

## Health and Medicine

Ryan Cragun – Summer, 2005

## Health

- “a state of complete physical, mental and social well-being, and does not consist only of the absence of disease or infirmity”
- Why is health a sociological concern?
  - views of health vary by culture
  - views of health change over time
  - there is disparity in access to and quality of health care

## Evolution of Health Care

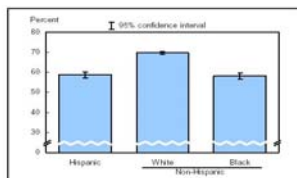
- Folk Medicine
- Alternative Medicine
- Modern Medicine
  - tested (double-blind studies)
  - peer-reviewed

## Health Disparities

- Disparities are seen in several comparisons:
  - race
  - ethnicity
  - class
- Causes
  - socioeconomic – differences in income and wealth
  - environmental – resulting from differences in income and wealth
  - prejudice, bias, and discrimination
  - difficulties accessing health care
  - lack of insurance

## Race/Ethnicity Disparities

Figure 11.4. Age- sex-adjusted percent of persons of all ages who assessed their health as excellent or very good, by race/ethnicity: United States, 2004



NOTES: Health status data were obtained by asking respondents to assess their own health and that of family members living in the same household as excellent, very good, good, fair, or poor. This analysis excluded 383 persons (0.61%) with unknown health status. Estimates are age- and sex-adjusted to the 2000 projected U.S. standard population using three age groups: under 18 years, 18-64 years, and 65 years and over.

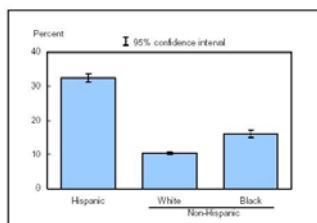
DATA SOURCE: Family Core component of the 2004 National Health Interview Survey.

## Health Insurance

- Reduce costs through
  - increased exercise
  - eating better
  - no smoking; smart alcohol consumption
- Private insurance/free-market approach
  - pros: research, good if you can pay
  - cons: not everyone can have it, expensive
- Public insurance
  - pros: everyone has a minimum level of care; less expensive
  - cons: less innovation, lower pay for health care professionals
- Parallel Systems – two-tiered

## Health Insurance coverage

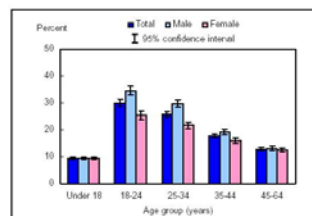
Figure 1.3. Age- sex-adjusted percent of persons of all ages without health insurance coverage, by race/ethnicity: United States, 2004



DATA SOURCE: Family Core component of the 2004 National Health Interview Survey.

## Health Insurance coverage

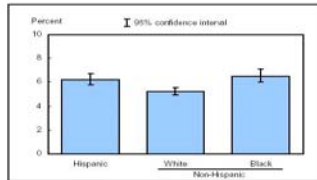
Figure 1.2. Percent of persons under age 65 years without health insurance coverage, by age group and sex: United States, 2004



DATA SOURCE: Family Core component of the 2004 National Health Interview Survey.

## Unable to get health care

**Figure 3.3. Age- sex-adjusted percent of persons of all ages who failed to obtain needed medical care due to cost at some time during the past 12 months, by race/ethnicity: United States, 2004**



NOTES: The analyses excluded 318 persons (0.3%) with unknown success in obtaining needed medical care. Estimates are age- sex-adjusted to the 2000 projected U.S. standard population using three age groups: under 18 years, 18-64 years, and 65 years and over.  
DATA SOURCE: Family Core component of the 2004 National Health Interview Survey.

## Behavior and Environment

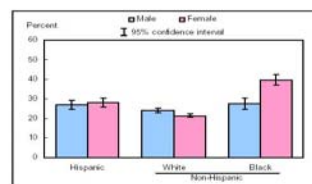
- Smoking
  - Cincinnati – 21.5% (total, men and women combined)
  - U.S. – 22.7%
  - Highest is Toledo (31%), lowest is Orange County California (13%)
- Alcohol
  - in moderation, sixes
  - alcoholism, not good

## Obesity

- some cultures (food scarcity), it's a positive
- developed nations – not very healthy
- increasingly prevalent in the U.S.
- tied with numerous health concerns
- combination of genes, environment, and personal behaviors

## Obesity in the U.S.

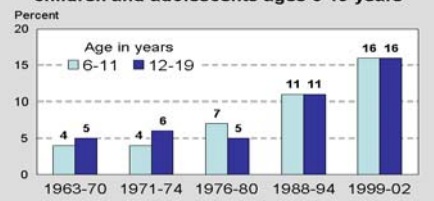
**Figure 6.3. Age-adjusted prevalence of obesity among adults aged 20 years and over, by sex and race/ethnicity: United States, 2004**



NOTES: Obesity is defined as a Body Mass Index (BMI) of 30 kg/m<sup>2</sup> or more. The measure is based on self-reported height and weight. The analyses excluded 1521 people (5.0%) with unknown height or weight. Estimates are age-adjusted to the 2000 projected U.S. standard population using five age groups: 20-24 years, 25-34 years, 35-44 years, 45-64 years, and 65 years and over.  
DATA SOURCE: Sample Adult Core component of the 2004 National Health Interview Survey.

## Overweight 6-19

**Figure 1. Prevalence of overweight among children and adolescents ages 6-19 years**



## Class Questions

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