Social Process Affecting Health and Wellness In-Case of Gondar City, Ethiopia

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**Abstract:** This paper explores finding on results from research conducted on Social process affecting Health and Wellness. In this seminar, however, vary in their definitions and concepts of Health, Wellness and social process. WHO [1] was the first to introduce a holistic definition of health as “a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity.” Social processes mean the various modes of interaction between individuals or groups including cooperation and conflict, social differentiation and integration, development, arrest and decay. Wellness is about being proactive and requires investment in elements outside the health care system. I.e. health is a state of being, whereas wellness is a process of being. The current study shows social process has an impact on health and health related issues, and positive social interaction have related with social wellness. Finally, the data were collected from the 15 samples; quantitative data used and analyzed by descriptive statics. The result shows that social process affecting Health and wellness of the participants.

**Keywords:** Health, Wellness, Social process, Social wellness.

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**Introduction**

**Health**

WHO [1] was the first to introduce a holistic definition of health as “a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity.” There are social factors, which affect health. Such as, Income and Social Status: Health status improves at each step up the income and social hierarchy. High income promotes living conditions such as safe housing and ability to buy sufficient good food.

The healthiest populations are those in societies, which are prosperous and have an equitable distribution of wealth. Social Support Networks: Support from families, friends and communities is associated with better health. Effective responses to stress and the support of family and friends seem to act as a buffer against health problems. Social Environments: Social stability and strong communities can help reduce health risks.

**Wellness**

Several authors have attempted to define and filter out major concepts around the meaning of wellness. Wellness is way of life and living in which one is always exploring, searching, finding new questions and discovering new answers, along the three primary dimensions of living: the physical, the mental, and the social. A way of life designed to enable each of us to achieve, in each of the dimensions, our maximum potential that is realistically and rationally feasible for us at any given time in our lives. There are six dimensions of wellness: physical, emotional, social, intellectual, spiritual, environmental, and occupational.

**Social Wellness**

The social dimension encourages contributing to one's environment and community. It emphasizes the interdependence between others and nature. As you travel a wellness path, you will become more aware of your importance in society as well as the impact you have on multiple environments. Wellness is much broader than health. Wellness is about being proactive and requires investment in elements outside the health-care system. I.e. health is a state of being, whereas wellness is a process of being.

**Social Process**

Social processes refer to forms of social interaction that occur repeatedly.
By social processes, we mean those ways in which individuals and groups interact and establish social relationships. There are several forms of social interaction such as cooperation, conflict, competition etc. Social process is the manner in which the relations of the members of a group, once brought together, acquire a distinctive character”.

Social processes mean the various modes of interaction between individuals or groups including cooperation and conflict, social differentiation and integration, development, arrest and decay”. The term social process refers to the repetitive form of behavior that is commonly found in social life. These fundamental processes are socialization, cooperation, conflict, competition, accommodation, acculturation and assimilation.

Literature Review

Social Wellness

Hughner&Kleine, et al [2] define wellness as the ability to carry out daily tasks, and wellness as positive vitality or wellbeing (to have health). Hettler [3] explained Social wellness as, which encompasses the degree and quality of interactions with others, the community, and nature and which includes the extent to which a person works toward supporting the community and environment in everyday actions, such as volunteer work. Social wellness is getting along with others and being comfortable and willing to express one’s feelings, needs, and opinions; supportive, fulfilling relationships (including sexual relations), and intimacy; and interaction with the social environment and contribution to one’s community [4].

Crose and colleagues et al [5] also confirm the importance of significant relationships and the quality and extent of one’s social network. Ryff and Singer et al [6] conducted epidemiological studies that stating that mortality are significantly lower among persons who are more socially integrated. Features of social support consist of the size or density of one’s social network and frequency of contact with relatives and friends. Durlak [7] includes peer acceptance, attachments/bonds with others, and social skills (communication, assertiveness, conflict resolution) as fundamental to social wellness.

Anspaugh and colleagues et al [8] also include the ability to maintain intimacy, to accept others different from you, and to cultivate a support network of caring friends and/or family members. Besides the interaction of the individual, society, and nature, social wellness includes the motivation, action, intent, and perception of interactions. Social wellness is comprised of the skills and comfort level one is able to express in the context of interacting with others, the community, and nature. In sum, social wellness is the movement toward balance, and integration of the interaction between the individual, society, and nature.

Health

Williams [9] conducted a research on a concept of health, he interviewed 70 men, women aged 60, and over, recruited from one working class estate and one middle class area of Aberdeen, he finally described health as the absence of serious, objective, socially justifiable disease. He also noticed people with a diagnosed chronic disease would be able to consider themselves as healthy if, despite this disease, they were able to carry out their usual activities. Participants in a Canadian conference entitled Social Determinants of Health across the Life span, held at York University in 2002.

Identified a similar list of social determinants of health, including income and its distribution, early life, Aboriginal status, education, employment and working conditions, food security, health care services, housing, the social safety net, social exclusion, and unemployment and employment security.

