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# A Comprehensive Healthcare Model: Dimension, Status, and Approach



#### Lung-Tan Lu

Department of Management, Fo Guang University, Taiwan

**ABSTRACT**: According to the WHO definition, health as a state of physical, mental and social integrity, not just the absence of disease, the truly healthy (first state) and patients (third state) are less than 25%, and 75% of the people are in the Sub-health state (second state). This paper distinguishes a fourth state: recovering, outside the three statuses. When the patient in the second state enters the fourth state and is handled properly, he can move to the first state, otherwise, if the patient is not handled properly, he will return to the second state. We propose a Comprehensive Healthcare Model to integrate the three parts: (1) Physical, Mental, Spiritual and Social Dimensions, (2) Western Medicine, Eastern Medicine and Folklore Therapy, Religions and Beliefs, Sports and Martial Arts Approaches, and (3) Health, Sub-health, Illness, and Recovering Status for the further research..

KEYWORDS: healthcare, spiritual, medicine, religion, sports

#### I. INTRODUCTION

In 1948, the World Health Organization (WHO) defined health as "not merely the absence of disease or infirmity, but the physical, mental and social wellbeing of the body". In addition to maintaining good physical condition and not getting sick, mental, emotional and social aspects are equally important to health (WHO, 2022). In 1986, the World Health Organization (WHO) defined health promotion as "the process of enabling people to increase control over their own health and to promote their health" at the first Global Conference on Health Promotion in Ottawa of enabling people to increase control over, and to improve, their health". This definition emphasizes health promotion as a process of empowering citizens to improve their health autonomously.

In the mean time, five action plans for the implementation of health promotion also be formulated. These included: (1) formulating healthy public policies, (2) creating a supportive environment for health, (3) strengthening community actions, (4) developing personal skills and (5) adjusting the direction of health services. In 1998, the World Health Organization (WHO) stated that "health is not merely the elimination of disease or infirmity, but a state of complete physical, mental, spiritual and social health". This definition reaffirmed that physical, mental, spiritual and social are equally important to health (WHO, 2011).

The Helsinki Statement (WHO, 2013b), emphasizing that health in all policies, including: (1) the need and priorities for building cross-sectoral health policies, (2) Plan action plans, (3) identify supporting structures and processes, (4) ensure monitoring, evaluation, and (5) people and capacity development issued by the 2013 Global Conference on Health Promotion (WHO, 2014). The Shanghai Declaration emphasized that good governance is crucial to health, and that cities and communities are key places to achieve health, which can be empowered through health awareness and empowerment. ) to achieve equality for all citizens after the 2016 Global Conference on Health Promotion held in Shanghai (WHO, 2016).

The above definitions and declarations emphasize the three basic spirits of health promotion, namely, enable, advocate, and mediate, which can be used as the overall thinking framework for health promotion. The definition of health has been as "not only the elimination of disease or infirmity, but the state of complete physical, mental and social health" by WHO since 1948 (WHO 2016). The whole person are only the body and mind, and without spirit in this definition.

In 1983, representatives of 22 countries in the 36th World Health Assembly formally proposed that the spiritual dimension should be included in the definition of health. The amended definition of health was: Health is a dynamic state of complete physical, mental, spiritual and social wellbeing and not merely the absence of disease or infirmity. However, in the working group of the 52nd World Health Assembly in 1999, the participants could not reach an agreement on wording of "mental" and "spiritual". In the end, this definition was not handed into the 52nd Assembly for discussion (Simone and Parati, 2001).

#### II. PHYSICAL, MENTAL, SPIRITUAL AND SOCIAL DIMENSIONS

Most people believe that the human body without disease is healthy since ancient times. This dualism of health has been slowly but surely replaced by the concept of "Whole Person Wellness" from the end of the twentieth century. The Interactionism advocates that human body and mind can influence each other. For example, when a person's body is injured by an impact, the psychological experience will produce a "pain" feeling; then, the "pain" experience will affect the person's future behavior and avoid the situation of bodily injury (Hodapp, 1999).

