forming an enormous part of any country’s economy. Healthcare is defined as the diagnosis, treatment, prevention and management of disease, illness, injury, and the preservation of physical and mental well-being in humans. Healthcare services are delivered by medical practitioners and allied health professionals (http://en. wikipedia. org/wiki/Health\_care). The National Health Service (NHS) is the provider of healthcare to all permanent residents in England. The services provided by the NHS are free at the point of use and paid for from general taxation. Although, there are charges associated with other aspects of healthcare such as eye tests, dental care, prescriptions, and many other aspects of personal care. The NHS is guided by series of policies as outlined by the Department of Health from time to time. All Health policy in England and the rest of the UK rests on the National Health Service Act of 1946 which came into effect on 5th July 1948, launched by Minister of Health, Aneurin Bevan during the opening of Park Hospital in Manchester. In this write-up, I would be analysing healthcare policy, provision and funding in England. I would also assess and evaluate the impact that culture and the society has on healthcare as well as the people’s attitude towards healthcare. The role of public health and health promotion in the provision of healthcare services can not be over emphasized. I would also assess national and international socio-political issues in the promotion of public health, an analysis of the impact of international campaigns and national policies on the demand for healthcare would be done. I would also evaluate the role of health promotion in determining healthcare service demand in England. Contemporary issues affecting healthcare in England would be identified and an evaluation of their impact on national and international policy as well as practical responses to these issues would be done. The World Health Organisation (WHO) defines health policy as decisions, plans, and actions that are undertaken to achieve specific health care goals within a society. The aim of health care policies is to define a vision for the future which in-turn helps to establish targets and points of reference for the short and medium term. It also outlines priorities and the expected roles of different groups; and it builds consensus and informs people. Policy governs and informs the planning and implementation of both strategies and projects, and provides a framework for the professional development of the workforce (Porter and Coles, 2011). However, polices can take on different forms and may be communicated in different ways. Culture is a way of life; it is the way we do things. It is defined as the way of life of a particular society or group of people; it includes the patterns of thought, beliefs, behaviour, customs, traditions, rituals, dress, language, art, music, as well as literature (Webster’s New World Encyclopedia, 1992). Culture as defined by dictionary. com is the behaviours and beliefs characteristic of a particular social, ethnic, or age group. It is a group’s shared set of beliefs, norms, and values. The cultural differences and way of life of people have a great impact on the way they assess their health and well-being as well as their attitude towards healthcare. It affects their attitude and understanding of the cause of an illness and how to manage them as well as the consequences of medication and medical treatments. This also has an effect on people’s expectations on healthcare delivery. There are diverse groups of people living in England as a result of migration and they are diverse in the fact that they are of different age, sex, gender, race, ethnic background, colour, religion, beliefs as well as cultural background. It is important for health and social care practitioners to understand and cope with all these differences as it affects the way people react to healthcare provision. In England, every resident have access to free healthcare provided by the NHS. However, people can still go to private hospitals if they wish to but they have to pay for the medical services they receive by themselves or by their health insurer. For religious reasons people also have different beliefs and how they perceive healthcare delivery and sometimes how they react to medical practitioners. For instance, Muslim women do not allow male medical practitioners to attend to them especially when it has to do with the exposure of their private parts. Jehovah’s witnesses do not consent to the use of blood transfusion. Using the PEST analysis, I will be assessing how several factors have influenced people’s attitude towards healthcare in England. Political factors: a new government with new agenda and mission to fulfil their manifestos pass new laws about health and health reforms. With the government of the day wanting to cut cost; so many benefits of the citizens has been drastically reduced. These include a cut in energy allowance for the elderly, cut in healthcare allowance and so on. Economic factors: the global economic downturn has made the government of the day to cut cost and introduce policies and agenda which has made people loss job and become unemployed. How well the government of the day react to these issues will determine the extent to which the health and well-being of its entire populations are protected. During these times, some people may become depressed, and become mentally ill. Social factors (inequalities, discrimination): for instance, when people become depressed and mentally ill during recession, they become discriminated upon by colleagues, friends and sometimes close family members. The loss of a job too makes people to socialise less often and prefer to live in isolation most times and this can have a great impact on their health. Technological advancement: this has drastically affected healthcare delivery in recent times. Diagnosis and treatment of diseases with the use of technological equipment have gone a long way in making things easier and faster for healthcare professionals and the patients as well. Treatment can be done faster and accurately too. For instance, the use of radiotherapy in the treatment and control of cancer. However, such treatments are sometimes rejected by the patient due because of the after effects it will have on them. A recent example is Sally Roberts who resisted radiotherapy being done on her son who has brain tumor (the guardian news UK). Environmental factors: a change in the weather e. g. snow, heavy rainfall and flooding also affect people’s attitude and spending towards healthcare. Many become very ill, catching a cold, having flu and fever in cold temperatures, making them to visit their local G. Ps more frequently, and spending more on medication as well. The government tend to spend more and healthcare professionals tend to be more engaged during these periods. Emergency services work round the clock saving people.

