



Determining Dimensions of Iranians' Individual Social Health: A Qualitative Approach

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Abstract

Background: Social health is important to be assessed as a dimension of health. The aim of study was to determine domains and sub-domains of individual social health of Iranians.

Methods: This study was carried out with a qualitative approach, using thematic content analysis. Twenty five experts participated in interviews, using individual semi-structured interviews between November 2010 and June 2011. This data supported with strong search.

Results: Two main areas extracted from these interviews including social support and social function. The social support domain contained seventeen sub-areas, including social support at the time of disease; disability; daily life issues, etc. And the social function as second domain contained twelve sub-areas, including: financial aids to others; emotionally aids to others; participating in social groups, etc.

Conclusion: We developed a conceptual framework for social health in the individual level in Iranian population. It makes preparations for providing a valid and reliable measurement scale for social health in next studies and evidence-based policy-making.

Keywords: Social health, Qualitative, Dimensions, Individual, Iran

Introduction

According to definition of World Health Organization, "Health" is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity (1, 2). The theme of social health may seem less familiar and is less frequently discussed and studied than physical or mental health (3). And emphasis of WHO to this domain, besides physical and mental domain, attracted more attention from sociologists, economists and health system policy makers to itself (3).

According to literature review, we found that, there are many differences in definition of social health. All of the opinions around this domain of health are categorized in three part; 1- Individual social health in addition to his/her physical and mental health; 2- Social health as social determinants of health; 3- Social health as a healthy society (4).

In this study we focused on first part. For this aim, a representative definition might describe social health as "that dimension of an individual's well-

being that concerns how he gets along with other people, how other people react to him, and how he interacts with social institutions and social mores and vice versa” (5).

This study has been conducted to extract domains and sub-domains of Iranians' social health for future evidence-based policy making, specially, implementation of promotive social health interventions.

Materials and Methods

This project is part of a national program of social health indicators assessment of Iranian population which has been held by Mental and Social Health, Addiction Department.

We chose a qualitative approach with content analysis method to extract domains and sub-domains of social health to develop a conceptual framework. In order to developing this framework, we made an expert panel to determine participants of this study. Our steering scientific committee selected our participants purposively from different settings, based on the level of their interest and expertise and their influence in this field. Consequently we made a semi- structured interview with 25 experts.

We designed five open -ended questions for qualitative semi-structured interview. The interviews were developed by three educated interviewer, expert in social science, who all had extensive experience in collecting qualitative data. Although data saturation, occurred after 20 in depth interviews, a further five interviews, were carried out to validate the saturation. All interviews were recorded and transcribed verbatim. Each transcribed interview was initially read thoroughly and character notes were taken to bring out the character of the text, in accordance with qualitative thematic content analysis (6, 7).

Everything related to social health in individual level was extracted to form a coherent text. We wrote the notes and all transcripts were read and re-read in order to detect all facets of the content, based on the method of open coding. This initial coding resulted in sub-categories which, later in

the process, were merged into categories. Then the categories were classified under the general themes that had been identified. For validating the analysis, the science steering committee was involved in the whole process.

Results

Twenty five interviews were conducted with participants. Qualitative analysis of interviews shows that there are two main axes for individual social health, nominated as “social support” and “social functions”. Figure 1 displays individual social health situation as a component of health and its interaction with other components of health, such as physical and mental health.

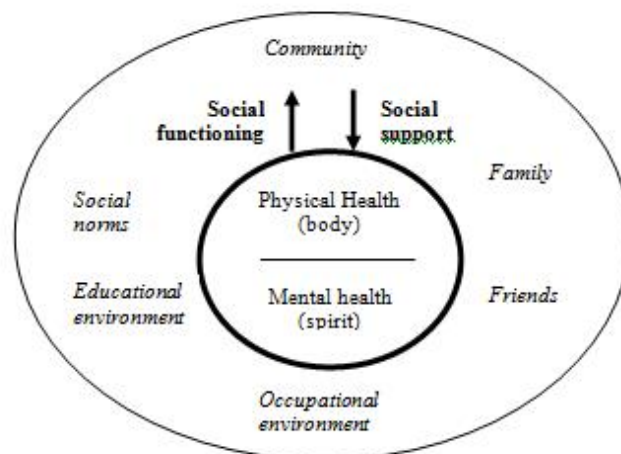


Fig. 1: Individual social health situation, as a component of health

Figure 2 displays the whole sub-domains of social health, extracted from qualitative analysis.

Two main areas extracted from these interviews including social support and social function. The social support domain contained seventeen sub-areas, including social support at the time of: 1- disease 2- disability 3- daily life issues 4- death of a family member or a friend 5- marriage 6- emotional issues 7- job seeking 8- income and social support for 9- access to entertainment facilities 10- security against violence 11- expressing love 12- moral and spiritual promotion 13- Expression of

friendliness and affection 14-acceptance of an individual as a society member 15-individual respect 16- individual appreciation 17-supporting through law. And The social function as second domain contained twelve sub-areas, including: 1- financial aids to others 2-emotionally aids to others 3-participating in social groups 4- contributing

in making social decisions 5- dealing with family members 6- dealing with friends 7-caring patients 8-participating in daily chores 9- environmental protection 10-respecting to social norms 11- participating in charity program 12- Trusting others.

