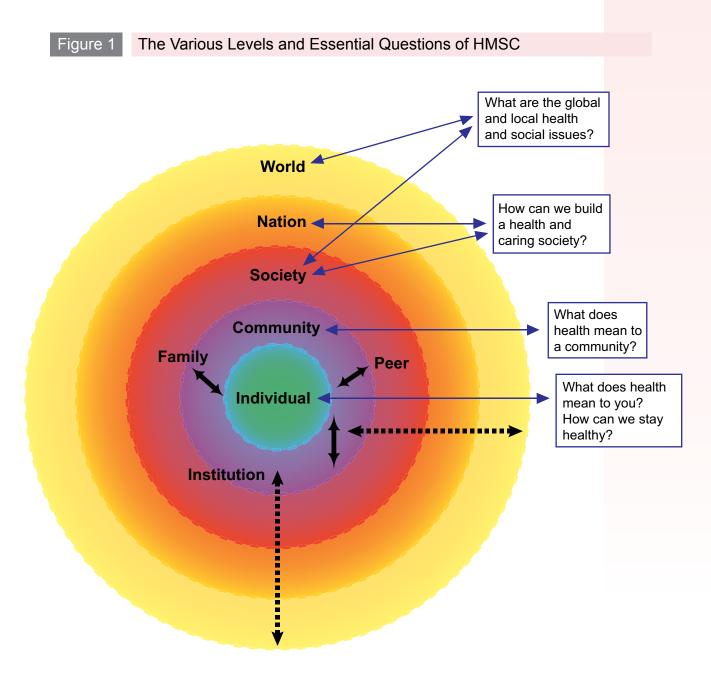
2 Health and Well-being

Health Management and Social Care (Secondary 4-6)

Health Management and Social Care Booklets

The design of the HMSC curriculum rests on the notion of the interconnectedness of the various levels at which phenomena related to health and sickness, well-being and ill-being, and personal and community care are to be understood. The curriculum aims to enable students to explore all of these levels as well as the relationships between them. The different levels can be interpreted as the individual, the family, the peer group, the community, the institutional setting, society, the nation and the world (Figure 1).



This part includes 19 booklets of learning and teaching reference materials for teachers. The topics and information in these booklets are selected and organized based on the five essential questions from various levels mentioned in the curriculum design in Chapter 2 of the Health Management and Social Care Curriculum and Assessment Guide (Secondary 4-6)(2007). The booklets facilitate teachers to develop an overall framework of HMSC and identify the key concepts of the curriculum so that their students will be more able to critically assess the relevant issues. Details are as follows:

Levels	Essential Questions	Booklets	
Individual, Family and	What does health mean to you?	1	Personal Needs and Development across Lifespan
Peer		2	Health and Well-being
	How can we stay healthy?	3	Physical Well-being - Healthy Body
		4	Mental Well-being - Healthy Mind
		5	Social Well-being - Inter-personal Relationship
Community	What does health mean to a community?	6	Healthy Community
		7	Caring Community
		8	Ecology and Health
		9	Building a Healthy City
Society	How can we build a healthy and caring society?	10	Health Care System
		11	Social Welfare System
		12	Medical and Social Care Professions
		13	Health and Social Care policies
		14	Social Care in Action
Local and Global	What are the local and global health and social issues?	15A	Health and Social Care Issue - Ageing Population
Societies		15B	Health and Social Care Issue - Discrimination
		15C	Health and Social Care Issue - Domestic Violence
		15D	Health and Social Care Issue - Addiction
		15E	Health and Social Care Issue - Poverty

Each booklet will start with the essential questions. The expected learning outcomes in terms of knowledge, skills, value and attitude as well as the content outline will be listed as an overview. Teachers are advised to adapt and flexibly use the materials based on school or community situation, background of students, interest, learning skills and the prior knowledge of students. Social issues as well as the graphic organizers that illustrated in Booklet 3.1.5 can be used to help student organize and analyze complex and abstract concepts, construct their knowledge effectively and achieve deep understanding.

What does health mean to you?

What does health mean to you? The answer is different to everyone. The meaning of health from the medical perspective may be different from those of the social scientists, psychologists, teachers, environmentalists, priests, writers, housewives, construction workers and students. Similarly, the health concept of the Chinese may be different from those of other ethnicities, nations and cultures.

Teachers may help students understand their personal needs and development through Booklet 1 – Personal needs and development across lifespan. They could facilitate students to explore the concepts of health and its importance from different perspectives and dimensions. In Booklet 2 – Health and Well-being, students can investigate what factors influence their own health so as to take on personal responsibilities in cultivating the conditions for personal development of oneself and others.

The topics of Health Management and Social Care Curriculum and Assessment Guide included in the Booklet 1 and 2 are listed in the following table:

Booklet		Topics in HMSC Curriculum and Assessment Guide	
1	Personal needs and development across lifespan	Compulsory part 1B: Factors which influence personal development 1C: Transitions and changes in the course of the lifespan	
2	Health and well-being	 <u>Compulsory part</u> 1A: Biological, social, psychological, spiritual, ecological and cultural perspectives and dimensions 1D: Factors affecting our health/illness experiences and personal and social well-being 1E: The need for and the role of social care in the community and the private sphere across the lifespan 	

2. Health and Well-being

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Learning Targets

Through the study of the topic on health and well-being, students are expected to:

Values and attitudes

- Pay attention to personal health
- Be a supportive citizen in the community

Knowledge

- Understand the holistic concept of health
- Explain how health can be examined by biological, psychological, social, spiritual, ecological and cultural perspectives
- Recognize the factors that influence personal and social health
- Analyze the interrelationship between different aspects of health as well as factors that affect health and well-being
- Understand the determining factors that influence health and gain a better understanding of this issue
- Analyze the impacts of technology advancement on health and social care
- Understand the importance of social care to personal and social well-being
- Recognize the role of formal and informal caregivers

Skills

- Use relevant intervention method and solve the problem
- Investigate the necessary intervention method to reduce the influence of risk factors

Key Questions

To achieve the above learning targets, teachers may use the following questions to enhance understanding:

- What is health?
- What are the factors that enhance health?
- What are the risk factors that influence health?
- How does social care promote health?

2.1 The Holistic Concept of Health

The concepts of health are continually evolving. Having health or feeling healthy means differently to different people at different times. Up to now, there are several definitions of health, involving various dimensions. The World Health Organization's (WHO) definition does include the valuable implication of health as a holistic concept in which each dimension is interdependent of the others. Perhaps it is best to start with this popular definition, towards which people can strive.

(A) Definition of health

The WHO constitution (1947) defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. In other words, health comprises a complete state of physical functioning, as well as mental and social life.

Human beings are not living in isolation. Each individual has his/her own social responsibilities and roles. In booklet (1) Introduction of Personal Needs and Development across Lifespan, it emphasizes that personal growth is influenced by different socializing agents such as family, school and peers. (Please see 1.5 of Booklet (1) for further information)

In 1984, WHO further elaborated the definition of health, stating that health is the extent to which an individual or a group is able to realize aspirations and satisfy needs, and to change or cope with the environment. Health is a resource for everyday life, not the objective of living. It is a positive concept, emphasizing social and personal resources as well as physical capabilities (Health Promotion: A Discussion Document, Copenhagen: WHO 1984).

Health is not an objective but a resource, exerting one's potential, fulfilling his/her own and social responsibilities. A healthy person is able to perform personally valued roles in family, work and community, and, has the ability to deal with physical, biological, psychological and social stress, a feeling of well-being, and freedom from the risk of disease and untimely death. Broadly speaking, health is a state of equilibrium between humans and the physical, biological and social environment, compatible with full functional activity.

The above definitions show that health is:

- more than 'free from disease' and 'physically strong'
- a holistic concept
- related to the ability to cope and adapt to the changes in our lives
- 'an equilibrium' and 'compatibility', exerting one's potential

(B) What is well-being?

Well-being can be understood as a positive state of physical, intellectual, emotional and social health. It describes a feeling of being physically well and of psychological contentment.

The concept of well-being is closely related to quality of life. It is concerned with the material, biological, psychological, social and cultural needs and demands of an individual, which are necessary for his/her satisfaction in life.

Everyone has his/her own interpretation of health, depending on age, gender, socioeconomic status, cultural background, religion and belief. For example, some people believe that being in good physical condition equals well-being; some may interpret health as - 'when my rheumatism doesn't give me trouble'; and some believe that even if they are disabled or ill, if they can manage to maintain a positive mental state, this is also an indicator of health. Thus, well-being incorporates not only how people function in relation to their fitness and ability to communicate, but also how people feel, such as their ability to experience pleasure, enjoyment and satisfaction.