## HISTORY OF THE NHS

Healthcare in England would not be complete without taking a look at NHS, its history and how it has evolved over time. NHS is the major provider of healthcare in England as earlier mentioned in the introduction. For this purpose of this assignment, I would be analysing only the major events that happened in the NHS decade by decade. The Second World War ended in 1945 leaving many soldiers dead and lots wounded who needed quality healthcare and some suffering from post war depression and all other kinds of ailments and diseases. Right after the war, there was heavy storm and flooding in the following year causing destruction, industrial and economic breakdown. With no money to spend on proper and balanced diet, people are left with malnutrition and became prone to various infectious diseases and so on. This led to the government wanting to create a system whereby good healthcare can be available to all regardless of wealth and to bring all healthcare professionals under one umbrella, hence the creation of the NHS. Before the start of NHS, access to healthcare in England was funded by each individual that needs healthcare services. There are also fewer hospitals and fewer Doctors. After the creation of the NHS in 1948, there have been lots of innovations, inventions and discoveries through the use of research. In the early 1950s, one shilling (5p) and £1 respectively for prescription charges and dental treatment was introduced, however the prescription charges was abolished in 1965 and later re-introduced in 1968. This was followed shortly by the revelation of the DNA (deoxyribonucleic acid) structure by two scientists, James D. Watson and Francis Crick. The DNA is a material that makes up the gene and passes hereditary characteristics from parent to child. This allows the study of diseases caused by defective genes, hence allowing doctors and clinicians to easily identify diseases and know how to treat them on time without wasting money and resources. It also helps in the prevention of hereditary diseases. In the mid 50s, Sir Richard Doll published his finding of a research he carried out in the 40s about the link between smoking and cancer. He was able to found out that smokers are more likely to die of lung cancer than non-smokers. Shortly after, there was an introduction of daily hospital visits for children because before then, parents were only allowed to visit their kids for one hour each on Saturdays and Sundays. By 1958, polio and diphtheria vaccinations were launched as there has been an epidemic just before that year. The vaccination programmes ensures that children of 15years and below were vaccinated; leading to an immediate and dramatic reduction in the diseases. Hence, the promotion of good health by the NHS and not only the treatment of illnesses and diseases. This however formed a good part of the NHS plan. In the 60s, contraceptive pill was made widely available, initially to married women, but this is relaxed in 1967. The pill suppresses fertility with either progesterone or oestrogen or a combination of both and it plays a major role in women’s liberation and contributes to the sexual freedom of the so-called Swinging Sixties. A report (Porritt Report) was published in 1962, which results in Enoch Powell's Hospital Plan. The medical profession calls for unification of the NHS after criticizing its separation into – hospitals, general practice and local health authorities. The Hospital Plan approves the development of district general hospitals for population areas of about 125, 000. The 10-year programme is new territory for the NHS and it soon becomes clear that it has underestimated the cost and time taken to build new hospitals. But with the advent of postgraduate centres, nurses and doctors will be given a better future. In the same year, the first hip replacement was carried out by Professor John Charnley in Wrightington Hospital. The Salmon Report was published in 1967. It sets out recommendations for the development of senior nursing staff and the status of the profession in hospital management. The Cogwheel Report considers the organisation of doctors in hospitals and proposes speciality groupings. It also highlights the efforts being made to reduce the disadvantages of the three-part NHS structure – hospitals, general practice and local health authorities – acknowledging the complexity of the NHS and the importance of change to meet future needs ad demands. The Abortion Act was introduced by Liberal MP David Steel and is passed on a free vote, becoming law on April 27 1968. This new act makes abortion legal up to 28 weeks if carried out by a registered physician and if two other doctors agree that the termination is in the best mental and physical interests of the woman. In 1990, the time limit is lowered to 24 weeks. On the 2nd of October 1968, a British woman gave birth to sextuplet after receiving fertility treatment. In the same year, In 1972, Computer tomography, CT scans was introduced and it transformed the way doctors examine the human body. Since that initial invention, CT scanners have developed enormously, but the principle remains the same. By 1975, the morphine-like chemicals in the brain called endorphins are discovered. Another major discovery of the 70s was the world’s first test-tube baby, Louise Brown, who was born on July 25th, 1978 