This chapter introduces concepts of health and wellness. It also explains how determinants as well as risk and protective factors influence health. Some determinants such as the three P’s—poverty, population, and pollution—cause many health problems for people at the local, national, and global levels. The chapter also offers a rationale for why health is a human right.

**Health Defined**

Health is not easy to define. To some people, health is a sense of well-being, of “feeling good.” For others, health means not being sick, and if sick, healing quickly. For still others, health is a moral issue; that is, sickness is a result of a person’s having done something “bad” or “wrong.” For most of us, however, health means doing what we want to do with little or no pain.

The definition of health has changed several times over the course of Western history. In the past, it was limited to the “absence of disease.” Now, this definition includes not only an absence of disease but also how health is influenced by other factors, such as lifestyle, genetic makeup, and the environment. For example, the most often quoted definition of health was developed in 1948 by the World Health Organization (WHO): “The state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.”

The WHO 1948 definition recognizes that multiple factors influence health. Health is more than a physical condition and more than just the absence of disease.
The WHO definition defines health more as a holistic state; that is, health is multidimensional and is affected by multiple factors.

In the 1986 Ottawa Charter for Health Promotion, WHO expanded the definition of health: “a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities.” This expanded definition means that health is not just a state of physical, mental, and social well-being but also the ability to develop personal and social resources that are necessary to adapt to changes in one’s environment. Health helps us function daily, reach our goals, and be active in family, community, school, and work activities (Corbin, Pangrazi, & Franks, 2005).

The 1948 and the 1986 WHO definitions recognize the holistic state of health. However, there are differences among cultures, ages, genders, and socioeconomic statuses that make it difficult to establish a universal definition of health. These differences include the following:

**Culture differences** Purnell (2003) expands the WHO 1948 and 1986 definitions by adding that health is “a state of wellness that includes physical, mental, and spiritual states and is defined by individuals within their cultural group.”

**Age differences** Older adults may define health as mobility and independence. Middle-aged adults may define health as an inner strength and the ability to handle life’s challenges. Young adults and adolescents may define health as good physical condition, energy, and personal attractiveness. Children may define health as physical strength. In other words, views of health change as we grow older. *Health across the lifespan* means that physical, mental, and social factors are interconnected and that health is a life-course process that requires a changing definition as we age (Manderscheid et al., 2010) (see Figure 1.1).

**Gender differences** The different roles for men and women have negative as well as positive impacts on health. Work, parenthood, marriage, and aging, for example, create gender-specific physiological and psychological stresses that affect health.
**Socioeconomic status (SES)** Those who have a high SES may view health as enjoying life, and those who have a low SES may view health as meeting basic needs of food, shelter, and safety.

Adding to the complex influences of culture, age, gender, and SES, health and disease can coexist in a person. For example, a person can have asthma, but if she takes her medications as prescribed and adjusts her lifestyle to manage the disease, she can still experience physical, mental, and social health.

In summary, health is a holistic state and includes many factors beyond just freedom from physical disease and pain. Historically, the definition of health evolved from a limited view that focused on the absence of disease to a view that is multidimensional and includes many different influences on health (Office of Disease Prevention and Health Promotion, 2014).

**Two Aspects of Health: Physical and Mental**

Regardless of a person’s culture, age, gender, and SES, most people accept that there are two aspects of health: physical (body) and mental (mind). *Physical health* or *physical well-being* concerns our bodies and is associated with being physically fit due to healthy choices related to exercise, nutrition, sleep, and relaxation.

*Fitness* contributes to physical health and it reflects cardiorespiratory endurance, muscle strength, flexibility, and body composition. Other contributors to physical health include appropriate weight, responsible sexual behavior, and hygiene.

*Mental health* or *mental well-being* is intellectual and emotional well-being. According to the National Mental Health Information Center (2015), mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

Most people also agree that mental health includes the ability to enjoy life, bounce back from stressful events, achieve balance, be flexible, and feel safe.

Many of us see mental health defined as a biomedical term: the “absence of mental illness.” For some, this definition is not enough because it adds little to understanding the person and the factors that lead to health or illness. The goal of treatment in mental health is to understand as much about a person’s emotions, thoughts, and behaviors as about the signs and the symptoms of a disease (Manderscheid et al., 2010). As William Osler (1849–1919), an icon of modern medicine, stated, “It is much more important to know what sort of person has a disease than what sort of disease a patient has.”

**Wellness Defined**

Health and wellness are related terms. Both focus on balancing the physical, social, and emotional aspects of a person’s life. *Wellness* is an active, lifelong process of becoming aware of healthy choices and making decisions that promote a more balanced and fulfilling *quality of life*—that is, a general sense of happiness and satisfaction with one’s life and environment. Simply put, wellness is the degree to which a person feels positive and enthusiastic about life and has developed the ability to manage feelings and behaviors.