The Interactionism believes that human life is composed of body, psychology and spirit. Meaning, so that the three are balanced and harmonious, people can maintain health and develop in an all-round way. Human physical and mental factors interact with each other. Both physical illness and psychological discomfort should be adjusted from a holistic perspective. The Interactionism focuses on the following health issues. Firstly, health should be seen as integration of physical, spiritual, social and mental health. Secondly, people must take main responsibility for their own health or illness. Thirdly, practitioners are obliged to act as teachers to teach or help people in developing attitudes, dispositions, beliefs, habits and practices in order to promote wellbeing. Fourthly, healthcare delivery systems should be changed to deal with the behavioral, social, and environmental sources of disease. Finally, personal healthcare services should focus on natural or non-invasive techniques in order to promote health. (Twenge, Baumeister, Tice, & Stucke, 2001).

In the early 1990s, Professor Chen was inspired by traditional Chinese fitness methods such as vegetarianism, Chinese qigong, and worshipping Buddha, and proposed and created a "whole-person health counseling model", which was used to counsel cancer patients. The model The model was initially mainly used for the counseling of chronically ill patients and has been used in Hong Kong for 20 years (Chen, 2022). Western culture is based on Christianity, and most people are familiar with the word of "spirituality". However, in the non-Christian world, it is quite difficult for most people to perceive its meaning. Therefore, wholeperson healthcare including spirituality is an imported concept based on the Western Christian world. The concept of "spiritual" must be integrated and modified according to the local cultural and religious characteristics, in order to practice wholeperson healthcare with local significance. Understanding the spiritual dimension to imply a phenomenon that is not material in nature but belongs to the realm of ideas, beliefs, values and ethics that have arisen in the minds and conscience of human beings, particularly ennobling ideas. (WHO, 1984).

It can be seen that the concept of holistic health includes the following categories. Firstly, physical health refers to the normal functioning of the body's organs and systems, with adequate functions to meet the needs of daily life. Secondly, mental health refers to Ability to think evidently and thoroughly, state one's emotions, and deal with stress, sadness and anxiety. Thirdly, spiritual health refers to have self-belief, three views of harmony with society, and the ability to love and be loved, and having proper sympathy. Finally, social health refers to the ability to preserve harmonious relationships with others and to fit happily into the social system (Clark, Drain and Malone, 2003).

The Hierarchy of Needs Theory was put forward by Maslow in 1943 to describe how human needs motivation progresses in terms of "physiology", "safety", "belonging" and "love", "self-esteem", "self-actualization" and "self-transcendence". He believes that human needs start from low-level needs (physiology) and gradually progress to high-level needs (such as selftranscendence). The hierarchy of needs includes: (1) Physiological needs, such as food, water, sleep and other necessities to maintain good health. (2) Safety needs include: personal safety, life stability, physical health and self-security. (3) Love and belonging needs (also known as social needs), such as love and friendship needs. (4) esteem needs, such as achievement, reputation and status. (5) Self-actualization needs (need for self-actualization), such as self-actualization, development of potential, etc. These five needs may appear 2-5 at the same time, not as Maslow said that the upper class can be satisfied only after the lowest class needs to be satisfied. Physical and mental health is to include (1) physiological needs, (2) safety needs, and

(3) love and belonging needs, also known as social needs) and (4) esteem needs (Maslow, 1943).

# III. WESTERN MEDICINE, EASTERN MEDICINE AND FOLKLORE THERAPY, RELIGIONS AND BELIEFS, SPORTS AND MARTIAL ARTS APPROACHES