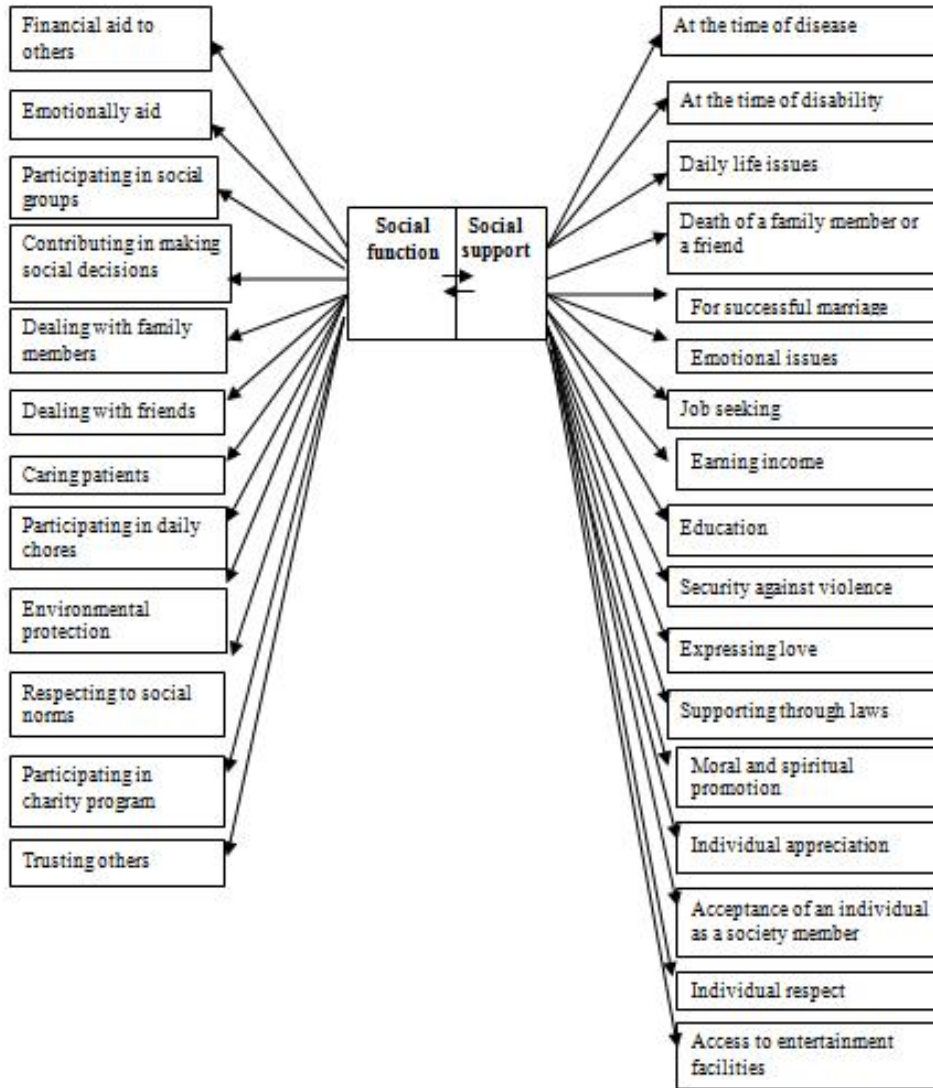


Fig.2: Domains and sub-domains of social health.

Discussion

Our goal in this study was to create a conceptual framework of social health in individual level for Iranian people. We described this framework in

detail. This conceptual framework emerged from interviewing with experts and investigating previous studies in this field. It should be noticed that individual social health has been defined as a com-

plex construct in terms of conceptualization and measurement (8, 9).

Theories of social health have used different conceptual models, based on different disciplines, posing a special challenge in defining sub-domains. Primary components include social role participation, social network quality, social integration and interpersonal communication (10-14). Keyes and researchers assessed the social health in individual level, and described it as a quality of individual performance in community and quality of his or her relationship with the other people and family and social groups who is a member of them (15-19).

It is important to note the differences in our study's findings from those found in other studies. There were a number of sub-domains, extracted from interviews, less emphasized in other studies, such as; support for successful marriage; Support through law; moral and spiritual promotion; Living environment protection; security against violence. There was also a weakness, that some of more experienced experts were not prepared to participate in the study according to their work engagement and therefore under-represented.

With more focusing on concept of health and the impact of loss of health in people lives, specially, in attention to many differences in policies and possibilities in different communities in health area, that is a major need to create a framework to assess social health besides physical health and mental health. This study is first step for conceptualization of individual social health in Iran. The next steps are to design an instrument to measure individual social health, to determine priorities, to conduct evidence-based interventions and finally evaluation of interventions.

Ethical considerations

Ethical issues (Including plagiarism, Informed Consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc) have been completely observed by the authors.

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