Well-being can be further understood not only as personal well-being but also as social well-being. Social well-being includes indicators such as the crime rate in the community, education levels, employment levels and training opportunities. The holistic view of health and well-being incorporates a wide range of dynamic approaches to plan for a better quality of life at both personal and social levels. It can involve empowerment of individuals, community engagement and social determinants of health.

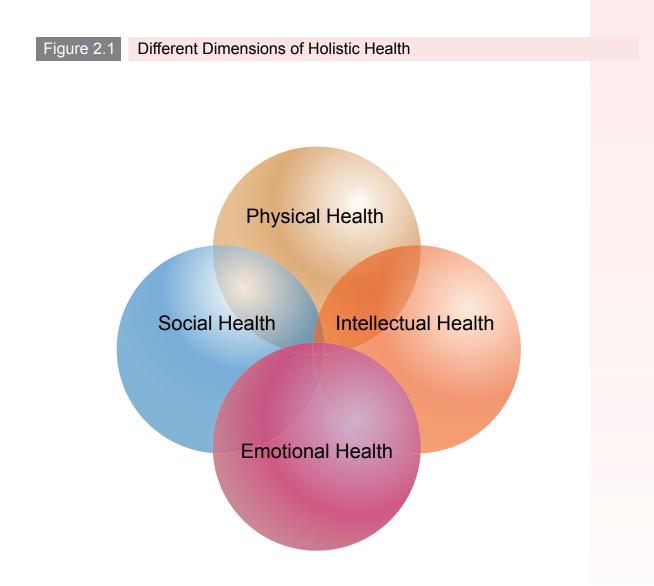
(C) Dimensions and holistic concepts of health

The holistic concept of health is concerned with the whole person development, rather than only the physical aspect. The four dimensions of health include physical, intellectual, emotional and social aspects.

A healthy person should have:

- Physical health: This aspect is related to the physical functioning of the human body. This is the most easily measured aspect.
- Intellectual health: This aspect is concerned with the ability to memorize, reason, analyze and make rational decisions. Intellectual health also influences one's mental state.

- Emotional health: This aspect is concerned with the ability to recognize and express emotions properly, including joy, anger, grief, fear and frustration. This also includes the ability to cope with stress, worries and depression in daily life.
- Social health: This aspect is concerned with the ability to establish and maintain good relationships with others. A socially healthy individual is characterized by the concern for others, the ability to show respect, a sense of belonging within a larger social unit and the ability to communicate effectively.



The above figure shows that the four dimensions are not separate, but interrelated to each other, and none of them is isolated. The following are examples of the interrelationships:

- Disabilities (physical health) affect one's social life (social health).
- A patient with a joint problem who suffers from pain (physical health) may be in a depressed mood (emotional health).
- A person who is suffering from depression (emotional health) may avoid interaction with people (social health).
- A person who is experiencing failure, may be able to relate to the problems positively (intellectual health) if he/she has good interpersonal relationships (social health) in which his/her friends are able to provide support and solve problems together.

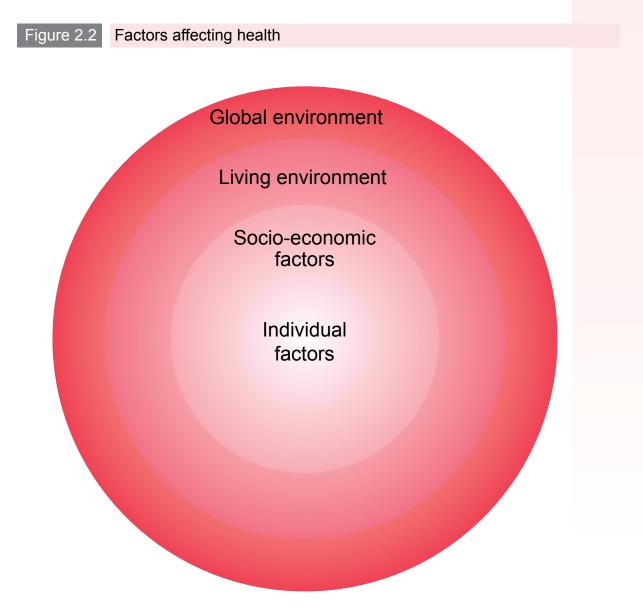
When an individual is in a good condition of health, all dimensions function in an integrated and coordinated way. These dimensions are all interrelated. Overemphasizing one dimension may be done at the expense of the others. The interactions of all the dimensions contribute to the richness of a person's life.

2.2 Factors Affecting Health and Well-being

How do we achieve a state of holistic health? To answer this question, we should understand the factors influencing the health of a person and community in the first place.

The determinants of one's health not only include his/her characteristics and behaviour but also his/her situation and surroundings. The state of health is influenced by a person's living environment, genes, level of income, education and interpersonal relationships (peers and family). These can be seen from several perspectives including: nutrition, lifestyle, socio-biological and psychological factors, demographics, social factors, economic factors, ecology, living environment, globalization and technological advancement. Similarly, all the above-mentioned factors are interrelated.

We may categorize the above-mentioned factors into four levels:



(A) Individual factors

Individual factors include:

- Nutritional factors
- Lifestyle
- Socio-biological and psycho-biological factors

1. Nutritional factors

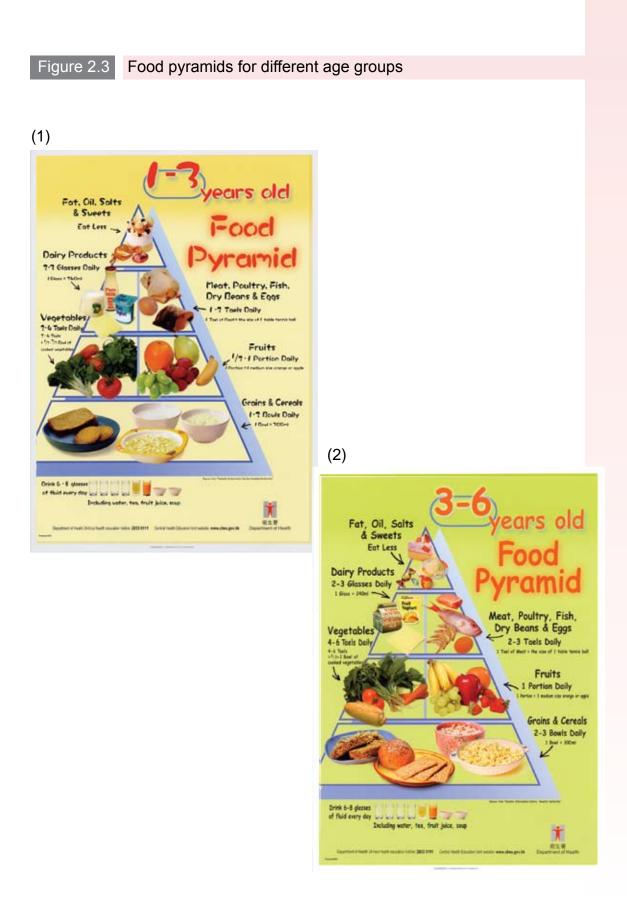
A balanced diet is composed of an adequate amount of a variety of foods, which provide us with the energy and nutrition to support optimal growth and development, sustain body functions and maintain cells and tissues. Nutrients are classified as carbohydrates, fats, proteins, vitamins and minerals. Malnutrition, or an imbalance of nutrients means either inadequacies or excesses in food intake. Malnutrition affects one's health. An imbalance of nutrients is one of the major causes of cancers.

Malnutrition refers to a deficiency in basic nutrients such as proteins or vitamins. There are many causes of malnutrition, and the majority of these relate to inappropriate dieting, imbalanced diet and the contracting of diseases. Malnutrition is serious in poor countries. It also relates to poor living standard, negative environmental factors and lack of daily necessities (e.g. food, housing and medical services). Although malnutrition seldom leads to death, it increases morbidity rate and mortality rate. Illnesses caused by deficiency in vitamins such as scorbutus, beriberi, rickets, keratomalacia, pellagra and other diseases caused by lack of minerals are common in developing countries.