There are two aspects to quality of life. The first is a person’s general quality of life, which involves such factors as health, recreation, culture, and values, and the environments that support these factors. The second is health-related quality of life, which involves a personal sense of physical and mental well-being and the ability to engage in healthy behaviors.
Risk and Protective Factors That Influence Health

A person’s health is shaped by biological factors, such as genes, age, and gender. However, these biological factors are generally not sufficient to ensure that someone will be healthy. Both health and illness can also be caused by social, economic, educational, cultural, and political factors, ranging from the availability of food to personal responsibility to quality of health care (Doll, 1992; Institute of Medicine, 2001; UN Committee on Economic, Social and Cultural Rights [CESCR], 2000; World Health Organization, 2008).

Those factors associated with illness are referred to as risk factors. Risk factors are certain conditions or habits that make a person more likely to develop an illness. They can also increase the chances that an existing illness will get worse. It is important to understand that although risk factors increase the chances of developing an illness, they do not necessarily cause it. Examples of risk factors are obesity, unsafe sex, substance abuse, lack of hygiene, and high blood pressure. Risk reduction is a strategy or action that decreases the risk of getting an illness. For example, a risk reduction strategy for heart disease is to exercise or to manage stress.

Protective factors have the opposite effect of risk factors. They decrease the chances of a person developing an illness and lessen the likelihood of negative consequences from exposure to risk. Protective factors may decrease a person’s chances of developing an illness, but they do not necessarily prevent someone’s getting the illness. Examples of protective factors are clean water, access to quality health care, regular exercise, and healthy foods.

Health Determinants

A way to promote health or to prevent illness is to develop strategies against certain risk factors. Health determinants are situations or environments that allow risk and protective factors to directly influence a person’s health and illness (Baun, Begin, Houweiling, & Taylor, 2009; Wilkinson & Marmot, 2003; Winklestein, 1992) (see Figure 1.2). It can be confusing to know the differences between risk and protective factors and health determinants because sometimes these terms can be used to mean the same thing.

A person’s physical and mental health is influenced by one or more of the following determinants:

- **Socioeconomic status (SES)** Money or lack of money is critical to health. Poverty reduces people’s access to health care and resources, resulting in health problems that go untreated.

- **Employment and work environment** Steady employment and a healthy work environment contribute to health.

- **Education** Education provides people with knowledge and skills to make healthy choices and to access quality health care.

- **Health literacy** To be able to obtain, read, understand, and act on health information affects health.

- **Physical environment** Air, noise and water-quality control, toxic waste removal, housing, and community safety all support health.

- **Family, social, and community support networks** Support from families, friends, and communities helps people deal with illness.

- **Access to quality health care** The availability of preventive and primary care services is important in promoting and maintaining health.

- **Health policies** Governmental policies affect the health of individuals, their loved ones, their family, and their community. Examples include antismoking campaigns, immunizations, and gun control laws.
Genetic makeup Inherited genetic makeup plays a role in health and the chances of getting certain illnesses.

Family history Family health and medical history beyond genetic makeup affects health.

Biology of the disease The type of disease and its signs, symptoms, and prognosis affect health.

Gender Gender differences affect health, including men’s shorter life expectancy and women’s higher rates of illness.

Healthy child development Prenatal and early childhood experiences have a significant effect on later health.

Racial and ethnic disparities Minority populations often experience illness at higher rates than the majority population because of socioeconomic factors, income disparities, and problems with health care accessibility.

Cultural influences How a culture views health and illness and a culture’s health care practices influence people’s health.
**Disabilities** Persons with disabilities are those who have activity limitation, who use assistance, or who see themselves as having a disability. They tend to report more anxiety, pain, and other health issues than people without a disability. They also experience lower rates of physical activity and higher rates of obesity. Many persons with disabilities lack access to quality health care.

**Personal health responsibility and practices** Being responsible for one’s health and making healthy choices play a major role in preventing illness.

**Individual coping skills and resilience** Coping skills help a person be self-reliant, solve problems, and make healthy choices.

Following extensive research to understand how much of a role determinants play in health and illness, the Robert Wood Johnson (RWJ) Foundation published a 2009 report titled *Health Is More Than Health Care*. The findings in the report focused on why some Americans experience poor health and have shorter lives than others:

- Although health care is important for relieving suffering and curing illness, only an estimated 10 to 15 percent of preventable deaths are caused by issues related to health care.
- A person’s health and chances of becoming sick and dying at a young age are strongly influenced by determinants such as education, income, and the quality of community environments.
- American college graduates can expect to live at least five years longer than Americans who have not completed high school.
- Persons with low SES are more than three times as likely as persons with upper-middle SES to suffer physical limitations from a chronic illness.
- Upper-middle SES persons can expect to live more than six years longer than low SES persons.
- People of middle SES are less healthy and can expect to live shorter lives than those with higher SES—even when they are insured.