Western medicine, which forms the basis of many of the world's modern health systems, dates back thousands of years. While Greek mythology held that health and disease were determined by the gods, the ancient Greeks were the first to observe the body through biological means. They study health by looking at four body fluids or "fluids" - blood, black bile, yellow bile and phlegm. Western medicine is an emerging modern medical scientific theoretical system based on anatomy, biology and modern science and technology. Western medicine focus on how medical professionals, such as doctors and nurses, use medical procedures such as drugs, radiation, and surgery to treat diseases. Western medicine makes a diagnosis based on a person's individual symptoms. Western medicine has preventive aspects of diet and exercise, but usually focuses on the use of drugs. Most of the world's modern

healthcare systems are based on Western medicine. Western medicine is performed by physicians with formal degrees and allied health professionals. Until the 21st century, Western medicine remained largely based on principles established by the ancient Greeks. As Western medicine has evolved over the past 3,000 years, the key foundations of medical practice have remained the same. These include: (1) inquiries and examinations of the body and its symptoms, (2) the use of clinically validated scientific evidence to diagnose disease, and (3) health is a human right to be protected (Li, 1996).

Dr Yang Dingyi, as a MD, found that there are many diseases that modern Western medicine cannot handle by his 24 years of medical practice. For example, chronic diseases are quite difficult to treat well by Western medicine. In the past, Western medicine used to take medicine to suppress the symptoms as soon as they had. Instead of solving them from the origin, they focus on solving the symptoms. Therefore, patients with chronic diseases would take medicines for all their lifetime. Dr Yang Dingyi believes that we should not do nothing until we are sick. We should incorporate our body and mind to do a whole preventive medicine. He also believes that people are not to be treated as machines, but should be viewed as a whole person (Yang, 2012).

Many people use elements of Eastern medicine as their way of improving their health. Eastern medicine includes traditional Chinese medicine, Indian Ayurvedic healing techniques, and other traditional medicine in Asia. Chinese medicine can be traced back to more than 2,000 years ago. Chinese medicine focuses on the invisible meridians in the human body to achieve healthy balance. Chinese medicine mainly includes: (1) Acupuncture, (2) Chinese herbal medicine, (3) Oriental nutrition and dietary therapy practices, (4) Tuina and (5) Tai Chi and Qigong.

Oriental medicine places great emphasis on prevention, Oriental medicine diagnoses diseases by examining the entire body, focusing on the overall health being out of balance, and the treatment of Oriental medicine is also more comprehensive and balanced in physical health rather than individual organs (Taipei Economic and Cultural Center in India ,2020). Ayurvedic healing techniques in India focus on the balance of the three elemental energies (fire, water and air). Ayurveda patients recover their health through dietary changes, massage, herbal medicine and meditation. Oriental medicine places great emphasis on prevention, Oriental medicine diagnoses diseases by examining the entire body, focusing on the overall health being out of balance, and the treatment of Oriental medicine is also more comprehensive and balanced in physical health rather than individual organs (Lin, 2013).

Chinese medicine has been used in the medical system for the prevention, diagnosis and treatment of diseases for thousands of years. Chinese medicine includes acupuncture, diet, herbal remedies, meditation, martial arts and massage. The purpose of Chinese medicine is to maintain or restore balance and harmony between the body's natural opposing forces of yin and yang, which when out of balance can block qi and cause disease. It believes that qi (the vital energy of the body) flows along the meridians (channels) of the body, keeping the spirit, mind and body in balance and achieving a healthy state of the whole person (Lin, 2013).

Complementary and alternative medicine (CAM), as defined by the National Institutes of Health, refers to "a diverse set of medical and health care systems, practices, and products not generally considered part of modern Western medicine. The boundaries between CAM and conventional medicine are not absolute, and specific CAM practices may become widely accepted medicine with formal research findings. According to the 2002 health census conducted by the US National Center for Health Statistics, 62% of adults over the age of 18 in the United States use complementary and alternative medicine, and the proportion of cancer patients in particular as high as 70%. Complementary treatments in some Complementary and Alternative Medicine (CAM) and Western medical treatments can have complementary results, such as the use of acupuncture to help patients relieve pain. Alternative medicine in Complementary and Alternative Medicine (CAM) refers to treatments used to replace Western medicine. Integrative Chinese and Western medicine refers to the combination of Western medicine and Chinese medicine in complementary and alternative medicine (CAM) that has been shown to be safe and effective.