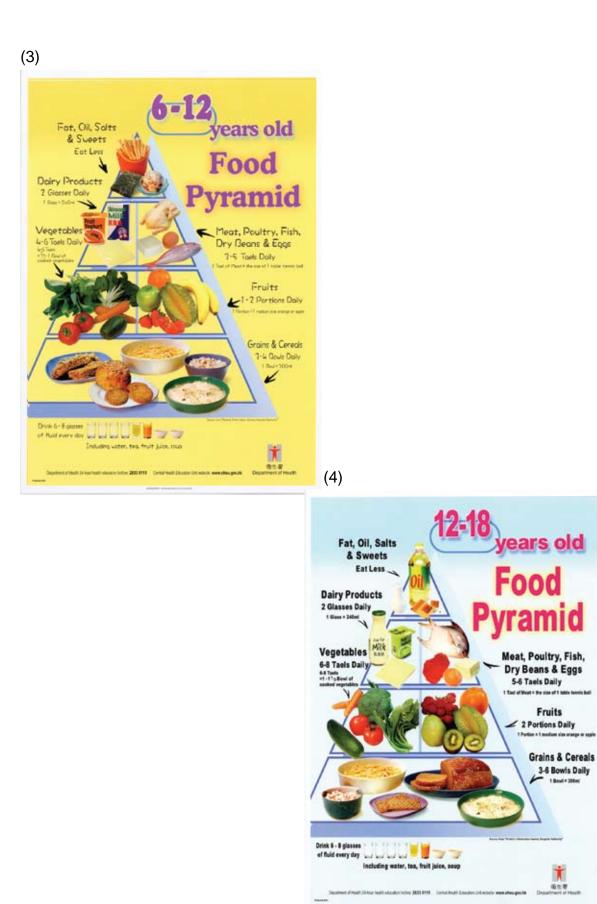
However, malnutrition related illnesses are not only found in developing countries. Another kind of malnutrition – obesity and overweight are increasingly common in developed countries. Such problems are prone to non-infectious diseases such as cardiovascular diseases, coronary heart disease, diabetes mellitus and cancers. For example:

- Low fiber intake in Western diet increases the risk of colon cancer.
- Low fruit and vegetable consumption increases the rate of stroke, heart diseases and certain cancers particularly lung and stomach cancer.
- Increased total, saturated and polyunsaturated fat, carbohydrate and sugar consumption have higher risks of obesity, heart disease, stroke and other cardiovascular diseases.
- Deficiencies in micronutrients such as iron, vitamin A, zinc and iodine also have an impact on deficiency syndromes. According to the WHO in 1995, 500,000 children were blind due to vitamin A deficiency.

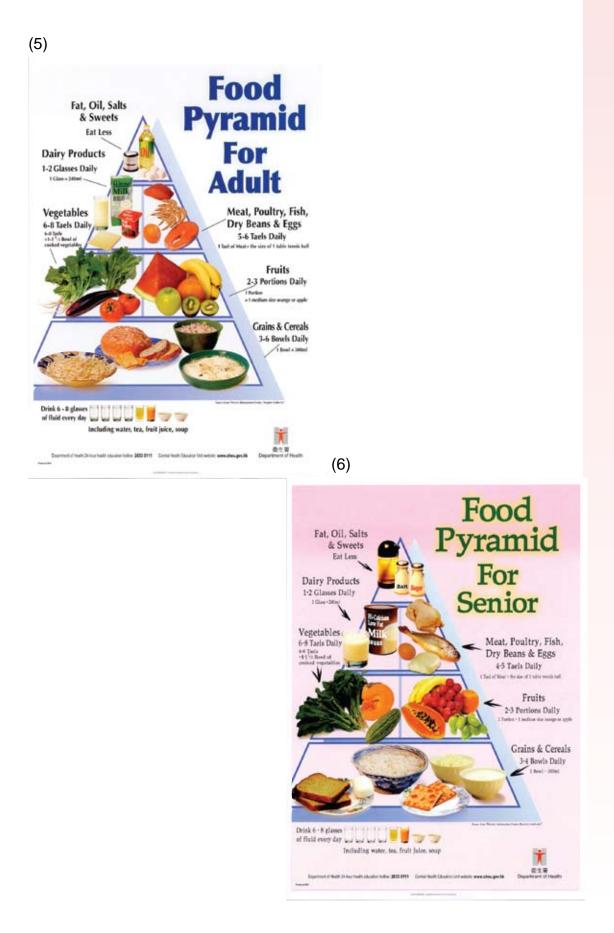
Hence, we should adopt a balanced diet and develop healthy eating habits. In order to achieve this, we should eat regularly following the food pyramid (see figure 2.3) and preferably have smaller portions in diets.



(Source: Department of Health)



(Source: Department of Health)



(Source: Department of Health)

2. Lifestyle: leisure activities and exercise

The pattern of epidemic diseases has changed due to technological advances in medicine and increased concern about public health. The main killers in developed countries in the past century were infectious diseases such as poliomyelitis, smallpox, influenza and tuberculosis. However, it has now swung to the other side of the pendulum. The main killers now are cardiovascular diseases, diabetes mellitus, cancers and stroke, which are caused by unhealthy lifestyles and the lack of exercise.

Over the past few decades, owing to industrialisation and technological advancement, there is an increasing proportion of the population working in service, clerical and other professional occupations which demand considerably less energy consumption, compared to the manual work in traditional societies. People also enjoy more leisure time with changes in the socio-economic structure. However, their leisure time is commonly taken up with inactive activities such as watching television and surfing the Internet. The decline in energy consumption is also associated with a more sedentary lifestyle in which motorized transport, mechanized equipment, and labour-saving devices have freed people from physically arduous tasks both at home and at work. Undoubtedly, this sedentary lifestyle will lead to overweight and obesity that will eventually increase the morbidity rate.

Regular exercise contributes to overall health and well-being. Specific benefits include the burning of calories, reduction in body fat, improved cardiovascular status, lowered blood pressure, and a decrease in the risk of diabetes mellitus, osteoporosis and certain forms of cancers. Physical activities can generate psychological benefits as well. Exercise can serve as a method to reduce or relieve stress. Repeated exercise increases one's capacity to deal with stress and handle difficult situations. Strenuous exercise can take a person over the threshold that activates endorphin production. It generates a morphine like substance in the brain. The term 'endorphin rush' is commonly used to describe the feeling of exhilaration and a sense of well-being that is experienced when endorphins are produced by the body. Endorphins can help humans relax, control excessive emotions and relieve stress.

Leisure activities can also generate similar psychological benefits. People have an inbuilt desire for playing, and will seek recreational experiences which give them feelings of pleasure. Sociologists believe that an individual can derive a positive mental state through participating in leisure activities (e.g. family trip or cycling). It is also found that people who are interested in leisure activities and have personal hobbies find it easier to maintain a state of holistic health and avoid physical and mental burnout.

More information about physical activities and health will be provided in Booklets (3) and (4).

Figure 2.4 Physical activities promote physical and mental health



3. Socio-biological and psycho-biological factors

Social interaction and interpersonal relationships influence one's personal growth during childhood. In addition to the emotional and motivational effects, they have an influence on the neuro-endocrine and hormonal system as well as the immune system. Healthy relationships are beneficial to sustaining body functioning and resistance to illness. These social and biological factors are called socio-biological factors.

The health of children is affected by many socio-biological factors. Some of these factors are parent-child relationships and teacher-student relationships. They all directly affect the children's health status. For example, toilet training before 18 months may be beyond the child's ability, and it can induce tension and stress in the child that leads to negative feelings and may result in the child's avoidance in going to the toilet, and lead to bed wetting. If parents over/under estimate the ability, responses and feelings of their children during their development, this may create a negative impact on the coping ability, self-esteem, self-confidence, self-concepts and interpersonal relationships of their children. Not only does it affect their mental health, but also their physical health.

Some scholars believe that the mind, the soul and the body of a human being are inseparable. They have proposed that there is a mind-body connection in our inner-self. This affects the mental health and the factors are called psychobiological factors. Our biological and psychological reactions (e.g. sweating and stomach-ache) to stressful events provide clear indications of the relationship between the mind and body. Negative stressors have impacts on the nervous system, endocrine system and immune system. These increase the risk of cancers, arthritis, infection, allergies and other diseases that relate to the immune system. In addition, stress produces several cardiovascular changes that relate to the development of coronary heart disease. People who are under stress have a high concentration of activated platelets and unfavourable levels of lipids like cholesterol. The increase of cholesterol levels and activated platelet concentrations promote atherosclerosis on the arterial walls. The growth of fatty patches called plaques narrow and harden the arteries, causing an increase in blood pressure and the chance of a heart attack or stroke. Moreover, short-term stress also has an impact on the immune system. It increases the risk of infectious diseases. Stress is one of the major psycho-biological factors. Further information related to stress will be provided in Booklet (4).