The RWJ Foundation report also showed that good health depends on personal choice and responsibility. No government or private business program can take the place of a person making healthy choices. It is realistic and beneficial to expect a person to take responsibility for his or her own health by eating a healthy diet, doing regular physical exercises, and avoiding risky health behaviors such as smoking.

The report concluded that the following are major contributors to health and illness:

- **Health care.** Health care is central to reducing suffering and to improving health. Health care also extends the lives of people once they are sick. Equal access to quality health care for all persons is a fundamental human right. However, there should be a focus on keeping people healthy—preventing illness. This focus requires attention and resources that decrease risk factors and increase protective factors.
- **Poor nutrition and lack of physical activity.** These factors are related to almost half of preventable deaths in the United States and are known risk factors for diabetes, heart disease, and stroke, and may contribute to some cancers.
- **Risky behaviors.** Smoking and other forms of substance abuse are among the leading causes of preventable death in the United States. Most people are aware of the health risks associated with these risky behaviors but continue to engage in them. Support from loved ones, family members, and others can provide motivation for someone to stop his or her risky behavior. Environmental changes—in schools, workplaces, and communities—can also promote healthier choices.
Early life experiences. These impact a lifetime of health-related choices. Brain, cognitive, and behavioral development early in life are linked to many common health problems later in life, including cardiovascular disease and stroke, diabetes, obesity, smoking, and depression.

Communities. Disparities in health care due to race, ethnicity, income, or education must be reduced. Community conditions can contribute to disease, such as asthma and lead poisoning, as well as limit the opportunity for healthy behaviors.

Income. Higher income can mean easy access to resources such as health care, healthy foods, quality child care, and housing free of toxins. Lower income can mean that everyday life is a financial struggle, leaving little opportunity to access the resources available to people with higher incomes.

Education. People who lack education have more difficulty understanding how their behaviors affect their health, coping with chronic health problems, and undergoing complex medical treatments. Higher levels of education provide opportunities for higher-paying jobs, which bring better health insurance benefits and healthier working environments. Better education, higher income, and improved health are directly linked.

The Three P’s: Population, Poverty, and Pollution

There are many theories that explain the complex influences that shape health. One theory states that to understand these complex influences on health means taking into consideration not only the whole person but also whole populations and the environments they live in. This theory views the “three P’s”—population, poverty, and pollution—as intertwined with health (see Figure 1.3). Population growth is associated with poverty, and both poverty and population growth are associated with pollution. Population, poverty, and pollution have a negative impact on health.

The three P’s theory of health is rooted in the early 1970s environmental movement, which focused on pollution concerns, such as poor air quality, contaminated water, and toxic waste. From these concerns grew awareness of overpopulation and its impact on the environment. In response to overpopulation, organizations such as Planned Parenthood works toward reducing birth rates, especially in developing countries. The birth control strategies of these organizations do eventually reduce population growth and cut poverty rates in many countries.

The birth rate has dropped in the United States and many other countries, but the global population continues to grow—the current global population of approximately 7 billion people is expected to reach 8–10 billion sometime in the 21st century (Clark, 2005; CESCR, 2000). Population growth is closely linked to poverty, as it reduces economic growth and also drains the environment of resources.

![Figure 1.3 Three P’s of Health](image)
Associated with population growth is not only the problem of poverty but also the problem of pollution (Worldwatch Institute, 2015). Whereas the wealthy use more resources and produce more pollution, those who are poor bear a greater share of the burden of pollution. Poor people, for example, live without adequate food, housing, clean water, clean air, or basic health care. Because of the increasing numbers of people who continue to increase their levels of consumption, the global and national gains made in pollution control have been threatened.

Unfortunately, many of the same environmental problems of the 1970s are still with us and will continue to be for a long time to come. Doll (1992) identified why the three P’s are hazardous. One, pollution of the atmosphere by greenhouse gases causes climate change, which ultimately has major consequences for health. Second, the worldwide population growth rate is now 26 persons every 10 seconds. If this rate continues, there will eventually be a population twice the carrying capacity of the earth even if “we all had a vegetarian diet and shared our food equally” (p. 933). In other words, if we continue to reproduce at the current rate, the earth will no longer be able to provide for the human population. Third, poverty causes illness. Those who live in poverty are more likely to suffer from a variety of chronic health problems, both psychological and physical. At the current rate, poverty will increase along with overpopulation. Increased overpopulation and poverty mean that scarce global resources will be available only to those who can afford to buy them.