Complementary and Alternative Medicine (CAM) can be divided into five categories on the website of the National Institutes of Health (NIH). Firstly, natural products: refers to the intake of various botanicals, vitamins, minerals, probiotics and other natural products. In the NIH definition, it is specifically stated that general dietary supplements sold over the counter are not considered complementary and alternative medicine (CAM) products (NIH, 2005). Secondly, psychosomatic Medicine: Focusing on the interaction between the brain, mind, body and behavior, attempts to use the mind to influence physical function to promote health, which includes biofeedback, meditation, relaxation, group support, yoga, acupuncture, hypnosis, qigong and tai-chi and so on. Thirdly, body-based manipulations: massages including physical therapy and chiropractic manipulations. The main focus is on body structure and body-based manipulative systems, including bones, joints, soft tissues, circulatory and lymphatic systems. There are two common treatment methods, one is chiropractic, chiropractic, osteopathy, and the other is massage therapy.

Fourthly, energy medicine: It can be divided into two categories, one is bio-electromagnetic applications, including EEG, ECG, diathermy, energy medicine, laser, and radiofrequency surgery. The second is the impact of different energy fields on health, such as magnetic therapy and light therapy in electromagnetic fields, or biological fields called hypothetical energy fields, such as

qigong, reiki, and touch therapy. These are all about vitality. Finally, whole medical system: Existing in different cultures and traditions, with a complete theoretical system and practical experience, such as Indian Ayurveda medicine, traditional Chinese medicine, Tibetan medicine, and modern homeopathy and natural treatment (Chien, 2021).

Although the American Medical College will offer courses in alternative therapy and award a certificate of completion. However, alternative medicine is still subject to controversy in the Western medical community in other countries. Medicine has moved towards evidence-based medicine in recent decades, and any effective treatment requires large-scale research data before it can be used. But most alternative medicines do not present scientific research data to prove the effectiveness of the treatment. The current alternative therapies mostly use "witness" methods to prove their therapeutic effects, which do not conform to the norms of Western medicine (Padit, Deepti, Srivastava, Shukla, Goyal, and Behari, 2016).

# IV. HEALTH, SUB-HEALTH, ILLNESS, AND RECOVERING STATUS

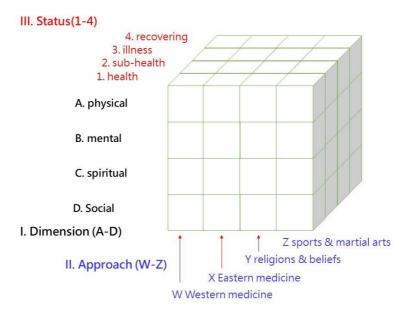
When the International Classification of Impairments, Disabilities, and Handicaps (ICIDH) led by British physician Wood was proposed, the main research team of WHO was. Based on the principle of taxonomy, he believes that a good classification system needs to be extended and mutually exclusive. The first version of ICIDH is based on the concept of disease taxonomy and constructs the entire model under the Disease Classification Dictionary (ICD 9), which is considered to be only a medical model (WHO, 1980). In the framework of the International Classification of Functioning, Disability and Health (ICF), the most important breakthrough is to change the measurement of disability from one-dimensional measurement to multi-dimensional data collection and measurement. , the disorder concept is covered in three main areas, body systems, functional activity, and participation. The first level of active pathology refers to our body's use of all immune and internal energy to fight against the defense mechanisms adopted by the body when it encounters external bacteria, trauma, etc., which is the so-called disease process (Nagi, 1965). The second level is the abnormal state of psychosocial, body system and organization, which is called damage. The third concept, functional limitations, refers to physical impairments that limit an individual's ability to perform activities of daily living and perform the individual's general roles and tasks. These roles include roles within the family, peer group roles, community, work and other interpersonal interactions or behaviors related to self-care. He believes that the so-called disorder refers to the type of behavior that involves physical, psychological long-term or persistent impairment, and limits the functioning of the individual (Wang, 2010).