Individuals have various internal psychological and social resources to reduce health risk. Psychological resources involve thoughts and perceptions, personal characteristics such as the sense of control, optimism, self-efficacy, and coping styles. Resources from the supporting network (e.g. family and peers) can serve as a buffer in stressors which adversely affect the immune system. However, with limited resources from the supporting network, an individual may experience poorer immune functions. Resources from supporting network may be classified as:

- Social support tangible support such as direct material assistance
- Emotional support encouragement, reassurance, comfort and caring
- Esteem support building self-worth, value and competence
- Information support advice, guidance and direction

(B) Socio-economic environment

Socio-economic environment includes:

- Demographic factors
- Social and economic factors

1. Demographic factors

Age

The state of health and needs of an individual differ among different age groups. For example, children and the elderly are prone to higher potential health risks. Children whose immune systems have not yet fully developed and the elderly who are chronically ill are prone to infectious diseases. In addition, school-aged children are prone to injuries and accidents due to their exploratory behaviour and lack of knowledge of safety. Also, the physiological changes and physical decline in old age may cause different health problems such as cardiovascular diseases, stroke, cancers and arthritis. Moreover, physical decline and disabilities increase their dependency on others.

Gender

There is a broad gender difference in health and disease patterns. According to the Department of Health¹(2008), the life expectancy of females in 2008 was 85.5 whereas for males it was 79.4. Males have a greater mortality rate due to injuries and poisonings² than females caused by a greater chance of exposure to dangerous occupations. When females reach menopause, the decline in the secretion of oestrogen will lead to the development of osteoporosis. However, as males are generally stronger with the secretion of testosterone, their risk of having osteoporosis is relatively low. Heart diseases are other common diseases with a large gender difference, with higher rates occurring in males, especially from age 15-64. In Hong Kong, there were a total of 530 cases in males and 178 cases in females who died of heart diseases within this age group in 2006³ (Centre for Health Protection, Department of Health, Hong Kong, 2006). The gender differences relating to heart attacks may be due to several risk factors and protective factors for heart diseases. For example, males may tend to indulge in smoking and drinking more, and consume less vegetables and fruits compared to females. It is not surprising that the health and disease patterns are different among the two genders when their biological factors and lifestyles are taken into account.

¹ Department of Health: 2008 population and vital statistics (www.dh.gov.hk)

² HealthyHK of the Department of Health: www.healthyhk.gov.hk

³ Centre for Health Protection: www.chp.gov.hk

Race and ethnicity

Race and ethnicity are also recognized as a factor affecting health. The definition of race is a distinct type of culture or groups of people, sharing distinct racial characteristics such as biological features like skin colour or hair colour. However, the word 'ethnicity' is more commonly used today. Ethnicity often refers to the common characteristics of the culture rather than biological characteristics. From the point of view of social science, ethnicity refers to a social construct that shares the same cultural tradition and origin. People can have different physical features but share the same language or religion.



In the past, theories stated that racial and ethnic disparities in diseases are rooted in genetic differences between races. For example, scientists believed that sickle cell anemia was a disease affecting a particular race (sickling occurs because of a mutation in the haemoglobin gene in American and West-Africans). Later on, some scientists found that racial and ethnic groups did not represent distinct gene pools, so the genetic explanation for health inequalities has been weakly accepted.

In fact, social factors and health are more closely related. For example, the percentage of people suffering from obesity outside the western countries is increasing. Although more than half of the adult population aged between 35 and 65 in Europe are either overweight or obese, obesity is also prevalent in many Asian populations nowadays. In the past, research and nutritional policy focussed on the problems associated with under-nutrition. Most of the Asian countries such as Japan, India, Singapore, Malaysia, and China are now beginning to experience high loads of overweight and obesity. Moreover, it is important to note that obesity is not limited to industrialized countries as the obese population is also growing in developing countries. In urban India, the number of overweight adults is increasing and becoming a serious problem, especially among the upper class population. The situation is similar in urban Thailand. This indicates that diet and economic growth seem to be the social determinants of the prevalence of obesity.

Another example is Nasopharyngeal Carcinoma. It is a common cancer in Hong Kong. The incidence rate of Nasopharyngeal Carcinoma among Chinese is the highest in the world. It is vastly more common in certain regions of Southern China and Hong Kong. However, it is now accepted that dietary risk factors such as the consumption of salt-cured fish and preserved vegetables are closely associated with the disease rather than genetic factors. In addition, animal experiments showed some evidence that salt-cured fish induces Nasopharyngeal Carcinoma.

2. Social and economic factors

Social and economic factors include social status, education, employment, living environment, economic condition, and accessibility to services.

Income

Income and health status are closely related. To a certain extent, income can be used as a predictor of ill-health behavior and the utilisation of health services.

For example, as income increases, the affluent are more able to pay for better health services and able to ameliorate health problems. Thus, the risk of ill-health decreases. On the other hand, with more income, people may indulge in high calorie, high fat, high protein and low dietary fiber diets and may eventually be prone to obesity.

People from low-income class may not be able to choose healthy food due to their limited income. The prevalence of eating cheap, tasty and high calorie foods is common among the poor and people from the grass-roots level. Conversely, the price of some healthy food (such as organic plants) is relatively high, so that they are only consumed by middle-class or others who are able to afford more.

Income is related not only to the level but also the types of service utilisation and the circumstances under which they are received. The economic conditions also determine the preventive services and lifestyle factors such as good nutrition for illness prevention.

Income is also closely related to mental state. People from low-income class usually have adverse experiences early in life which may influence their coping style with stress. The Samaritan Befrienders of Hong Kong found out that during the financial tsunami in 2008, blue-collar workers and housewives from low-income class were more prone to suicide. Hence, people from the low-income class find it more stressful during times of unemployment and lay offs.

Unemployment is the main social factor in a range of mental health problems. It causes anxiety, depression, dissatisfaction with one's present life, longterm strain, low self-esteem, hopelessness regarding the future and other negative emotions. Moreover, the economic difficulties that are brought about by unemployment also affect health, as this may be associated with some forms of health-damaging behavior due to unbalanced budgets that create a sense of hopelessness. They may indulge in smoking, heavy drinking, illegal drug taking and gambling. Similarly, unemployed people are more prone to suicide, as unemployment may be associated with other negative events since these people cannot access psychosocial resources at that critical moment. The long-term effects of unemployment can be very serious. It may lead to loss of home and divorce.

Education

Education plays an important role in promoting healthy lifestyles, managing stress, cultivating interpersonal relationships, preventing accidents and developing a caring environment. These are the key factors affecting the health and well-being of people and the community.

Education has a powerful effect on people's understanding towards health as well as their ability to utilize health services. Among low-income groups, people with higher education levels tend to use the public health and preventive services more frequently. Due to a limited understanding of the information provided, those with lower education levels may not be able to recognise the importance of disease prevention.

Education may also be associated with women having increased motivation and greater aspiration to improve their lives. Educated mothers may be more capable of surviving and seeking happiness for themselves and their families. The higher the education level of mothers, the lower the infant mortality rate brought about by improper care.

Work

Employment status relates closely to an individual's health and wellbeing. It can influence his/her chances of physical illness or symptoms of psychological distress, and also work-related accidents and injuries. Although unemployment is detrimental to health, employment does not guarantee one's physical and mental health. Dissatisfaction with working conditions can also result in depression and a high level of stress. Excessive workload can lead to burnout or fatigue which is also harmful to health. Fatigue, especially in dangerous types of jobs may result in errors and occupational injuries. The following are examples of stressful working conditions:

Dimension	Stressors
Organisation and management of work	 Imbalanced workload: excessive workload but limited time; small workload creates uncertainty among employees, resulting in the lack of sense of security. Long working hours: employees do not have enough rest. Unstable working hours: employees often work overtime, or shift arrangements are frequently changing. Nature of work: heavy burden, any mistakes or faults in the working procedure will cause serious consequence and the employee has to bear the responsibility. Insufficient guidance and training: employees are not able to control the order and enhance efficiency, thus creating anxiety.
Working conditions	 Noise pollution. Poor air quality: for example, poor air circulation / temperature in the work place is too cold or too hot. Poor working conditions: such as messy and slippery workplaces, limited space and inadequate light create tension and discomfort. Mismatch between the design of the workplace and ergonomics: resulting in improper position which eventually creates tension and discomfort among employees.
Organisational climate and interpersonal relationships at work	 Disharmony between colleagues, including supervisors and subordinates: resulting in conflicts between parties. For service-oriented work pressure usually coming from target customers: conflicts may arise in case of unreasonable demand and complaints from customers.
Career prospects	 Failure to develop: no training to help personal potential and lack of promotion opportunity. Threats of layoffs and wage reductions: causing uncertainty towards career prospects. Poor term: low salary and not able to compensate for efforts.
Home-work interface	 Heavy workload and not able to take care of family. Lack of family support.

