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BLACCH Study E-Bulletin #2: Definition of Health

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Definition of Health

The Black, African and Caribbean Canadian Health (BLACCH) Study is a community-based research project designed with the goal of improving access to health care and the health status of Black people from Canada, Africa, the Caribbean, and other parts of the world who reside in London and Middlesex County, Ontario, Canada.

The Black, African and Caribbean Canadian Health (BLACCH) Study E-Bulletin #2, September 20, 2012

Background

World Health Organization defines health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity"(World Health Organization, 1948). This definition connects health with an individual's entire life. On the other hand, the Public Health Agency of Canada defines health as "a capacity or resource rather than a state", it "corresponds more to the notion of being able to pursue one's goals, to acquire skills and education, and to grow" (Public Health Agency of Canada, 2012). Both definitions provide the context in which lifestyles, backgrounds, health services and social and economic conditions constitute the determinants of health, which impact and are impacted by, health. The definition of health provides guidance about how health outcomes should be measured and what factors should be included in health assessments. Hence, when assessing health or designing health interventions, a population's definition of health is paramount.

Our Approach

In Phase I of the Black, African and Caribbean Canadian Health (BLACCH) Study, a purposive sample of 22 community members and 8 service providers aged 16 and older were interviewed. Community members were asked to define and rate their health, and service providers were asked to state their philosophy about health and characterize the health of local African, Caribbean and other Black (ACB) communities. In Phase II of the research project, 188 self-identified ACB people residing in London and area completed a paper-based survey. All survey participants were aged 18 and over. They were asked questions about their social condition and general health, among other things. Below, we present a summary of responses from Phases I and II that pertain to the definition of health.

Key Findings

Phase I: Community members said that health was a top priority for them, and they defined it holistically—it was physiological, emotional, spiritual and psychological. Health was not separated from quality of life.

> *I think health to me is a perfect wellbeing, both physical, mental, and spiritual and…it means everything because it's being able to have a good life – being able to live well. (Black American Female)*

Community members generally thought they were in good health until they had fallen ill. When asked about how migration impacted their health, they either said that their health remained the same or deteriorated after migrating.

> *So I think the only difference was I had to be, to make more of a conscious effort to be healthier in Canada as opposed to [MY HOME COUNTRY]. (African Female)*

Like community members, social service providers viewed health holistically, and they saw disease prevention as an important aspect of health. On the other hand, health service providers talked about the importance of individuals taking charge of their own health and being able to access health care. Overall, health service providers said that ACB people needed to take their health more seriously.

> *[W]hen it comes to health, the most important thing about any diagnosis is learning about it, getting adequate information, and then making sure that you are doing what is required to be healthy. (ACB Female)*

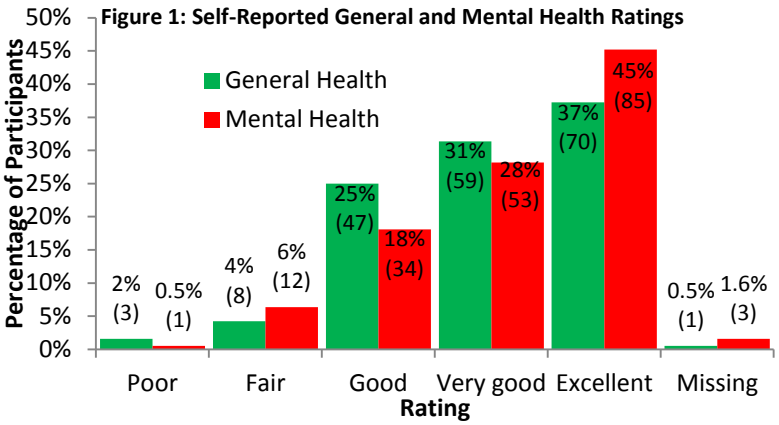
> *Lots of times you hear them say that, oh, my cholesterol is high, my blood pressure is high, but they actually just say it without realizing that it is serious. So I find that the people that I know, they know that they have issues but they don't see it as a problem. (ACB Female)*

Phase II: Most participants (91%) said their health had either stayed the same or diminished over the past year (Table 1), but the majority of participants rated their general (69%) and mental (73%) health as "very good" or "excellent" (Figure 1). Furthermore, only 77% of participants had seen a health care provider in the past year (Table 2).

Table 1: Comparing Current Health to Last Year's Health

Comparison	Num.	%
Much worse now than 1 year ago	41	22
Somewhat worse now than 1 year ago	19	10
About the same as 1 year ago	110	59
Somewhat better now than 1 year ago	16	9
Much better than 1 year ago	1	0.5
Missing	1	0.5
Total	188	100

Figure 1: Self-Reported General and Mental Health Ratings



Although the majority of participants (54%) said they were satisfied with their lives (Table 3), most (63%) said their lives were at least a bit stressful and 36% said their daily lives had little or no stress (Table 4).

Table 2: Last Visit to a Health Care Provider in Canada

Time Period	Num.	%
Never	7	4
Less than 1 year ago	144	77
1 to 2 years ago	26	14
3 to 4 years ago	5	3
5 to 9 years ago	2	1
Missing	4	2
Total	188	100

Table 3: Satisfaction With Life

Level of Satisfaction	Num.	%
Very dissatisfied	1	0.5
Dissatisfied	10	5
Neither satisfied nor dissatisfied	31	16
Satisfied	101	53
Very Satisfied	44	23
Missing	1	0.5
Total	188	100

Table 4: Amount of Stress in One's Life

Level of Stress	Num.	%
Not at all stressful	15	8
Not very stressful	52	28
A bit stressful	80	43
Quite a bit stressful	30	16
Extremely stressful	9	5
Missing	2	1
Total	188	100%

Impact on Policy and Practice

These results show that ACB communities and social service providers define health similarly to the World Health Organization and the Public Health Agency of Canada. Hence, a strictly physiological definition of health is inappropriate for these communities and the people providing services to them. Furthermore, an individual's social condition impacts his/ her quality of life and through that, his/ her health. To more fully address health in ACB communities, it is important that health interventions consider social factors that impact these communities and are sources of stress, dissatisfaction, lack of empowerment and reduced health care access. Also, community members should be involved in the development of these interventions to ensure that their outcomes are consistent with these communities' definition of health.

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If you want more information about the project or our work, please e-mail blacchstudy@gmail.com to be added to our e-mail list, visit our Facebook page (The Black, African and Caribbean Canadian Health Study), join our Facebook group (The BLACCH Study), or follow us on Twitter (@BLACCH).