The International Classification of Health, Functioning and Disability (ICF) is used to describe people's health, function or physical disability. It is a classification system, an assessment tool, a common language and a common basis for the world, and is applicable to different countries, A set of evaluation systems for different races, different professions, and different service areas. The International Classification of Health, Function and Disability (ICF), as a classification system for the state of mental and physical disabilities, is a collection of overall information on the health status and care services of people with disabilities after evaluation by a clinical professional team. The ICF scales are coded to describe physical function (codes begin with b), body structure (s), activity and participation (d), and environmental factors (e). The classification method is composed of four English codes and numbers, and the numbers represent the chapter codes of the ICF (Wang, and Yen, 2011).

The WHO defines health as a state of physical, mental and social integrity, not just the absence of disease. According to this definition, after statistics, the truly healthy (first state) and patients (third state) are less than 2/3, and more than 1/3 of the population is in the middle state between healthy and patients (third state). The health organization calls it the "third state", also known as the "sub-health" state. According to the survey results of the World Health Organization, only 5% of the people in the world are really healthy (the first state), only 20% of the people who have been checked and diagnosed by a doctor are patients (third state), and 75% of the people are in the Sub-health state (second state).

Sub-health can be divided into (1) physical sub-health, (2) mental sub-health, (3) spiritual sub-health, and (4) social sub-health. Firstly, body is on sub-healthy status, due to improper diet, lacking of exercise, weak functions in all aspects of the body, and prone to diseases. Secondly, mental sub-health originates from pressure of life, work and study, and resulting in abnormal behavior and unhappiness. Thirdly, spiritual sub-health would result in the mind and conscience, and the noble concepts belonging to concepts, beliefs, values and ethics, in which have not reached the healthy level. Finally, social sub-healthy, indifferent to the external environment and has no enthusiasm for life and society, making oneself more and more closed in body and mind, and the scope of activities is more and more narrow. If the sub-health statuses are handled properly, the body can be transformed from the third state to the first state; otherwise, it will enter the second state. This paper also distinguishes a fourth state, "recovery", under these three states. When the patient in the second state enters the fourth state and is handled properly, he can move to the first state, otherwise, if the patient is not handled properly, he will return to the second state. In the fourth state, methods such as oriental medicine adjuvant therapy and exercise are often used.

Based on the above discussion, this paper proposes an integrated whole-person health model as follows.



**Chart 1 A Comprehensive Healthcare Model** 

#### **V. CONCLUSIONS**

The definition of health has been as "not only the elimination of disease or infirmity, but the state of complete physical, mental and social health" by WHO since 1948 (WHO 2016). The whole person are only the body and mind, and without spirit in this definition and could be changed in the near future. The Interactionism believes that human life is composed of body, psychology and spirit. People can maintain health and develop in an all-round way as the three dimensions are balanced.

According to the WHO definition, health as a state of physical, mental and social integrity, not just the absence of disease, the truly healthy (first state) and patients (third state) are less than 25%, and 75% of the people are in the Sub-health state (second state). This paper distinguishes a fourth state: recovering, outside the three statuses. When the patient in the second state enters the fourth state and is handled properly, he can move to the first state, otherwise, if the patient is not handled properly, he will return to the second state. We propose a Comprehensive Healthcare Model to integrate the three parts: (1) Physical, Mental, Spiritual and Social Dimensions, (2) Western Medicine, Eastern Medicine and Folklore Therapy, Religions and Beliefs, Sports and Martial Arts Approaches, and (3) Health, Sub-health, Illness, and Recovering Status for the further research.