(C) Living environment

Air, water, food, climate and living space are all essential to human living. However, many environmental problems are caused by the exploitation of the natural environment by human beings. Human activities affect different ecological factors in the environment such as air, land, and quality of water. Pollution damages human health and creates a negative impact on the ecosystem, affecting animals, plants and humans alike. Noise pollution influences one's physical and mental health.



Ecological problem

According to the U.S. Environmental Protection Agency, the greatest ecological problems resulting from human activity can be categorized in three levels:

- 1. High-risk ecological problems
 - ♦ Global climate change
 - ♦ Ozone depletion
 - Wildlife habitat alteration and destruction
 - Species extinction and loss of bio-diversity
- 2. Medium-risk ecological problems
 - ♦ Acid deposition
 - ♦ Air-borne toxic chemicals
 - ♦ Inappropriate use of pesticides
 - ♦ Toxic chemicals, nutrients and sediments in surface water

3. Low-risk ecological problems

- Acid runoff to surface water
- ♦ Groundwater pollution
- ♦ Oil spills
- ♦ Radioactive isotope
- ♦ Thermal pollution

Global environmental changes have affected human health. Changes include climatic change, ozone depletion, loss of biodiversity, changes in hydrological systems and the supply of freshwater, land degradation and stresses on food–producing systems. For example, people are exposed to more ultraviolet radiation because of ozone depletion. The risk of eye damage and skin cancer is greater with excessive exposure to the sun.

The following are examples of how environmental factors affect physical, intellectual, emotional and social health. Further discussion on how the environment affects one's health will be provided in Booklet (8).

1. Water pollution

A lot of health problems relate to water pollution. The pathogens causing water-borne diseases can be divided into four categories: bacteria, protozoan, helminthes and viruses. These pathogens contaminate drinking water, and can cause human diseases. In densely populated areas in underdeveloped and developing countries, poor water quality and inadequate water supply for drinking and sanitation are also closely linked with outbreaks of cholera and endemic diarrhoeal disease. These diseases are still the No.1 killer in the world.

Similarly, many of the chemicals that enter our water supply are poisonous. Poisons are dangerous no matter in which part of the ecosystem. Examples of inorganic chemicals that can be found in the water supply are cadmium, lead, selenium, mercury, copper, chromium, zinc and arsenic. They come from insecticides and lead to a contamination of the food chain. Water sources and food are polluted by agricultural runoff; and industrial chemical substances can lead to certain types of cancer and food poisoning.

2. Air Pollution

Air pollution from industrial and domestic sources and motor transport emissions leads to respiratory diseases like asthma and bronchitis. People with heart or lung diseases also react more severely to polluted air. During times of heavy pollution, their condition may worsen to the extent that they must limit their activities or even seek additional medical care. Air pollution can lead to acute and chronic intoxication which exasperates various illnesses and even causes death. Fluorocarbon propellants from aerosol spray containers cannot decompose in the lower atmosphere. They may deplete the ozone layer and thus increase the levels of ultraviolet radiation on the earth and cause skin cancer.

3. Urban living environment

Levels of pollutants in urban areas are above the normal standard, leading to more respiratory diseases and allergies. Noise pollution results in damage to hearing. Moreover, noise also acts as a stressor by disturbing sleep at night and as strong annoyance during the day, and can impair the cardiovascular system as well as mental health in the long run. Examples of health effects include hypertension and migraine. On the other hand, overcrowded living conditions not only cause the transmission of diseases with epidemic potential such as acute respiratory infections, meningitis, typhus, cholera and scabies, but also impinge on individuals' freedom. Home environment is important to psychological and mental well-being by providing a place for attachment and identity as well as a last refuge in daily life. Meanwhile, poor neighbourhood relations may generate social pathologies, aggressiveness, depression, anxiety, somatic complaints and even paranoid feelings and ideas.

D. Global environment

Global environmental factors such as globalization and technological advancement influence one's health in the following ways:

1. Globalization

Globalization refers to the whole world becoming more like a single entity, relatively undivided by national borders or other types of boundaries such as cultural, economic and temporal. Living in this global village and technological society, we can observe these situations.

Modern communication and transportation technologies lead to efficient crossborder exchanges of people, goods and services, taking place at an increasingly faster rate. On one hand, with the rapid flow of global information, the health promotion strategies and health polices advocated by developed countries are more easily promoted and developed in the developing countries. Globalization reshapes the social geography which may be good to health promotion and disease prevention. Globalization facilitates health services in four ways:

- The movement of persons, for example medical personnel, to provide medical services
- The movement of persons as consumers, for instance, patients travelling abroad to access medical services
- The establishment of foreign medical organisations exemplified by the penetration of foreign markets with new forms of health services

introduced to the developing countries

Cross-border trades in health services, such as telemedicine to provide health services to poor countries and remote regions

On the other hand, with increasing velocity and density of human travel across borders, the risk of disease transmission between countries has been increased. Examples are the spread of various infectious diseases such as AIDS/HIV and influenza. Not surprisingly, different countries in the world share increasingly similar health problems.

Globalization provides gateways of information technology by which the information in the global market can easily reach the developing countries. However, it also provides a gateway for the promotion and marketing of harmful commodities, especially tobacco and alcohol, to the developing countries. It is well known that tobacco is a risk factor to some diseases such as chronic obstructive pulmonary disease, lung cancer, bronchus and trachea. Alcohol abuse resulting from global trade also predisposes people to negative health impacts globally. Alcohol drinking behaviour increases the chances of different kinds of illnesses and injuries such as stroke, hypertension, road traffic accidents and violence. Similarly, western-style fast food has also been promoted worldwide. Diets are changing; with the widespread increase in the amount of saturated fat consumed by people, whose intake was traditionally lower, illnesses like obesity, hypertension, heart disease and stroke are becoming prevalent.

2. Technological advancement

Advantages of technological advancement

Technological advancement benefits people's health. For example, the invention of refrigeration preserves food from deteriorating. It indirectly helps the prevention of diseases. Similarly, technological advancement has made the prevention and cure of diseases more successful which in turn prolongs life. The benefits include new vaccines for prevention of certain infections, new drugs to treat some forms of cancer, more sophisticated equipment and techniques such as pre-marriage check-ups, genetic screening and prenatal care which help to decrease the risk of low-birth weight babies and infant mortality rate, shorten hospitalisation after surgery, and provide early prevention and accurate detection of serious health problems by screening.

Technological advancement has made the screening process for HIV safer, faster and more accurate. It also protects the blood supply and epidemiologic information. Its theoretical strength in protecting the blood supply was quickly proven because the procedure was readily developed, inexpensive, broadly applicable, and accurate. In short it represented a superb screening test.

Another example is the application of Computerised Tomography (CT) scanning. CT scanning has replaced the less accurate procedures that were more costly and dangerous in the past. Before the invention of CT scanning, X-ray had been widely used by neurological surgeons. It only provided the structure of the skull. Surgeries also require an accurate diagnosis of neurological problems. CT scanning has been improved in use and it has become an adjunct to other diagnostic technologies and therapeutic technologies. The invention of CT scanning greatly reduces the cost and suffering of the patients.

Meanwhile, the technological advancement of computer information systems means the cost of management has been lowered, care improved and errors reduced. At the same time, it helps safeguard clients' privacy and confidentiality. For example, the Food and Health Bureau plans to develop an electronic platform, which allows patients' records to be circulated through public and private hospitals, clinics and X-ray laboratories in Hong Kong. It reduces the time and cost of repeating diagnosis.

The other side of technological advancement

Is technological advancement a blessing or a curse? The issue of technology has been debated for many years and tends to polarize opinions, particularly in the ethical arena. For example, in using cloning technology to reproduce the embryonic stem cells taken from embryos for scientific and medical experiment, is it beneficial to human development and the health of patients? Or could it be unethical and failing to respect life? Should we use the cloning of body parts to repair damaged bodies or provide fertility treatments that would lead to greater selectivity or designer babies? The debate on the issue of the appropriate use of technology versus ethics has raged on for many years and still remains unresolved. Nevertheless, the debate can promote human health as it not only arouses social awareness, but also helps achieve community empowerment in decision-making.

2.3 Different Perspectives of Health and Well-being

The above-mentioned analyses on factors influencing health are derived from different theories, which differ in the perspectives in analysing health and the factors affecting health. The perspectives of health are : (1) biological, (2) social, (3) psychological, (4) spiritual, (5) ecological and (6) cultural. Studying HMSC and reading related materials, we should understand different perspectives and examine the theories and assumptions from multiple perspectives.

Figure 2.5 Different perspectives in analysing health



(A) Biological perspective

Biological perspective refers to a wide range of different "within-person" factors that drive, mediate or moderate the pathways towards health or disease. It has dominated the way that society has conceptualized health and illness for the past century. Hence, biological perspective focuses on physical health. Its stress is on the body functioning which is revealed by the body size and shape, sensory acuity, susceptibility to disease and disorders, and recuperative ability of an individual.

