

# Health and Society Exam Prep

## Nurses as change agents:

- Recognition of Social Determinants of Health (SDH) and the impact these have on patients
- Act as a change agent to promote health using health promotion strategies of health education such as:
  - **Social Advocate**: Developing cultural and socially appropriate strategies
  - **Political Advocate**: Understanding and negotiating policies, systems and resource allocation
  - **Professional Advocate**: Professional competence, skills and experience to affect change
- Health promotion, illness and injury prevention
- Infants, children and youth services
- Chronic and complex care management in the community
- Mental health, maternity and child & family health
- Aged care, rural and remote communities
- Aboriginal and Torres Strait Islander peoples
- Culturally and linguistically diverse communities, homeless peoples, school communities, asylum seekers and refugees
- Sexual health

**“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”**

## Primary Health Care

### *Primary care:*

- The first line of acute curative care takes place with an individual patient
- It is an episodic contact, occurs within a healthcare facility
- Is reactive
- Based on the medical model of health
- Treats illness
- Selective

### *Primary HEALTH Care:*

- Is proactive
- Set of strategies to protect and foster optimal health and well-being
- Aims to prevent ill health or restore optimal health
- Focuses on empowerment and increasing control over one's health
- Builds the capacity of communities to address and achieve their own health needs
- Has ongoing or enduring contact with populations

### *6 main principles of Primary Health Care*

1. Equity
2. Access
3. Participation of the community in decision that affect them
4. Building community capacity to address identified health problems (empowerment)

5. The considered use of technology appropriate to the community group
6. Collaboration between interconnected systems

## **Social Determinants of Health (SDH)**

### **1. Social Gradient**

- People further down the social ladder run at least twice the risk of serious illness
- Poor social and economic circumstances affect health throughout life
- Both material and psychosocial causes contribute to these differences
- The longer people live in stressful economic and social circumstances the greater physiological wear and tear they suffer

### **2. Stress**

- Stressful circumstances, making people feel worried anxious and unable to cope are damaging to health and may lead to premature death
- Social and physiological circumstances can cause long-term stress
- Continuing anxiety, insecurity low self-esteem, social isolation and lack of control over work and home life have powerful effects on health
- Long term both the cardiovascular and immune systems are affected
- Long term issues: infections, diabetes, high blood pressure, heart attack, stroke, depression and aggression

### **3. Early Life**

- A good start in life means supporting mothers and young children: the health impact of early development and education lasts a lifetime
- Foundations of adult health are laid in early childhood and before birth
- Slow growth and poor emotional support raise the lifetime risk of poor physical health and reduce physical, cognitive and emotional functioning in adulthood
- Poor circumstances during pregnancy can lead to less than optimal foetal development re: poor nutrition during pregnancy, maternal stress, greater likelihood of maternal smoking and misuse of drugs and alcohol, insufficient exercise and inadequate prenatal care
- Infant experience is important to later health because of continued malleability of biological systems
- As cognitive emotional and sensory inputs programme the brain's responses, insecure emotional attachment and poor stimulation can lead to reduced readiness for school, low education attainment and problem behaviour
- Slow and retarded physical growth in infancy is associated with reduced cardiovascular, respiratory, pancreatic and kidney development/function with an increased risk in adulthood
- These risks to the developing child are significantly greater among those in poor socioeconomic circumstances

### **4. Social exclusion**

- poverty, relative deprivation and social exclusion have a major impact on health and premature death
- the chances of living in poverty are loaded heavily against some social groups
- lack of basic necessities
- the unemployed, many ethnic minority groups, guest workers, disabled people, refugees and homeless people are usually socially excluded
- those living on the streets suffer the highest rates of premature death