as a result of in-vitro fertilization. This new technique developed by Dr Patrick Steptoe, a gynaecologist at Oldham General Hospital, and Dr Robert Edwards, a physiologist at Cambridge University found a way to fertilize the egg outside the woman’s body before replacing it in the womb. Shortly afterwards in 1979, the first successful bone marrow transplant on a child takes place. The operation was performed by Professor Roland Levinsky at the Great Ormond Street Hospital for Children. Magnetic resonance imaging- MRI scans was introduced in the 80s using a combination of magnetism and radio frequency waves, MRI scanners provides more information about the body e. g. prove more effective in providing information about soft tissues, such as scans of the brain. It provides very detailed pictures, so is particularly useful for finding tumours in the brain; it can also identify conditions such as multiple sclerosis and the extent of damage following a stroke. The first keyhole surgery was performed by using a telescopic rod with fibre optic cable to remove gallbladder. The Black Report aimed to investigate the inequalities of healthcare i. e. differences between the social classes in the usage of medical services, infant mortality rates and life expectancy. Poor people are still more likely to die earlier than rich ones. The report was commissioned by David Ennals, then secretary of state. The Whitehead Report in 1987 and the Acheson report in 1998 reached the same conclusions as the Black Report. The 1981 Census shows that 11 babies in every 1, 000 die before the age of one. In 1900 this figure was 160. Childhood survival has been revolutionised by vaccination programmes, better sanitation and improved standards of living, resulting in better health of both mother and child. Increased numbers of births in hospital has meant that where unexpected problems do occur, medical help is on hand. In 1986 the government launched the biggest public health campaign in history to educate people about the threat of Aids as a result of HIV. This was very much in keeping with the NHS’s original concept that it should improve health and prevent disease, rather than just offer treatment. In the following year, the first heart, lung, and liver transplant was carried out at Papworth Hospital in Cambridge by Professor Sir Roy Calne and Professor John Wallwork. A comprehensive national breast-screening programme was introduced in 1988 in order to reduce breast cancer deaths in women over 50. This project is launched with breast-screening units around the country providing mammograms that takes an X-ray of each breast, which can show changes in tissue that might be otherwise undetectable. This means that any abnormalities show up as early as possible, making treatment more effective. NHS and Community Care Act was introduced in 1990 and the first trust established in 1991. This means health authorities manage their own budgets and organisations will become NHS Trusts, that is, independent organisations with their own managements. The aim is to encourage creativity and innovation and challenge the domination of the hospitals within a health service that is increasingly focused on services in the community. National register for organ donation was set up in 1994 to co-ordinate supply and demand after a five-year campaign. Organ donation is needed as demand outstrips supply and this register ensures that when a person dies they can be identified as someone who has chosen to donate their organs. NHS Direct, a nurse-led advice service which provides people with 24-hour health advice over the phone was launched. It is the start of a growing range of convenient alternatives to traditional GP services – including the launch of NHS walk-in centres, which offer patients treatment and advice for a range of injuries and illnesses without the need to make an appointment. The NHS walk-in centres was established in year 2000 to offer convenient access, round-the-clock, 365 days a year and are managed by Primary Care Trusts. The services are available to everyone without making an appointment or requiring patients to register. In 2002, Primary care trusts are set up to improve the administration and delivery of healthcare at a local level. The primary care trusts oversee 29, 000 GPs and 21, 000 NHS dentists. The trusts are in charge of vaccination administration and control of epidemics also control 80 per cent of the total NHS budget. They also liaise with the private sector when contracting out of services is required. As local organisations, they are best positioned to understand the needs of their community, so they can make sure that the organisations providing health and social care services are working effectively. In 2004, all patients waiting longer than six months for an operation are given a choice of an alternative place of treatment. Everyone who is referred by their doctor for hospital treatment is given a choice of at least four hospitals. Nowadays you can choose where and when to have your treatment from a list including local hospitals, NHS foundation trust hospitals across the country and a growing number of independent sector treatment centres and hospitals that have been contracted from the private sector. You can choose according to what matters most to you: waiting lists, MRSA rates, bus routes and so on. Robotic