Biological perspective emphasizes the importance of maturational factors in physical growth and development. Growth is a process, genetically influenced, which, under favorable environmental circumstances, is more or less automatic and sequentially invariant in its unfolding. Physical growth and development involves a variety of changes, for example, in general stature (weight and height), sexual organs (ovary and testis), skeletal, muscle, hormonal production and reproductive capabilities. Biological defects are associated with heredity and prenatal exposure.

Genetically inherited diseases

Disorders, diseases or dysfunction occur when there is a deficiency in the whole chromosome or in part of a chromosome. If there is a deficiency in the whole chromosome, or if more/fewer chromosomes than normal are produced in each cell, the embryo will be affected. Genetic disorders are inherited or passed on from one generation to another.

Example of genetically inherited disease (1) – Down syndrome

Down syndrome is a genetic condition caused by the presence of an extra chromosome; those with Down syndrome have 47 chromosomes instead of the usual 46. About one baby in every 1000 has Down syndrome and they are usually born below average weight and length and have distinguishing features such as the face appearing flattened. They often have large, sometimes protruding tongues in small mouths, their eyes slant and they have broad hands with short fingers. An increasing number of children with Down syndrome are now attending mainstream schools and are going on to gain employment and lead semi-independent lives as full members of the community.

Example of genetically inherited disease (2) – Color Blindness

Patients are divided into four categories, namely total color blindness, partial color blindness, total color deficiency and partial color deficiency. Total color blindness is rarely seen. Partial color blindness can be divided into red color blindness, green color blindness or blue-yellow color blindness. Patients with color deficiency can be subdivided into red-green color deficiency and blue-yellow color deficiency. Color blindness affects a significant number of people. In eastern part of the world, it occurs in about 7%-8% of males while only about 0.7%-0.8% of females.

Example of genetically inherited disease (3) – Rhesus factor and childbirth

Individuals either have, or do not have, the Rhesus factor (or Rh antigen) on the surface of their red blood cells. This is usually indicated by 'Rh positive' (does have the Rh antigen) or 'Rh negative' (does not have the antigen) suffix to the ABO blood type. It usually happens in the O+ type. It is important that Rh factors are included in ABO blood type. A mismatch in Rh+ and Rh- will lead to hemolysis. A person who is Rh+ can accept blood from people who is Rh- but not the other way round.

The rhesus factor can cause problems during pregnancy for about one in every 300 mothers. It can happen when the mother is rhesus negative and the father is rhesus positive. The baby may inherit the gene for rhesus positive blood from the father. This can place the mother at risk if some of the baby's blood seeps into hers. The mother and baby have to be carefully monitored. The danger period is usually at the birth of a second rhesus positive child, when antibodies produced by the mother to the rhesus positive blood of the first child leak into the circulation of the second child and causes damage.

Prenatal exposure delayed effects

If a pregnant woman is a heavy alcohol drinker, the baby will suffer from growth retardation, cleft lips or palate, and other physical anomalies. Cigarette smoking by pregnant mothers causes fetal problems as well. The effect of maternal smoking includes low birth weight of the baby. It is because nicotine may lead to the contraction of blood vessels of the umbilical cord and uterine wall; then less oxygen will be delivered to the fetus, leading to low birth weight. In addition, low birth weight is one of the major causes of death in infancy and it is usually associated with maternal smoking. The above-mentioned behaviours during pregnancy are eventually associated with different fetal problems. Hence, they are called prenatal exposure delayed effects.

(B) Psychological perspective

Psychological perspective of health refers to two dimensions: mental and emotional. Health encompasses self-concept, self-esteem, self-acceptance, self-control, and the ability to share one's own feelings. From the psychological perspective, one's health can be measured or analyzed by the level of anxiety, depression, happiness and satisfaction.

1. Emotional and mental health

A healthy person achieves mental and emotional health. Mental health encompasses the processes of understanding, analyzing, evaluation, curiosity, humor, alertness, creativity, logic, learning, and memorizing. Therefore, it includes the ability of rational decision-making and critical thinking. It also includes striving for continued personal growth, willingness to learn and effective use of new information for personal, family, and career development.

Emotional health is generally defined as the ability to feel and express the full range of human emotions, to love and be loved, to achieve a sense of fulfillment and purpose in life, and to develop psychological hardiness, that is, treating change as a challenge instead of a threat, and developing strong levels of personal commitment and coping skills. Emotionally healthy individuals generally have the ability to control stress and to express emotions appropriately and comfortably; to recognize and accept feelings, and not to be defeated by setbacks and failures. Surely, emotional health is considered a part of mental health because emotions can affect one's rational decision-making ability.

What are the factors affecting one's health? Health will be analyzed in the following two aspects:

The inner world

A healthy person achieves mental satisfaction. He/she has the inner resources required for meeting and adapting to challenges, including motivation, emotion and cognition. Health does not only focus on biological function and performance, but also the mental state. People are confronted by both anticipated and unanticipated events across their lifespan. When one encounters changes, one's inner self will prepare to adapt changes and battle against adversity. A person will be flexible enough to solve different problems, have positive thinking, be resilient and self-regulated when he/ she achieves a healthy mental state. Conversely, one will not be able to cope with stress if he/she always has negative thinking, which affects his/ her emotional and mental health.

Personality

Personality refers to the characteristics or traits of an individual that are consistent across different situations. A healthy person is optimistic and hardy. Hardiness consists of three components, namely control, commitment and challenge. These characteristics allow individuals to withstand the negative impacts brought by life events. Hence, hardy people evaluate stressful events as less stressful and threatening than others. Optimism is assumed to moderate the impact of stress on health and well-being. It has been assumed that the greater stress resistance of optimists is due to their coping strategies. In particular, optimists should be more likely to positively cope with problems whereas pessimists generally use denial and distancing as preferred ways of coping.

2. The effects of psychological elements on social development and growth

From the psychological perspective, mental and emotional health will eventually affect one's social life. The social development and growth depend on the fulfilment of basic psychological needs such as love, affection, acceptance, and a feeling of importance. They are essential to individuals in developing a sense of identity and self-esteem. Everyone needs love and affection. Sense of acceptance and importance are crucial to an individual. An individual's potential for successfully interacting with others, meeting individual needs for independence and self-expression, and resolving personal and social conflicts are clearly enhanced if those basic needs are satisfied. Then, an individual is able to pursue higher goals (the need for self-actualization) as suggested by Abraham Maslow - the Hierarchy of needs. (Please see 1.2 of Booklet(1) for further explanation.)

(C) Spiritual perspective

1. Religious beliefs

A priest would perceive that one's physical, emotional, intellectual and social health is influenced by the relationship between man and God. One will achieve holistic health if he/she establishes a good relationship with God. Hence, from the spiritual perspective of health, the religious belief is fundamental to health. Spiritual health is defined as a high level of faith, hope, and commitment in relation to a belief system. It provides a sense of meaning and purpose to existence in general, and that offers an ethical path to personal fulfillment, which includes connectedness with self, others, and a higher power or larger reality. That is, belief helps one identify the meaning of life, including the understanding of the ways to achieve holistic health.

2. Personal beliefs

Some people believe that personal beliefs are required for survival and the motivation to live. Although some people are afflicted with severe disabilities, they are still able to achieve a good condition of intellectual, emotional and social health because they have a clear direction in life. From the spiritual perspective, a healthy individual must have a well-defined worldview⁴ that explains reality for them and offers a coherent belief system. The worldview does not have to be a religious one, but it must nevertheless answer such basic existential guestions as "where do I come from," "why am I here," "what should be the meaning and fulfillment in my life" and "what will happen to me after I die". Generally, these questions are answered with the recognition of a higher power or larger reality. By answering these questions, the spiritual worldview provides a sense of meaning and purpose to existence in general, and further, offers a path for personal fulfillment (a dream, cause, or mission). With this worldview, a person will be able to maintain emotional and intellectual health when he/she encounters illness or other unexpected life events such as the sudden death of a beloved family member.

⁴ Worldview is a personal perception of the world. This stems from the unique experiences from the individual or the interpretation of their nation towards this world.

(D) Social perspective

From the social perspective, health can be achieved when everyone engages in production and actively participates in his/her community. A healthy individual will be able to function adequately as a member of the community. Hence, a healthy person is able to communicate with others effectively, maintain intimate relationships, respect and tolerate others. Furthermore, he/she is able to take care of himself or herself and love others. A sense of belonging will be developed towards his/her social group, community and society. He/she will contribute to family and social groups positively.

