A theoretical retrospection of changing social construction of health and illness

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Abstract: Introduction: Health is a pre-requisite for human development and the pure medical knowledge normally will not give us with exact or mirror-like representations of the physical body and its various health related problems. Normally, various medical theories are some time highly contradictory to one another. Hence we should not perplex with medical theories with the disease or illness. Normally the context in which an individual lives it is of very vital and significant in developing his/her health culture and health status. Methodology: This paper is based on the review of various past and current literatures and the author’s personal experiences working in various health related projects. Conclusion: Health is basically a social construction. There are some external determinants which can decide the health status of any person including social factors, environment, hospitals, doctors or technologies. Health behaviour sole depends on the ‘health culture’ of a particular community/person. Health and illness are socially constructed and cannot be considered in separation from other elements of any given society.

Keywords: Health, Illness, Change, Behavior, Medical

Background
Health is not only a stable state of physical and natural well being but also in a true sense it involved the various other complex issues. As it is widely known fact that, health is one of the imperative indicators shimmering the excellence of human life since time immemorial. Healthy community is very vital because it can set the destiny of the any society or country. Also healthy human resources lead to have any type of development or any kind of achievement. Health is a very vital integrated component of an individual/a community. Sometime collapse of health may even lead an individual towards an early death. Also unhealthy community may be a hinder for the holistic growth and development of any society. Poor health status of any community may isolate that community from the mainstream of the society [1].

Every culture has its particular explanations for illness. Health and illness are universal concept in all societies. Each community organizes itself through experience, through different means, through different elements and finally will develop different approaches to fight against illness and diseases. In this way, each and every society develops specific medical institutions called ‘health care system’ in a relevant social context. This health care system will have various segments, including origin, symptoms, development, process and curing of various diseases/illness. Also this system will have different symbols expressed through the means of practices, interactions and institutions [2]. Indian system of medicine is also theorized based on the same belief that the human body is made-up of three basic substances called ‘spirit, phelem and bile’. In the same way Chinese’s medicine is also based on the belief that the body is made-up of five elements including ‘water, metal, earth, fire, and wood’. In addition, Greek system of medicine also theorizing that the human body has four different of forces.

Health, illness and cure are the realities in everybody’s life across the societies. Therapy, practices and results normally evolve over the period of time within the socio-cultural context. It provides different insights about health culture, behaviour, traditions; customs, medical health care system etc. Through the personal experiences, patients’ and the doctors and the native healers will also add on to the
knowledge of society’s health belief system continuously over the period of time. All cultures consists of vital information’s about how the disease occurs, what makes illness and how to choose suitable healing approaches. This would be a health culture of each and every community. In each health culture there will be different concepts, ideology philosophy and thinking and planning in handling various diseases and illness appropriately. Some experts called it as “cultural diseases” because some diseases are created partially because of “cultural” definition of the “situation” [3].

Regarding social construction of disease and illness experts have evolved an argument for analyzing ‘behavior determinants of the health of individuals at the societal level’. Strass (1975) writes “concerning the social distribution and determinants of disease and illness cut across the view of disease as an autonomous individual affliction. It focuses that new disease and the discloser to the range of possible risk factors are a result of the norms of any given society”. Hence it is opined that the beliefs held by the community/individual within a society about onset of disease and curing is critical always [4].

It is generally opined that illness has three domains in almost all societies:
1. Illness as ‘Sanction’ (punishment for doing wrong)
2. Illness as ‘Deviance’( a form of social control)
3. Illness as an Indicator of Social System Performance (indicative of the performance of an existing social system)

It is well known truth that health and illness is a ‘socially constructed concept’. Each and every society will interpret the term ‘health and illness’ differently in its own way. This would be depending largely on history, culture, religion, gender role etc. of that society. Moreover it depends who has the final authority to apply the label of ‘illnesses/diseases within a given society. Also it depends on the context or the circumstances in which illness occurs. Truly speaking social construction of illness means how society shapes illness behavior of an individual as a in which he/she normally live. Here one question arises what does really construct an illness? [5]. Illness has three historical origins:
1. Few illness notions are originally rooted historical and cultural meaning;
2. Most of all illness are socially constructed at the empirical level;
3. The true medical concept about illness is mostly framed by the vested interest [5]

Social construction of illness depends on how people differentiate between ‘illness and the disease’. Social construction of illness has developed through an interaction in a social context. Meaning and the experience of illness will be largely framed by the historical and existing social system. Scholars say illness is not ‘given’ rather actually conferred by dominating social groups in a given society. They say society will confer illness as a part of the control/sanction (short term). Scholars who support ‘symbolic interactionims felt illness is an experience within the framework of daily social interactions of an individual [6]. Few sociologists are showing interest to work on how ‘symptoms’ or ‘symbols’ are being labeled or identified as an ‘illness’. It is also interesting to look what an accepted as “Illness or what is not accepted as not an ‘illness’ and what are the factors which play a vital role in differentiating illness from any biological framework. However, few scholars also say an argument over illness and it’s societal construction approach as something ‘Mixed’ i.e. Illness has both medical and social deviance. Some time illness varies or may not have independent factors of effect on patient and health care system. Illness has also cultural symbolic domain. Some illness has been labeled as stigma, while some illness is not stigmatized in society. For example ‘AIDS’ will be severely stigmatized where as ‘Polio’ not some time. Illness stigmatization varies society to society based on the type, duration and severity etc. It may have less noticed in urban society whereas more serious in case of rural society some time. Some time due to stigmatization people may not come forward to take suitable medical care as all [7].