### **REFERENCES**

- 1) Chen, L.M. (2022) Integrative: Body, Mind, Spirit, source: <a href="https://learning.hku.hk/ibms/home/about/what-is-ibms/">https://learning.hku.hk/ibms/home/about/what-is-ibms/</a>
- 2) Chien, T. J. (2021) A Balance Between Complementary and Alternative Medicine (CAM) and Mainstream Medicine, Taipei City Med J 2021; 18(4): 385-392.
- 3) Clark, P. A., Drain, M. and Malone, M. P. (2003) Addressing patients' emotional and spiritual needs, Joint Commission Journal on Quality and Safety, 29: 659-70.
- 4) G de Simone, and G Parati (2001) Imaging techniques for non-invasive assessment of coronary heart disease in hypertension: value of an integrated approach, Journal of Hypertens, 19(4):679-82.
- 5) Hodapp, R. M. (1999) Indirect Effects of Genetic Mental Retardation Disorders: Theoretical and Methodological Issues, International Review of Research in Mental Retardation, 22:27–50.
- 6) Li, J.W. (1996) East-West Medical Exchange and Integration of Chinese and Western Medicine, Journal of Chinese Medicine, 7(4):211-216.
- 7) Lin, Z.P. (2013) The Holistic Perspective: Chinese Medical Civilization and Spiritual Cultivation, Journal of Religious Philosophy, 64: 71-80.
- 8) Maslow, A.H. (1943) A theory of human motivation, Psychological Review, 50(4): 370–96.
- 9) Nagi, S. Z. (1965) Some conceptual issues in disability and rehabilitation., In Sussman, Marvin (Ed.), Sociology and Rehabilitation, 100-113, Washington D.
- 10) NIH (2005) Complementary and Alternative Medicine in the United States, source:

https://www.ncbi.nlm.nih.gov/books/NBK83799/

- 11) Padit, A. K., Deepti, V., Srivastava, A. K., Shukla, G., Goyal, V. and Behari, M. (2016) Complementary and alternative medicine in Indian Parkinson's disease patients, Journal of Traditional and Complementary Medicine, 6(4): 377-382.
- 12) Taipei Economic and Cultural Center in India (2020) Introduction to Ayurvedic Medicine Industry in India, Chinese Natural Medicine Research, 3(2): 27-31.
- 13) Twenge, J. M., Baumeister, R. F., Tice, D. M., & Stucke, T. S. (2001). If you can't join them, beat them: Effects of social exclusion on aggressive behavior. Journal of Personality and Social Psychology, 81(6): 1058–1069.
- 14) Wang, K. Y. and Yen, C. F. (2011) The Evaluation Consistency of Professionals for People with Disabilities: International Classification of Functioning, Disability and Health Practical Applications, Journal of Disability Research, 9(4): 207-227. 15) Wang, K.Y. (2010) The Analysis of Nagi's Concept on Functional Limitation and Its Implication on ICF Coding System, Journal of Disability Research, 8(1): 1-17.
- 15) WHO (1980) International classification of impairments, disabilities, and handicaps: a manual of classification relating to the consequences of disease, published in accordance with resolution WHA29.35 of the Twenty-ninth World Health Assembly, May 1976. World Health Organization, source: <a href="https://apps.who.int/iris/handle/10665/41003">https://apps.who.int/iris/handle/10665/41003</a>
- 16) WHO (1984) Health promotion: a discussion document on the concept and principles: summary report of the Working Group on Concept and Principles of Health Promotion, Copenhagen, 9-13 July 1984. Source: <a href="https://apps.who.int/iris/handle/10665/107835">https://apps.who.int/iris/handle/10665/107835</a>
- 17) WHO (2011) Presentation: "Designing the Road to Better Health and Well-Being in Europe" at the 14th European Health Forum Gastein, source:
  - http://www.euro.who.int/ data/assets/pdf file/0003/152184/RD Dastein speech wellbeing 07Oct.pd
- 18) WHO (2013) Health in all policies: Helsinki statement. Framework for country action, source: https://www.who.int/publications/i/item/9789241506908
- 19) WHO (2016) Shanghai Declaration on promoting health in the 2030 Agenda for Sustainable Development, source: <a href="https://www.who.int/publications/i/item/WHO-NMH-PND-17.5">https://www.who.int/publications/i/item/WHO-NMH-PND-17.5</a>
- 20) WHO (2022) Health and Well-Being, source: <a href="https://www.who.int/data/gho/data/major-themes/health-and-well-being">https://www.who.int/data/gho/data/major-themes/health-and-well-being</a>
- 21) Yang, D. I. (2012) Returning to the energy of the heart Comprehensive medicine for body and mind Authentic Medicine, Zan World, 97: 107-109.



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