From the social perspective, health and the social environment cannot be separated. Social resources and support influence one's health. Social resources refer to income, socio-economic status, education and jobs. These conditions affect a person's ability to act as a free agent, and to engage with others and influence the society around him/ her. Social support refers to one's social network. Having a social support network and the degree to which an individual is integrated into society has been shown to have a significant impact on health. Being well supported enables someone to draw on a network for resources and encouragement. Conversely, an isolated individual is more likely to experience greater stress.

(E) Cultural perspective

From the cultural perspective, understanding of health and illness is part of the culture. A culture describes how a group of people experience, think, feel and behave. Hence, different cultures have different interpretations of health. There are wide variations in beliefs about the causes and treatment for illness.

For example, biomedical science focuses on biological factors and body functioning in diagnosis whereas traditional Chinese medicine believes that health is a balance of yin and yang. Yin refers to the material body and yang refers to the human activities. A healthy condition refers to the equilibrium of yin and yang. They are complementary opposites. Yin yang disharmony is the cause of disease and physiological disorders. Disharmony means that the proportions of yin and yang are unequal and unbalanced. When one aspect is deficient, the other is in excess. Moreover, from the view of traditional Chinese medicine, the flow of qi refers to the healthy immune system and the ability to recover whereas 'evils' refer to the factors that cause yin and yang disharmony. Hence, traditional Chinese medicine believes there are two major causes of illness: deficiency of normal qi or an excess of evils. The conflict between normal qi and getting rid of evils explains different varieties of illnesses. Hence, patients need to restore the disharmony between qi and evils and healthy people need to maintain the balance.

Different religious cultures encourage different eating habits. For example, the Seventh-Day Adventists believe that based on biblical principles, a person should eat

unpreserved foods, grains, vegetable protein, fruits and vegetables. Australian studies have found lower systolic and diastolic blood pressure and lower plasma cholesterol levels among the Seventh-Day Adventists compared to the general population. The studies also indicate that the Seventh-day Adventists have a lower incidence of circulatory diseases and cancers.

The expectation and the degree of tolerance towards interpersonal relationships are different among different cultures. These discrepancies directly affect interpersonal relationships. For example, the cultural differences in family life and gender roles in traditional Chinese and western culture may create conflicts between people. In traditional Chinese culture, men are expected to be the breadwinners. Men are able to enjoy their own social life without influencing their family life. Women are expected to be the carers to take care of the young and old; but their family life should not be disturbed by their social life. The cultural expectations on gender roles and behaviors influence interpersonal relationships and affect the understanding of one's social health.

(F) Ecological perspective

People with an environmental perspective of health believe that the environment is important to health. Health is determined by physical, chemical, biological and social factors in the environment. An ecosystem refers to a specific system that encompasses different living organisms and the environment. In this ecosystem, there is a balanced relationship between every living organism and the environment. Any species or substances outside that ecosystem invading the existing system will disrupt the balance. If it is seriously disrupted, the ecosystem will be permanently destroyed. Hence, the urban development of human beings has created pressure on the ecosystem, which eventually create disastrous consequences to human health.

Nowadays, people are using natural resources more intensively than the past. It creates a growing pressure on natural resources with disastrous consequences to human health, for example:

- Contamination of water compromises the already small fraction of fresh water that is actually available for human consumption.
- Contaminated land affects food safety and supply and overcrowded land degrades human living condition.
- Agricultural decline diminishes food supply, leading to famine, especially in developing countries.

Urbanisation creates various pollutions. These not only disturb the ecosystem, but also deteriorate human health. For example:

Water and food pollution induce poisoning, certain forms of cancer and growth retardation.

Air pollution causes the attack or recurrence of respiratory diseases such as asthma or chronic obstruction airway disease. Besides, pollutants in the air may fall to the earth in the form of acid rain, further damaging the soil, water and food. Furthermore, the release of human-made halocarbons into the atmosphere results in ozone depletion that increases the exposure to ultraviolet radiation, as a result, increasing the risk of skin cancer and cataracts as well as adversely affecting the human immune system.

Noise pollution not just causes deafness but also provokes emotional tension.

From the ecological perspective, personal health and the global ecosystem are closely related. The release and atmospheric accumulation of greenhouse gases (such as carbon dioxide, methane, chlorofluorocarbons, and ozone) cause global warming and extreme weather. The direct health effects of changing weather are most profound in the very young, the very old and chronic patients. All of them are placed at additional risk from cardiovascular and respiratory conditions exacerbated by heat stress. Climate change and global warming are directly associated with the spread of insect pests and infectious disease vectors and with reduced food production, and eventually affect everyone's health.

(A) Scope of health and well-being

Overall, the definition of health is more than absence of disease. If we take the holistic view of health, we are concerned for the whole person rather than merely the physical state of health. Health includes physical, intellectual, emotional and social aspects. It builds on some basic requirements such as adequate food, sanitary water, fresh air, income, shelter, safety and hope. These elements have long-term effects on health. They are also related to the social infrastructure and the physical environment. Thus, the factors affecting health and well-being can be summarized into four levels: individual, socio-economic environment, community environment and global environment. We focus on various factors affecting health, developing and promoting different strategies based on different perspectives. The understanding of the concept of health will be limited if we do not adopt multi-dimensions to understand the concept of health.



Do you know which perspectives do the following indicators of health belong to?

- Measuring Health as a negative variable—what are the indicators of health if health is absence of diseases or illnesses?
 - Mortality statistics figures measuring deaths in different groups of citizens (e.g. Infant mortality rate, Maternity mortality rate)
 - Morbidity statistics figures measuring illness and diseases (e.g. top disease entities causing the greatest health expenditures of the government)
- Measuring Health as a positive variable what are the indicators of health if healthy refers to a good condition of holistic concept of health?
 - Health status: a measure of vital statistics like height, weight, blood pressure and nutritional status
 - Health Behavior indicators: collecting data of the number of people smoking, drinking, using drugs, performing regular exercises, taking healthy diet, practicing safe sex, and proportion of women screened for cervical cancer or children immunized against specific diseases
 - Environmental indicators: measurements of air and water quality, housing type and density
 - Socio-economic indicators: measurements of wealth, improvement of health facilities and their accessibilities, people's health-related beliefs and attitude
 - Functional ability: people's self-report of physical activities like the ability to perform everyday activities and their fitness level
 - Psychological well-being: a measure of the degree of happiness, satisfaction, self-esteem, and freedom from anxiety and excessive stress
 - Social networks and social support: a measure of the social networking and perceived adequacy, and the ability of the person to function sufficiently as a member of the community
 - Quality of life: a measure of the four core domains in the quality of life including Psychological (e.g. depression, anxiety), Social (e.g. engagement in social and leisure activities), Occupational (e.g. ability to carry out paid and/or domestic work) and Physical (e.g. pain, sleep, mobility)

(B) Health and social care

The definition of health is evolving and is shaped by different factors. A number of WHO conferences concerning health promotion initiatives have been organised and the Ottawa Charter is a significant milestone.

The following are the major milestones and the international conferences regarding health promotion:

Year	International conferences and events
1977	WHO: set goals of 'Health for All'
1986	The first international conference on health promotion held in Canada and published the Ottawa Charter. The charter identified five action areas including developing personal skills, creating supportive environments, strengthening community actions, reorienting health services and building public policies.
1988	The second international conference on health promotion held in South Australia. The declaration set a new direction for health policy by emphasizing people's involvement, cooperation between sectors of society.
1991	The third international conference on health promotion held in Sweden and highlighted the concerns on the healthy environment in developing countries. The conference believed that the industrialised world had to pay the environmental and human debt that has accumulated through exploitation of the developing world.
1997	The fourth international conference on health promotion held in Indonesia and published Jakarta Declaration. The declaration re-affirmed the participating countries to draw upon the widest range of resources to tackle health determinants in the 21 st century.

Year	International conferences and events
2000	The fifth international conference on health promotion held in Mexico and it urged the participating countries:
	 to show how health promotion makes a difference to health and quality of life, especially for people living in adverse circumstances; to place health high on the development agenda of international, national and local agencies; to stimulate partnerships for health between different sectors and at all levels of society.
2005	The 'Bangkok Charter for Health Promotion in a Globalized World' has been adopted at the 6th Global Conference on Health Promotion. It identifies major challenges, actions and commitments needed to be addressed, including the increasing pressure on infectious diseases and chronic illnesses such as cardiovascular diseases, stroke, cancers and diabetes mellitus. On the other hand, the influence on health that is brought about by globalization have to be addressed and handled, for example, the epidemic of unfairness, rate of urbanisation and deterioration of the quality of environment.