It is known fact that sociologists are studying ‘patient perspective of illness’ since 1950 onwards. Experts opined that since patients’ will spend only few days ‘with illness (if is a
minor problem) patient’s personal experience/narrations may not same as the illness experiences of a patient having a long term health issues. Hence, it is necessary to focus on ‘patients life’s before illness, during the stage of illness and after the illness got medically cured’. This helps us in the social construction of illness based on patients’ experiences in a given society. Also it helps us to know how the different components of the society helped him/her to come out of illness stage soon. During the stage of illness patients’ will be normally worried about their personal and social relationships and other day to day activities which could not be performed well. Sometime during the stage of illness patients will review their previous life and in some cases it may create new illness identification (example: patients under dialysis) also [8].

It also focuses how health culture and behavior varies based on the socio-economic status of the community. Sociological concept about illness gives a fair idea how external determinants causes health problem to an individual and how he/she responds to it in a given social context. It is a well known truth that the influence of socio-cultural factors varies across the globe. Normally these social factors demonstrated through various discourses on important diseases /illness and its outbreak in a specific geographical area. Basically experts’ focus on the issues comprising society and medicine, socioeconomic setup, general cultural issues which are geographically specific while studying specific health culture of a community. Sometime a common disease may affect the larger population whereas a major disease may affect smaller population only. Medical anthropologists basically studies about these discrepancies [9].

In rural areas, incapacitation/absence from work is the general index of an illness. Even though the basic concept of the illness changes from caste to caste a person will be declared as a diseased if he/she could not perform day to day work. They expect a healthy person should work normally without having any problem. Consequently, sometime if people have mild fever, head ache, BP, depression, giddiness etc, will not be considered as a part of disease/illness because these symptoms will not hamper their normal routine day to day work. Usually peoples don’t bother for these simple health issues. Hence, sociologist has concluded that in rural areas illness is more related to ‘functional rather than clinical or biological’.

Delton’s (1970) Model as to How People Perceive Illness.

<table>
<thead>
<tr>
<th>Clinically Ill</th>
<th>D</th>
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<tbody>
<tr>
<td>Clinically Ill</td>
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<td>A</td>
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- Category - A: People think that they are not ill both culturally and clinically;
- Category - B: People think that they are not culturally ill but are clinically ill;
- Category - C: People think that they are culturally ill but not clinically;
- Category - D: People think that they are ill both culturally and clinically.

It is opined that response to any type of illness by a patient will be mainly depends on how he/she perceives/ belief concerning health and illness. In the next stage, he/she seeks assistance from various social components (including, friends, relatives, people who suffered from the same health problems previously….etc) to get a proper outlet to come out from the current health problem. Also medical anthropologists feared during this entire process of seeking assistances make the delay in getting proper treatment in time and patient’ will get suffer [9]. It is found that the communities’ reaction to symptoms is dependent on their cultural values / beliefs concerning health. That is, their perception of what is 'normal'. Therefore, the choice to seek proper medical help was either promoted or delayed by various social factors. Zola’s (1973) model identified five diverse types of occurrence which ‘triggered’ the judgment to seek medical care, incidents which intimidate people’s philosophy of customariness” [10].

As new medical health care facilities are being discovered, health status of the underserved communities across the world has started considerably improving. Gradual changes in the socio economic status of the people also led to have the quality medical care. Diagnose and treatment also started to affect positively on the health care seeking behavior of the
community. Now rural people are showing much interest to adopt modern health care facilities whereas certain sections are not yet. This change in the health culture of the community causes the issue of health and illness within given societal life to be highly volatile in definition. Hence studying health and illness from the sociological point of view continuously needs to be updated as societies are dynamic in nature [11].

It is generally opined that society having poor health will tolerate high inequality in every aspect including health care. Differences in health practices between various social groups would be more vital for sociological analyses. Even in the same society, disparities in health status and health behavior can be seen among different social classes/castes. The wide income gap, material deprivation and psychological issues invariably effects on health and illness of an individual/community in a society. Wide gap between rich and poor people results in low social cohesion which finally affects the health of all members. It is found that vital differences in case of mortality and morbidity continuously increasing between low income groups and the elites of the society. However the research is on the way to find out how poverty and deprivation effects on general health issues and behavior among the members of developing societies [12].

Conclusion

The thoughts of illness and health are socially constructed inside each society of every culture. These widespread languages cover up a varied choice of connotations for which there has been no universal conformity over their denotations. The main role of social, cultural, psychological, family relationship, social capital, social network, epidemiology and other issues plays vital role in the etiology of disease and illness. Current theories of health and illness are relatively based on the various perspectives of humoral imbalance. Certain Sociologists argues illness causes due to the problems in case of social relationships in the changing scenario [13].

Also, they argue that illness causes due to the broken relationships between the human beings and the eco-system. Again, certain sociologist’s proposed their theories about illness and diseases based on natural and super natural causations. Theories of natural causation focus on disturbance of health as a physiological consequences including infection, germs, mental trauma [14]. Hence Health and illness are socially constructed and cannot be considered as a separate entity from other elements of any given society for any time.

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