Health as a Basic Human Right

In 1948, the United Nations stated in its Universal Declaration of Human Rights, “Everyone has the right to a standard of living adequate for the health and well-being of himself and his family, including food, clothing, housing, and medical care.” Then and now, health is a basic human right. Health has universal importance to every person because it is necessary for joy, productivity, and creativity. Persons with physical and mental health socialize, work, and engage in activities that add meaning to their lives. Every person wants to be healthy, to have the best physical and mental health possible, even when he or she experiences an illness. Health is such a basic need that not to have it impacts life, liberty, and the pursuit of happiness. Unfortunately, the majority of people living today do not experience this basic human right.

The right to health includes access to healthy foods and nutrition, housing, adequate sanitation, safety, and positive working environments. It also includes freedoms and opportunities—freedoms meaning the right to control one’s health and body and the right to be free from torture and from nonconsensual medical treatment and experimentation; opportunities meaning the right to a health care system that provides access to quality care for all (CESCR, 2000).

Yet the right to health does not mean a right to be healthy. A nation cannot guarantee that all its citizens will be healthy. However, health as a human right is the right to the use of a variety of facilities, goods, services, and environments necessary for a person to reach his or her highest possible level of health.

Chapter Summary

- During the Ottawa Charter for Health Promotion in 1986, WHO expanded its definition of health to “a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities.”
- Health and wellness are related terms. Both terms focus on balancing physical, emotional, and social aspects of one’s life.
- Risk factors increase the chances of contracting an illness. Protective factors decrease the chances of becoming ill.
Health determinants are situations or environments that allow risk and protective factors to directly influence a person’s health and illness.

The theory known as the three P’s of health states that to understand health, you need to consider the whole person and whole populations and the environments they live in.

In its Universal Declaration of Human Rights of 1948, the United Nations stated, “Everyone has the right to a standard of living adequate for the health and well-being of himself and his family, including food, clothing, housing and medical care.” Then, and now, health is a basic human right; unfortunately, many people living today—even in the wealthiest of countries, including the United States—are unable to experience this right.

**REVIEW QUESTIONS**

1. Identify some of the multiple factors that influence health. How do these factors influence health?
2. What is the difference between health and wellness?
3. What role does fitness play in health?
4. How does health across the lifespan affect a person’s well-being?
5. What are the differences among a risk factor, a protective factor, and a health determinant?
6. What is risk reduction, and why is it important to health and wellness?
7. List and describe at least five health determinants. Explain how each of these determinants affects a person’s health.
8. What are the three P’s of health? How do these three P’s influence a person’s health?
10. Why is health a basic human right?

**KEY TERMS**

**Fitness:** Cardio-respiratory endurance, muscular strength, flexibility, and body composition

**Health across the lifespan:** Physical, mental, and social aging over a lifespan

**Health determinant:** A situation or environment that allows risk and protective factors to directly influence a person’s health and illness

**Holistic:** Multidimensional and affected by multiple factors

**Mental health or mental well-being:** How a person thinks, feels, and acts when faced with life’s situations and challenges

**Physical health or physical well-being:** Concerns our bodies and is associated with being physically fit due to healthy choices related to exercise, nutrition, sleep, and relaxation

**Protective factor:** A factor that decreases the chances of developing a disease, but does not guarantee that a person will not get the disease

**Quality of life:** A general sense of happiness and satisfaction with one’s life and environment

**Risk factor:** A factor that increases the chances of developing a disease, but does not necessarily cause a disease

**Risk reduction:** A strategy or action that a person takes to decrease the chances of getting a disease

**Wellness:** An active, lifelong process of becoming aware of choices and making decisions for a more balanced and fulfilling quality of life
CHAPTER ACTIVITIES

1. Prepare to interview family members, friends, and neighbors who represent health across the lifespan. (For example, interview a child, an adolescent, a young adult, an adult, and an older adult.) Ask each person to tell you his or her definition of health. After conducting the interview, identify how the definitions differ across the lifespan. Write down the interview responses with your analysis and be prepared to discuss your findings in terms of health across the lifespan.

2. Identify and list five to seven health determinants. For each determinant, describe at least one or two risk factors, one or two protective factors, and one or two risk reduction strategies.

3. Go to the World Health Organization’s website (http://www.who.int/gho/en/) for information on the Global Health Observatory (GHO) data. Review the links that show health issues at the global level. In small groups, brainstorm impressions of current global health issues. For example, which countries have the longest life expectancy? Which have the shortest? Once you brainstorm impressions, identify the health determinants that explain why specific health problems exist in certain countries while not in others.

4. If health is a human right, identify ways in which the US health care system violates that right and ways that it supports that right. Write your analysis in two columns to compare and contrast your ideas.

5. Develop a two-page case study that addresses health across the lifespan. The case study selection can be based on gender, sexual orientation, or race and ethnicity. Be ready to present your case study during class discussion. The class discussions need to address the issue of how considerations related to health across the lifespan are not the same for everyone.

Bibliography and Works Cited


