

Sociology and Health

SOCIOCULTURAL FACTORS RELATED TO HEALTH AND DISEASE

SOCIAL FACTORS

Markers that distinguish major differences between groups of people in a given society:

- Education
- Income and occupation
- Ethnicity and race
- Religion
- Political affiliation
- Geographic region
- Social inequalities.

There can be many cultures within a society

- Social inequalities span across cultures
- All humans share the need for:
 - Food
 - Clothing
 - Shelter
 - Nonviolence/social justice
 - Love
- Access to these factors impacts health.

How Social and Cultural Factors Relate to Health and Illness

 Social scientists designate a difference between disease and illness: Illness is the personal, social, and cultural influences on the experience of impairment, pathology, and disease. Disease is the physiological process of pathology. • The framework that focuses on illness is called the Sociocultural Model.

Case Example: Social and cultural determinants of health.

REPRODUCTIVE HEALTH IN NEPAL

- In Nepal, life expectancy of men eclipses that of women
- Leading causes of death for women are pre/post labor complications, hemorrhage, and infection
- Cultural factors, such as early marriage contribute to the problem, particularly in rural areas
- Social factors, such as education and literacy also influence health outcomes.

IMPACT OF URBANISATION ON HEALTH AND DISEASE

Urbanisation is process of global scale changing the social and environmental landscape on every continent. Urbanisation is

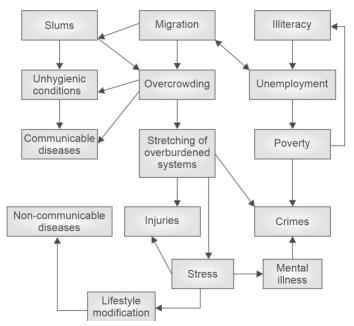


Fig. 3.1: Concept of urbanisation in terms of health and disease

a result of population migration from rural areas in addition to natural urban demographic growth. In 2007, the world's population living in towns and cities surpassed 50% for the first time in history and this proportion is growing. Rapid, unplanned and unsustainable patterns of urban development are making developing cities focal points for many emerging environment and health hazards. As urban populations grow, the quality of global and local ecosystems, and the urban environment, will play an increasingly vital role in public health with respect to issues ranging from solid waste disposal, provision of safe water and sanitation, and injury prevention, to the interface between urban poverty, environment and health.

Factors Affecting Includes—Air Pollution in Urbanised Areas

Air pollution is defined as any harmful substance being suspended in the air. This include particulate matter, most commonly from to industrial plants and refineries waste, or chemicals like CO_2 or methane. Due to a vast number of people in these urbanised cities, the air pollution is known to be very extreme. These conditions can lead to different health problems like—asthma, cardiovascular problems or disease, and different types of cancer.



Urbanised Diet

Another way that urbanisation affects the population's health is people's change in diet. For instance, urban cities tend to have lots of accessible, quick, and easy to get food. This food is also more than likely not as high quality as well as contains a large amount of sodium and sugar. Because this food is so accessible, people tend to eat it more. This increase in consumption of low quality food can then lead to diabetes, hypertension, heart disease, obesity, or many other health conditions.

Diabetes is one very common health condition that affects many peoples lives. It is a health condition in which the glucose (sugar) levels in one's blood is too high. Insulin is a hormone that assists glucose getting into cells. There are two types of diabetes. Type 1 diabetes is when your body cannot produce insulin and Type 2 diabetes is when your body does not use insulin effectively. Having ineffective or no insulin at all results in glucose staying in the blood. Increased levels of glucose in one's blood for a prolonged amount of time can lead to many other health risks. Some of these risks include damage to organ extremities, stroke, heart disease, and other complications as well.

There are many specific reasons on how urbanisation contributes to the development of diabetes among people. One of these reasons is lack of exercise. Countless studies have shown that exercise helps reduce many negative health impacts. The reason for exercise helping prevent diabetes is because when exercising, your heart rate increases and thus blood is circulated throughout the body more. This helps keep glucose levels in the blood on track. Because urbanisation consists of high density communities in a small area, people have less access to areas in which to exercise. Jobs in urban areas also contribute to the lack of exercise. Most jobs in these developing urban areas involve factory worker jobs and other jobs that tend to require the workers of not much movement. Urbanisation also gives access to a lot of cheap, quick, and easy food, given the high population high density area. This easy access to food causes many people to buy and eat it on a consistent basis. Cheap food specifically tends to have higher amounts of sugar than that of other food. These high amounts of sugar along with easy access to this food, people are more likely to develop diabetes. The lack of exercise combined with the high consumption of cheap foods is very detrimental towards one's health. Fortunately, more developed urban areas have reduced these issues by new ways of development and management of the urban landscape.

Urban Solutions

Some more modern urbanised areas have developed ways in combating health issues. One common example in which to do this are the developments of green spaces. Green spaces specifically contribute to giving areas in which people can exercise. Studies have shown that people living an indoor lifestyle have a higher risk of obesity and heart disease. This access to green spaces helps give residents of urban areas the ability to hinder this possible negative effect.

POVERTY AND HEALTH

During the second half of the 1980s, the number of people living in extreme poverty in the world has increased. Poverty has its destructive influence at every stage of human life from the moment of conception to the grave. Poverty is the main reason why babies are not vaccinated, clean water and sanitation are not provided, and curative drugs and other treatments are unavailable. It is the main cause of low life expectancy, low birth weight babies, high maternal mortality, handicap and disability, mental illness, stress, suicide, drug abuse, family disintegration, etc.

The health consequences of poverty are severe. The poor die younger and suffer more from disability. They are exposed to greater risk from unhealthy conditions at home and at work. Malnutrition and the legacy of past illness mean that they are more likely to fall ill and slower to recover, especially if they have little access to health care. When a family's head becomes ill, other members of the household may at first cope up by working harder and by reducing consumption, even of food. Both the adjustments can harm the health of the whole family. Investment to reduce health risk among the poor and provision of insurance against catastrophic health care costs as important elements in the strategy for reducing poverty. The relationship between poverty and poor health shows in Fig. 3.2.

According to 1999–2000 estimate about 260.3 million population of the country is living below the poverty line of which 193.2 million are living in the rural areas and 41.7 million in urban areas. Thus, poverty line is defined as expenditure required for a daily calorie intake of 2400 per person in rural areas and 2100 in urban

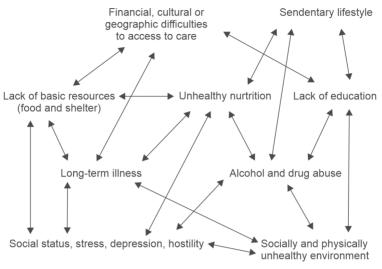


Fig. 3.2: Relationship between poverty and poor health

areas. This expenditure is estimated officially at ₹228.9 per capita per month in rural areas and ₹264.1 in urban areas at 1993–94 prices.

Poverty is associated with high prevalence with many health problems, such as increased risk of chronic diseases, poor infant development, stress and anxiety, injuries, depression, premature, etc.

People with no or low income are often exposed to greater personal and environmental health risks and less able to access health care leading to higher risk of illness and disability. Conversely, illness can reduce household savings, reduce productivity and ability to earn, and lead to a diminished quality of life. That might even increase poverty furthermore.

The poorest of the poor, around the world, have the worst health. Within countries, in general the lower an individual's socioeconomic position the worse their health.