**NUR212**

**1. Concepts of Health and Wellness Outline**

Reading: 263-273 (Reference 1)

 **Health and Illness**

“Health and illness are human experiences. The presence of illness does not preclude health, nor does optimal health preclude illness”

The American Nurses Association (2010)

**Health**

“A state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.”

World Health Organization (WHO, 1948).

**Wellness**

It is a state of well-being which includes:

* + self- responsibility
	+ an ultimate goal
	+ a dynamic, growing process
	+ daily decision making in the areas of nutrition, stress management, physical fitness, preventive health care, and emotional health
	+ including the whole being of the individual
	+ **The Seven Components of Wellness.**

**1. Environmental:** The ability to promote health measures that improve the standard of living and quality of life in the community. ( ex. Food, water and air)

**2. Social:** The ability to interact successfully with people and within the environment of which each person is a part, develop and maintain intimacy with significant others, develop respect and tolerance for those with different opinions and beliefs.

**3. Emotional:** The ability to manage stress and to express emotions spontaneously. Involves the ability to recognize, accept, and express feelings and to accept one’s limitations.

**4. Physical**: The ability to carry out daily tasks, achieve fitness, maintain adequate nutrition and proper body fat, avoid abusing drugs and alcohol or using tobacco products and generally practice positive lifestyle habits.

**5. Spiritual**: The belief in some force ( nature, science, religion, or a higher power) that serves to unit human beings and provide meaning and purpose to life.

**6. Intellectual**: The ability to learn and use information effectively for personal, family, and career development.

**7. Occupational**: The ability to achieve a balance between work and leisure time.

**Illness**

It is a highly personal state in which the person’s physical, emotional, intellectual, social developmental or spiritual functioning is thought to be diminished.

* It is not synonymous with disease and may or may not be related to disease.
* **Illness**

**Disease**: is described as an alteration in body functions resulting in a reduction of capacities or a shortening of the normal life span.

The cause of a disease or condition is called **ETIOLOGY**.

**Common Classification of Illness and Disease**

* **Acute Illness**
	+ Typically characterized by symptoms of relatively **short duration**.
	+ Symptoms often appear abruptly and subside quickly, and depending on the cause, it may or may not require interventions by health care professionals.
	+ Some acute illness is serious ( ex. Appendicitis ) which may require surgical intervention.
	+ Following acute illness, most people return to their normal level of wellness.
* **Chronic Illness**
	+ Lasts for an extended period, ***usually 6 months or longer and often for the person’s life.***
	+ Usually have slow onset and often have period of **remission**, when the symptoms disappear and **exacerbation**, when the symptoms reappear.

**Stages of Illness**

**Stage I : Symptom Experience**

* + - * Something is wrong.
			* Experiences some symptoms ( such as pain, rash, cough, fever, or bleeding)
				+ Physical experience of symptoms
				+ Cognitive aspect ( interpretation of the symptoms)
				+ Emotional response ( fear or anxiety).

**Stage II: Assumption of the Sick Role**

* + - * The person now accepts the sick role and seeks confirmation from family, and friends.
			* Persons often continue with self-treatment and delay contact with health care professionals as long as possible.
			* When symptoms persists, the person is motivated to seek professional help.

**Stage 3: Medical Care Contact**

* + - People seek the advice of a health professional either on their own initiative or at the urging of significant others.
		- Seeking professional advice means they are really asking for:
			* Validation of real illness
			* Explanation of the symptoms in understandable terms
			* Reassurance that they will be all right or prediction of what the outcome will be.

**Stage 4: Dependent Client Role**

After accepting the illness and seeking treatment, the client becomes dependent on the professional for help.

* + - Acceptance to dependence but with varying degrees of control over their own lives ( requesting precise information about their disease, treatment, cost of treatment ).

**Stage 5 : Recovery or Rehabilitation**

* In this stage the client is expected to relinquish the dependent role and resume former roles and responsibilities.
	+ - For persons with acute illness recovery is rapid. But for people with long term illness, recovery are more difficult.
		- For persons with disability, this final stage may require therapy to learn how to make major adjustments in functioning.

**Effects of Illness**

**Impact on the Client:**

 **Behavioral and emotional changes**.

* + - Associated with short-term illness.
		- More acute responses for life-threatening or chronic, disabling illness ( anxiety, fear, anger, withdrawal, denial, sense of hopelessness, feelings of powerlessness).

 **Changes in self-concept and body image**

* + - If there is severe scarring or loss of a limb or sense organ.
		- Client’s self-esteem and self-concept may also be affected.

 **Lifestyle changes**

* + - Need to participate to treatment and taking medications.
		- Need to change diet, activity, exercise, rest and sleep patterns.

**Impact on the Family:**

* Role changes.
* Task reassignments and increased demands on time.
* Increased stress due to anxiety.
* Financial problems.
* Loneliness as a result of separation and pending loss
* Change in social customs.