From the policies addressed by the WHO, we can see that the world is striving for a broader scope, with participation of all and fair concept of holistic health. Health promotion does not only take in consideration of diseases prevention and health education, but also how health, social environmental and community policies create a supportive social care system.

Moreover, in building a caring society and formulating supporting systems, everyone should take on responsibility for the emerging health and social problems that are affecting not only our lives but also the society and the world. For example:

- an ageing population
- the spread of infectious diseases
- the increasing signs of deterioration in our environment
- the changes in the traditional forms of caring and supportive relationships and in intimate relationships, including the collapse of family networks and the erosion of the nuclear family
- the enormous increase in mobility and migration, and the ensuing sense of rootlessness, loss of stability and lack of permanence in relationships and networks.

A long time ago, the government would grant a decree, establish regulations and organise committees when handling medical and health issues. In the 18th century, western governments placed much emphasis on cleanliness, the building of hospitals and collection of information on diseases. Today, governments promote health by cooperating with international organisations and other countries. Apart from education, media and supportive measures that educate the public about healthy behaviors, the public should be encouraged to participate in health promotion policies, thus to develop one's ability and confidence in individual and community health.

Narrow view of health Holistic view of health Understanding Health refers to the absence Understanding health from multiple perspectives, including biological, of Health of diseases psychological, spiritual. social. ecological and cultural Concerns Individual risks of diseases Health for all; alleviating poverty to improve health; sustainable development Health Related to health and social care Cost-containment; disease Activities with policies and programmes for prevention, especially in high risk groups the whole population Consolidating the power of Health care stresses equity and Strategies solving health problems at different health professionals and levels including individuals, family, promoting technological societal, environmental and global solutions to health problems Community Community involvement Community empowerment and participation involvement are the essential is necessary only for compliance, not for decision components making and control

The following table lists the two directions for health and well-being:

1. Community bond

As members of a community, our lives are closely interlinked with the lives of others, some of whom live in close proximity to us; others who share common characteristics but do not inhabit our geographical space. We belong to different communities or social groups. We also hold membership in various population groups on the basis of gender, age, physical capacity or culture. In a healthy community, people establish different bonds with others, enabling exchange of ideas and help for one another. A tight social bond is beneficial to the well being of a person. Members of the same community are more willing to accommodate and help each other.

2. Breakdown of community bonds

The following are the factors leading to the breakdrown of community bonds:

Technological advancement

Technological advancement may break the community bond among human beings. Ironically, while technological advancement, such as the wide use of computers, invention of mobile phones and the Internet, is being used to enhance communication among people in different geographical locations, it can lead to the breakdown of communication among people in the family and the community. It is observed that some people are fond of using computers and the Internet; thus, reducing the chances to interact with family members, peers and others. Face-to face communication among family members is replaced by Internet communication; relationships in the family may gradually weaken as the bond begins to break.

Individualism

Individualism emphasizes the virtues of self-reliance and personal independence. Individualists place the interests of the individual above those of the social groups. It is totally different from the traditional Chinese ideology. In fact, social care in Hong Kong was characterized by the provision of informal care and services from kinship and clanship in 1950's to 1970's. These kinship and clanship networks were developed when a number of immigrants from Mainland China resided in Hong Kong in 1950's and 1960's. These networks developed strong bonds among their members. With the growth of individualism in society, which has been affected by western society, care and services are now mainly provided by the government and non-governmental institutions. The community bonds have been weakened and some are broken completely.

Working hours

Overtime working and irregular working hours is one of the barriers to the maintenance of community bonds. Based on the data from Quarterly Report on General Household Survey published by Census and Statistics Department in 2007, a quarter of the Hong Kong working population work more than 48 hours a week, being the fifth longest working hours in the world. The long working hours create barriers in establishing relationships, not only within the family, but also with other members of the community.

Policies

Similarly, housing planning and urban renewal policy will also affect community bonds. For examples, if public rental housing applicants are offered accommodation in a new community or tenants cannot be rehoused in the same district in the urban renewal plan, the existing community bond will be affected. If people concerned could not rebuild or maintain the original social network, the community bond will collapse.

3. Consequences of breakdown of community bonds

The breakdown of community bonds will result in a rise in crime and affect one's mental health. This breakdown causes negative consequences to individuals and society as a whole.

With the breakdown of community bonds, social relationships deteriorate. Misunderstandings between people cause frustration, stress, anger, conflict and even violence and social disorder. Besides, without any bonds and relationships in the community, people may become ignorant about their living community and the support available to them. For example, the family tragedies in Tin Shui Wai have raised concern about the social isolation faced by new immigrants. The victims of the tragedies shared the common characteristics of lack of community bonds and incapability in accessing social services available in the community. Their stories might have been different in 1950's and 1960's when they could have been able to seek help from their neighborhood, kinship or clanship networks.

The breaking of community bonds may lead to a higher crime rate in the community. A low sense of attachment to the neighborhood is one of the risk factors for the occurrence of criminal offenses. Strong community bonds may provide the function of crime watches in the neighborhood. Under the neighborhood crime watches, people are actively alert for suspicious activities and actual break-ins to each other's homes. A supportive and intimate neighborhood will effectively reduce criminal offenses in the area.

On the whole, community bonds and relationships are essential components in forming a stable, caring and harmonious society.

Social care

A healthy citizen is able to practise a healthy lifestyle. A caring citizen is able to develop and maintain social bonds through participating in the community, promoting health for all in the community and establishing an effective social support system.

Social care is the means to rebuild the community bonds and relationships, providing support to the needy in his/her own community or social groups: mental support, financial assistance, social communication, safety environment, other material support and help (e.g. food, shelter and accommodation) to enhance one's independence and self-esteem. The delivery of social care creates a positive environment in which we can:

- learn reciprocity and mutual care and support;
- increase empathy to the disadvantaged and commitment to the community;
- gain personal confidence through the experience of social care and social support;
- develop communication and problem solving skills in the context of family, community and society and
- grow up as balanced and socially responsible individuals.

Reciprocity

Reciprocity is a state of relationships in which there is mutual action and influence, giving and taking. It is believed that the existence of a universal norm of reciprocity stimulates people to help those who help them. The mutual care and support help us transcend our boundaries to develop non-hierarchical relationships with others. It also enables us to focus our energies and talents to provide essential support and satisfaction for one another. These potentials are present in the social networks, neighbors, friends, colleagues and family.

Empathy to the disadvantaged

Empathy is derived from the Greek word for affection, passion, or feeling. It means the projection of one's own personality into that of another in order to understand him/her better. By providing social care to the disadvantaged, we can develop empathy towards other's situation, needs and problems so that we could understand them better. This understanding may lead to a range of proposals and actions for tackling the problems or even changing the situation. At last, it helps the youth to develop the commitment to the community.

Gain personal confidence

Through providing social care and support to the disadvantaged and vulnerable groups, we are more able to recognize what we can do for the community and society. Through identifying the needs, planning the care

and implementing the services, we develop our organisation skills and take on the responsibilities of a citizen to build a caring society. The experiences help us develop a sense of control and autonomy, hence, increasing our confidence.

Develop communication and problem solving skills

In delivering social care in the family, community and society, we can develop our communication and problem-solving skills. When caring for people in need, we can learn to use empathy, as well as non-verbal means such as eye contact, facial expression and physical proximity to express our acceptance and support. We may use the same skills to improve or enhance our relationships with our family. When caring for people in need, we may also identify the problems or issues in the community or society. We will develop our problem solving skills through the process of identifying the problem, analyzing the needs, planning the intervention, implementing the solution, evaluating the action and making recommendations for improvements.

Be a responsible individual

With the growing of individualism and the breakdown of community bonds, it is imperative for us to transcend our own boundaries and recognize our role in formulating a caring support system for all. We can deepen our understanding of different health and social issues and be responsible for dealing with problems. The experience of providing social care helps us to ensure a healthy and caring life for not only ourselves but also others. We can understand the different needs of different people through different experiences. Hence, people can learn to respect different cultures and foster compatibility.

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- 2 Health and Well-being
- **3** Physical Well-being Healthy Body
- 4 Mental Well-being Healthy Mind
- 5 Social Well-being Inter-personal Relationship
- 6 Healthy Community
- 7 Caring Community
- 8 Ecology and Health
- 9 Building a Healthy City
- **10** Healthcare System
- **11** Social Welfare System
- **12** Medical and Social Care Professions
- **13** Health and Social Care Policies
- **14 Social Care in Action**
- **15A** Health and Social Care Issue Ageing Population
- **15B** Health and Social Care Issue Discrimination
- **15C** Health and Social Care Issue Domestic Violence
- **15D** Health and Social Care Issue Addiction
- **15E** Health and Social Care Issue Poverty

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