

Introduction to the *'Demystifying Health'* paper

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Valuing Nature
Conference 2018. Cardiff



**VALUING
NATURE
PROGRAMME**



Introduction to the *'Demystifying Health'* paper

The purpose of the series is to bring together experts to explain the key concepts that might cause confusion in the wider Valuing Nature community, and agree on principles of good practice



Scope, aims, audience of *Demystifying Health* paper



- Addresses the many ways in which health is understood and how it is protected, promoted and improved.
- Briefly reviews how we assess and measure health.
- Focuses on the UK context.
- Written from a predominantly western, developed world view point.
- Targeted at the very wide variety of people and institutions whose activities and interests intersect with or may have some impact on health but who are not necessarily health professionals.

Why 'Health'?



Health is a basic element of life which is often taken for granted. We think little of it until it is threatened by injury or disease yet it is perhaps the most fundamental determinant of whether or not we can make the most of the opportunities available to us for a good life.

How we think about and define health, and the factors which determine our health, has far reaching consequences for us all.

Approaches to assessing and measuring health and health outcomes are inherently related to the ways in which it is understood and conceptualised.

What is 'Health'?



A 'state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity' ?

(WHO 1948)

Health as a complex adaptive system, relating to resilience and capacity to self-manage in the face of social, physical, environmental and emotional challenges.

Health is a dynamic state, one that is not fixed nor absolute, and one that is constantly responding to environmental, social, biological, emotional and cognitive conditions or states.

'Health' as...



- ...normality
- ...the absence of disease
- ...a balance, homeostasis, equilibrium
- ...fitness
- ...resilience
- ...a feeling
- ...wellness
- ...a contextual status
- ...function (being able to undertake the things you want or need to do, ability vs dis-ability)
- ...thriving or flourishing
- ...an occupation or practice
- ...stock or capital, a resource

‘Health’ is an ethical and political subject



- The ‘duty’ to try to live healthily.
- Metaphors of ‘fighting’ disease and illness, disease as evil.
- The cultural associations between poor health and moral weakness.
- Socially acceptable ill-health and socially unacceptable ill-health (e.g. physical vs mental health).
- Appropriate and timely uptake of health services (including avoiding over-use but not leaving it until it is too late).
- Outcries over the funding of treatments for ‘lifestyle’ related conditions such as obesity.

Determinants of 'Health'

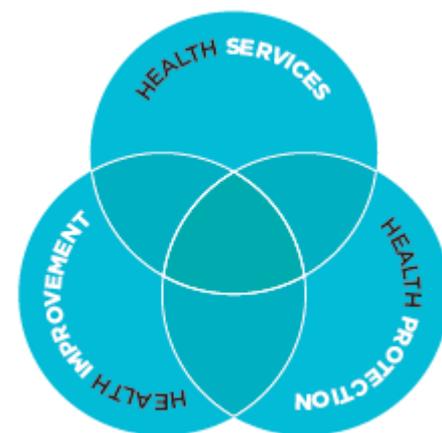
Figure adapted from:
Barton, H. & Grant, M.,
2006. *A health map for
the local human
habitat*. The Journal of
the Royal Society for
the Promotion of
Health 126, 252-253.



Promoting 'Health'



- Despite the UK enjoying some of the best health outcomes across the globe we still face significant challenges such as rising rates of NCDs and inequalities in health outcomes.
- Complex pathways with responses determined, in part, by our conceptualisation of what health is and informed by socio-cultural-political contexts.
- The vast majority (~95%) of the UK's health budget is devoted to medical treatment services, approximately just 4% of the UK health budget is spent on prevention.



Whose responsibility is 'Health'?



'...given our understanding of the social, economic, environmental and commercial determinants of health, it is critical that tackling NCDs is not seen solely as the responsibility of the health sector, but engages a coalition of sectors and partners, at national and local levels...this means that an effective strategy for NCDs requires concerted action...on the many underlying influences that drive them (such as housing, employment, transport, income and environment).'

Kevin Fenton, Senior Advisor at Public Health England

<https://publichealthmatters.blog.gov.uk/2014/02/27/tackling-the-epidemic-of-non-communicable-diseases/>

Assessing 'Health'



- Population morbidity and mortality, life expectancy, survival rates.
- Presence of disease or illness in the individual.
- Experience of symptoms and illness.
- Quality of life measures.
- Psychological and physiological functioning and ability to carry out normal activities.
- Physical fitness.
- Self-reported health status.
- Qualitative approaches to the lived experience of health or illness.
- Health behaviours (e.g. diet, smoking, physical activity).
- Risk factors (including genetic risk).
- Contact with and use of the health system.
- Health and care spend and other economic outcomes.

Assessing 'Health'



We need to recognise the importance of ensuring conceptual clarity;

'...our characterization of health ought to be consistent with basic consensus points about the nature of health, or else what we end up characterizing, though potentially both operationalized and measurable, may not be health in any ordinary sense: based on the intuitive understanding of health that most societies have...'

Chatterji, S., et al., *The conceptual basis for measuring and reporting on health*. Global Programme on Evidence for Health Policy Discussion Paper, 2002. 45.

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Kelly Watson
Jim Wharfe
Susan Williams
Edward Xie
Yangang Xing
Hsiaopu Yeh
Michael Zand
**And all those who took part
in the VNP conference 2017
session!**



Thank you to everybody who contributed to this paper!



Lovell, R (ed), 2018. *Demystifying Health, Valuing Nature Paper*
VNP02

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Health is not bought with a chemist's pills, nor saved by the surgeon's knife. Health is not only the absence of ills, but the fight for the fullness of life.

P. Hein, Prologue at the celebration of the 40th anniversary of the World Health Organization, 1988