A number of studies have shown that people often describe themselves as healthy despite having chronic illness(es) and/or physical symptoms [10-11-9], implying the presence of alternative definitions of health that do not depend on the absence of illness. According to the functional abilities account (functional wellness beliefs), someone is well if they are able to carry out their usual daily tasks and activities.

Research Finding/Results

This section presents the result of the collected data obtained through questioner.
According to the age of the participants, 5 (33.3 %), 5 (33.3%), 3(20%) and 2(13.3%) of the participants were age of 19-30, 31-40, 41-50 and 51-65 years old respectively. According to Gender, 8(53.3%) of the participants were Male. Whereas, seven (46.7%) were Female. According to educational background, 8(53.3%) of the participants were university graduate. Whereas, seven (46.7%) of the participants were high school graduates.

According to Occupations, 10(66.7%) of the participants were Governmental workers, 3(20%) of the participants’ were NGO workers and the remaining two (13.3%) of the participants were Private enterprise workers. To determine the frequency and percentage of each component of health and wellness of participants, descriptive statistics was calculated and the results of the study narrated as follow: Eighty % of the participants said that they frequently check their health status; however, the other 20% does not have evidence about their health status.73.4% of the participants have no medical sign of illness.

Nevertheless, the other 26.6% participant has medical sign of illness.93.4% of participants can carry out their normal activity these days, but 6.6% cannot carry out their normal activities.66.6% of our participants said that they could do their usual tasks despite their health problems. However, the remaining 33.4% of the participants said their health problems challenge them from doing their usual tasks. From the participants 53.4% of them said their relation with others affect their health, whereas, the other 46.6% said their social relation does not influence their health.

Out of the 15 participant, 33.3% of them have strong interest in activities and life style choices, and the remaining 66.7% have no interest in life style choices, which balance their wellness in all aspects.73.4% of the participants have positive social relation but the remaining 26.6% have no positive relation with others.33.3% of the participant’s involuntary activities that benefit the community but the remaining 66.6% do not participate. Eighty% of participants said they try not to cut corners related to spending quality time with family and friends, however, 20% of participants try to cut corners related to spending quality time with family and friends. Eighty % of the Participants believe that their social wellness related with daily life performance. However, the remaining 40% of the participants were they do not relate their social wellness with daily activities.

**Discussions**

This part of the seminar focusing on discussing based on the finding on the previous data interpretation and our current finding made accordingly. Our result shows nearly all of participants can carry out their normal activity. Similarly, Hughner & Kleine, [2] define wellness as the ability to carry out daily tasks, and wellness as positive vitality or wellbeing (to have health).

This study also shows most of the participants can do their usual tasks despite their health problems, similarly functional abilities account (functional wellness beliefs), someone is well if they are able to carry out their usual daily tasks and activities. Then this idea supports this study. In the current finding most of the respondents were not actively participated in volunteer activities within social process. This study contrasting the finding of Hettler, [3] and Crose and colleagues [5] explained Social wellness as, which encompasses the degree and quality of interactions with others, the community, and nature and which includes the extent to which a person works toward supporting the community and environment in everyday actions, such as volunteer work.

Our study shows around most of the respondents answered they can carry out their daily activities even they have health problems. In line with this, Williams [9] found people with chronic illness, despite this disease; they were able to carry out their usual activities. In the current finding, most of the participants were to spending quality time with family and friends, his study in line with Crose and colleagues [5] confirm the importance of significant relationships and the quality and extent of one’s social network.

Furthermore, the Ryff and Singer [6] proved the ideas of how social integration is mandatory for social wellness and being Health on epidemiological studies that stating that mortality are significantly lower among persons who are more socially integrated. Features of social support consist of the size or density of one’s social network and frequency of contact with relatives and friends. Anspaugh and colleagues [8] also include the ability to maintain intimacy, to accept others
different from you, and to cultivate a support network of caring friends and/or family members. In the finding of this study, most of the participants believed that having a positive social relation is good for personal wellness, his study in line with Durlak [7] includes peer acceptance, attachments/bonds with others, and social skills (communication, assertiveness, conflict resolution) as fundamental to social wellness.

Besides the interaction of the individual, society, and nature, social wellness includes the motivation, action, intent, and perception of interactions. Social wellness is comprised of the skills and comfort level one is able to express in the context of interacting with others, the community, and nature. In sum, social wellness is the movement toward balance, and integration of the interaction between the individual, society, and nature.

Limitation of the Study

Our study has limited literature sources that means we have not enough information or related literatures on social process affecting health and wellness and the scope of our study is delimited because of we select participants purposely. Finally, the sample of these studies is very small so we cannot generalize our finding to general population.

Conclusion

The conclusion of this finding was based on the above study results. Most of our participants have evidence of health status, no sign of illness, carry out their normal activities and perform their usual task despite their health problem and more than half of the participant’s health influenced by the negative relation with others. This tells us, social process has influence on health and health-related issues.

Most of our participants have positive social relation and relate their social wellness with daily performance, this shows that daily activity of an individual and relation with others highly influence social wellness. Finally, Conclusion, Positive social relation, skills, performing daily activities, actively participate in voluntary activities and health strongly related with social wellness.

References


