Socio-cultural Parameters: Contribution to the Maintenance of Optimum State of Health

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Abstract

The World Health Organization has defined health as a state of complete physical, mental and social wellbeing and not mere absence of disease or impairment. This essentially reflects that all the three determinants have a crucial role in the preservation of health or etiology of a disease. However, from a public health point of view, the program managers have realized that in order to implement any health promoting strategy successfully, it is of crucial importance to address the socio-cultural customs and beliefs prevalent in the members of the community. Currently, the strategy of social diagnosis is advocated so that based on the diagnosis, measures are implemented to keep an individual’s social environment free from harmful agents. To conclude, socio-cultural parameters have a crucial role in the health and disease, and thus the need of the hour is to address and supports the total social, emotional and educational needs of the young and the entire family.

Key Words: Health, socio-cultural, community, dietary habits, family

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The World Health Organization has defined health as a state of complete physical, mental and social wellbeing and not mere absence of disease or impairment [1]. This essentially reflects that all the three determinants have a crucial role in the preservation of health or etiology of a disease [1]. Over the years, it has been recognized that causation and spread of a disease does not depend entirely upon biological organism, but even on the socio-cultural parameters. Thus, the way in which people live, their habits, beliefs, values and customs are significant determinants of individual and collective health. In fact, the field of the behavioral sciences (viz. dealing with sociology, social psychology, cultural anthropology) has achieved new strides in order to allow better assessment about the social etiology of health problems [2,3].

Further, research across the world has revealed that all the individuals, irrespective of their habitation (viz. urban / rural areas or developed / developing nations), have their own beliefs and practices concerning health and disease [3]. It will be incorrect to make a generalized statement that all the socio-cultural beliefs and practices are bad, as some of them have shown a definite scope in having a positive impact on health [1,2]. However, from a public health point of view, the program managers have realized that in order to implement any health promoting strategy successfully, it is of crucial importance to address the socio-cultural customs and beliefs prevalent in the members of the community [4,5]. Never the less, information about these factors, i.e., customs, cultural mores, habits, beliefs and superstitions is still woefully lacking, especially in countries with different types of communities [1].

In relation to the health and disease, different socio-cultural factors have been isolated in the field of the etiology and cure of a disease; sanitation of the environment; food habits; and practices pertaining to maternal and child health care or personal hygiene or sex [1]. Currently, the strategy of social diagnosis is advocated so that based on the diagnosis, measures are implemented to keep an individual’s social environment free from harmful agents. This is performed by conducting socio-medical surveys and by assessing the domestic and social conditions of individuals [1]. Different measures such as provision of social security initiatives (viz. old age pension / life insurance / provident fund and health and medical facilities); equitable distribution of food and other basic amenities of life among all sections of society; encouragement for recreational activities; universality of education;
propagation of healthy customs and beliefs; and ensuring a safe workplace which does not interrupt the family networks; have been proposed to maintain a healthy and holistic social environment [2-4,6,7].

Furthermore, confirmatory evidences are available to reveal an association between socio-cultural factors and different outcomes such as choosing a specific contraceptive method [8]; prevalence of infectious disease [6,9]; management of depression; [7] emergence of lifestyle disorders [10,11]; impact on dietary habits [9,11,12]; access to health care services[4] social problems like dowry and suicide [13,14]; emergence of antimicrobial resistance; [15] and on the development of the local community [5].

To conclude, socio-cultural parameters have a crucial role in the health and disease, and thus the need of the hour is to address and supports the total social, emotional and educational needs of the young and the entire family.

References