intervention was launched in 2007 with the aim to performing operations to treat patients for fast or irregular heartbeats. Free choice is introduced on April 1 2008. Patients can choose from any hospital or clinic that meets NHS standards. Patients who are referred by their GP for their first consultant-led outpatient appointment can choose from any hospital or clinic that meets NHS standards. You can choose a hospital according to what matters most to you, whether it's location, waiting times, reputation, clinical performance, visiting policies, parking facilities or patients' comments. On July 5 2008, the NHS celebrates its 60th birthday. Local events take place across the country, and NHS staff and patients celebrate at Westminster Abbey and 10 Downing Street. HPV vaccination programme was launched a few months after the 60th anniversary of the NHS. The aim is to vaccinate girls aged 12 and 13 against the human papilloma virus (HPV) is launched to help prevent cervical cancer. A three-year catch-up campaign is also introduced, which will offer the HPV vaccine, also known as the cervical cancer jab, to girls who are 13 to 18 years old. The NHS Constitution is published on January 21 2009 and sets out people’s rights as an NHS patient. For the first time in the history of the NHS, the Constitution brings together details of what staff, patients and the public can expect from the NHS. It aims to ensure the NHS will always do what it was set up to do in 1948: provide high-quality healthcare that's free and for everyone. Also, the New Horizons programme was launched to improve adult mental health services in England followed by the launch of NHS Health Checks for adults in England between the ages of 40 and 74. Primary care trusts begin implementing the NHS Health Check programme in April 2009. It has the potential to prevent an average of 1, 600 heart attacks and strokes and save up to 650 lives each year. It could prevent over 4, 000 people a year from developing diabetes and detect at least 20, 000 cases of diabetes or kidney disease earlier, allowing people to manage their condition better and improving their quality of life.

## NHS Choices 2010

By the end of 2009, a five-year plan to reshape the NHS to meet the challenge of delivering high quality health care in a tough financial environment was developed. The report describes practical measures to meet the demands of an aging population and the increased prevalence of lifestyle diseases. The vision is for an NHS that is organised around patients whether at home, in a community setting or in hospitals. There will be a renewed focus on prevention with the ambition of delivering cost-effective high quality care across the service. http://www. nhs. uk/Tools/Documents/HistoryNHS. htmlWHOUNESCONGOs e. g. hospicesCharitiesG. PsPrivate hospitalsPrimary, secondary, tertiary healthcareSpecialistsFinancing healthcare in EnglandGovernmentGeneral taxationHealth insuranceIn healthcare, there are several barriers and obstacles that prevent people from accessing needed healthcare in the society. Migration is a natural phenomenon, England and the whole of the UK at large has experienced a new wave of migration in recent years. This is due to the fact that the European Union (EU) has expanded and people have immigrated into England to make a living; students come in to study and people come for different other reasons such as tourists, for greener pastures and so on. The barriers being created as a result of migration include cultural barriers and illiteracy, as well as language barriers. The UK which England is part of is the only country in the whole of Europe where English is spoken as a first language; hence some of the migrants from the EU countries and others from countries where English is not widely spoken face the problem of accessing basic healthcare. As a result of lack of interpreters, it is often difficult for them to give the required information to their local surgeries when they go for registration. Personally, I have experienced a long time appointment wait recently for a referral and this has prevented me from accessing healthcare as at when needed. For personal reasons, when some people fall ill, the fear of taking time off work, losing their jobs or working for fewer hours with less pay prevents them from visiting the G. P when the need arises and hence not having access to basic health care needs. Environmental barriers such as snow and extreme weather conditions also prevents people from going to G. Ps or prevents emergency rescue teams from reaching them on time. Black and Minority Ethnic (BME) Groups in England also suffer economic disadvantages hence an increased risks of ill health (The Independent, 1995). Another barrier is perception and lack of understanding of immigration laws on the part of the local surgeries staff, hence preventing people from registering with local G. Ps. Very recently, students studying in England are being refused registration with the G. P because their visas do not show any work hours, the surgeries claimed that it means the students are not contributing through general taxation towards healthcare and do not deserve to benefit from the services being offered by the NHS. Undocumented, irregular and illegal migrants for fear of being detected and arrested by law enforcement agents do not visit and access healthcare.