



Health Seeking Behaviour

VTS TEACHING SESSION

STOTT AND DAVIS 1979

- ▶ The “exceptional potential” of each primary care consultation.
- ▶ Comprehensive primary care.
- ▶ Relevance for today?
- ▶ A): Management of presenting complaint.
- ▶ B): Modification of health seeking behaviour.
- ▶ C): Management of continuing problems.
- ▶ D): Opportunistic health promotion.

What is meant by modification of health seeking behaviour?

- ▶ Not wasting resources?
- ▶ Better use of resources?
- ▶ Empowering patients.
- ▶ Encouraging self reliance and reducing dependency.
- ▶ Controlling demands on the NHS.
- ▶ Supply is limited, demand (potentially) unlimited.

What is meant by opportunistic health promotion?

- ▶ Timely advice.
- ▶ Relevant to the presentation.
- ▶ Direct attention to aetiological factors.
- ▶ Evidence based.
- ▶ Any examples?
- ▶ But what about health beliefs?

Health Belief Model (Hochbaum, Rosenstock and Kegels, 1950).

- ▶ The decision to consult depends upon:
- ▶ A): The individual's general interest in health matters, which might be correlated to their personality, social class and ethnic group.
- ▶ B): How vulnerable or threatened the person feels to a particular disease
- ▶ C) The individual's estimation of the benefits of treatment weighed against the cost, risks and inconvenience.
- ▶ D): Trigger factors e.g. alarming symptoms, advice from family and friends, messages from the mass media, disruption of work and play.
- ▶ ?any examples.

Social determinants of health (Dahlgren and Whitehead 1991)

- ▶ Individual lifestyle factors (age, sex and constitutional).
- ▶ Social and community networks.
- ▶ Agriculture, food production, education, work environment, unemployment, water and sanitation, health care services, housing.
- ▶ (Encompassed by living and working conditions).
- ▶ General socio-economic, cultural and environmental conditions.

Any questions?

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- ▶ 27th September 2016.