

Blessed Health - A Journey From “I-Health” to “We-Health”

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Abstract— Health is a fundamental feature of human beings. Health is not just an interaction with health providers in order to arrive at a diagnosis and a treatment process. Health is a summation of several elements, including life style, food habits, confidence, and emotional interactions with others. While the traditional I-Health (health of an isolated individual) model has its limitations, We-Health (Community based informed health) has tremendous potential due to its strength and spread. The thought of one’s unhealthiness leads to physical and psychological detriment. Individuals throughout the world have varied heights, complexions, personalities, beliefs, and diverse ways of living. In the same way, their health and vital numbers are relative to their personal, physical, psychological, and environmental characteristics. Blessed health is an initiative to bring the awareness of ‘Informed Health’, referring to the relative health of individuals.

Keywords – Blessed; Informed; Health; Community; We-Health.

I. INTRODUCTION

Blessed health is a dynamic model of health, where the health of communities is targeted, instead of individualized health assessments. Health becomes a dynamic practice in this “We-Health” model, compared to that of a static “I-Health” model. This new paradigm will effectively combat the current issues of depression, mental health, drug dependency, drug addiction, and disease management solely by lifelong medications.

II. CURRENT SCENARIO- “I HEALTH”

The current health scenario is a static model, where individuals get their numbers checked up. These numbers include blood pressure, cholesterol, and other values, which are then compared against national averages and standards. Individual treatments and prescriptions proceed, resulting in the perceived health of an individual. In most cases, health care providers are under pressure to map the deviations in the numbers to some health condition, resulting in a mandatory prescription of medications. The medications may result in adverse drug reactions [1].

III. “I-HEALTH” PARADIGM

The current “I-Health” paradigm depicted in Fig 1, can be explained as follows:

1. Input – The paradigm begins with an individual’s health check-up and recording of associated numbers, such as vitals, counts, etc.
2. Process – Next, numbers are compared to the “standard” or “average” data. This leads to stress and fear in the patient of possible health conditions. Then, “common” or “standard” procedures/treatments ensue.
3. Output/ Result – “I-Health” which is the perceived health of an individual, resulting in a lack of hope in becoming disease-free within their life time. Individuals feel pressured to continue managing diseases or medical conditions solely through prescription drugs.

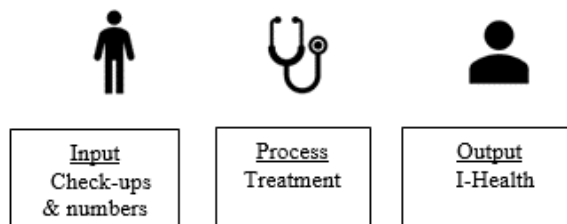


Figure 1. I-Health Paradigm

IV. CHALLENGES IN “I-HEALTH”

Comparison of an individual’s health numbers to standards will result in erroneous conclusions, since the comparison is not holistic. An individual’s medical condition is assessed by symptoms, causes, medical history, and hereditary aspects at the time of assessment. This will not take into consideration an individual’s physical state, psychological state, lifestyle, and environment. This kind of assessment will result in a diagnosis, based on an approximation, due to the deviation from the “norm”. Sometimes, in this model, individuals aren’t fully aware of all the possible treatment options and therefore obligated to continue the ongoing treatment.

V. WHY “BLESSED HEALTH”- A DYNAMIC MODEL IS PREFERRED

Health is a universal cause. Health is everyone’s responsibility and a fundamental right. Health is not just the right of only affluent populations. It is a community effort [2]. Though some work has been done in this area, most of

it relates to communication aspects of health rather than community-based health [3]. This community-based health is a preferred dynamic model, called “Blessed Health” which is a paradigm shift from “I-Health”, and is a journey towards “We-Health”.

VI. “WE-HEALTH” SCENARIO

The proposed “We-Health” paradigm depicted in Fig 2 can be explained as follows:

1. **Input** – In this model, individual’s health assessment is mapped to the health conditions of the individual. Here, symptoms are approached in a holistic way considering the physical, psychological, lifestyle and environmental factors. Informed health conditions of family, community and surroundings help to interpret health conditions in the right way without fear of numbers. Here every effort is made to avoid intrusions, negative interpretations, and unnecessary engagement. Positivity about individual’s current health condition is a natural blessing here.
2. **Process** – Health is nature’s gift. Inclination towards health does not cause fear or stress and it creates a strength climate. Strength brings confidence. As a result, one will naturally be motivated towards spreading the positive health around.
3. **Output/ Result** – The result of a cohesive process is a healthy community consisting of the individual, one’s family, extended family, friends, and the whole surrounding ecosystem. The “Spread” includes nurturing, mentoring and adapting ways, to analyze and improve health of everyone in the ecosystem.

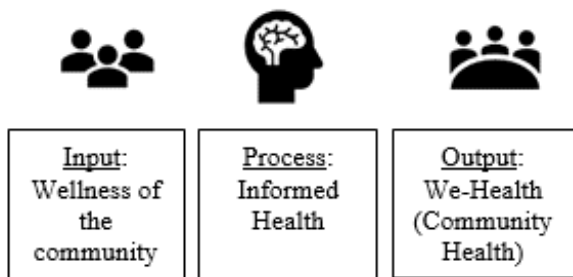


Figure 2. We-Health Paradigm

Viewing health as a dynamic model promotes operational health. In this model, health is everyone’s moral and practical responsibility, that is shared amongst communities. A simple protocol can be adopted to achieve this.

1. Owning one’s health.
2. Being accountable.
3. Being mindful.
4. Knowing one’s food.

5. Know how food comes to one’s plate. One’s food plate should not be a detriment to another life in the ecosystem [4].
6. Engage and motivate community.
7. Educate self and surroundings.
8. Live cohesively with the environment to create a healthy ecosystem.

VII. ANCIENT SUCCESSFUL MODELS OF COMMUNITY HEALTH (WE-HEATH)

There are numerous references in Ayurveda, a system of medicine practiced by ancient Indians emphasizing the importance of community-based health.

An excerpt from these ancient texts, refers to health as collaborative effort of teamwork, strength, blessing, and peace, as described below: “One shall strive to protect one’s own body, mind, and energies. Then one shall protect and care for their families, communities and surroundings. Then one shall protect the totality of ecosystem”.

In the ancient Sanskrit texts, health is perceived as the combination of 5 layers of health of an Individual. The medicines that one takes into the body only can cure one-fifth of the totality of health, which is at the physical level. To understand a symptom and to have blessed health, one should work on acquiring all the 5 layers of health.

The five layers of health are described as follows: Every human being has 5 sheaths or layers for blessed health that can contribute to total or holistic health. Those layers are:

1. “Physical” health, which is related to the physical body nourishing with food and water.
2. “Breathing” health, which is the life force related to breathing and stress preventing techniques.
3. “Mind” health, which cultivates the inner and outer energies related mental and emotional aspects.
4. “Intellectual” health, which is related to one’s own intellect, through logic, decisioning, thinking, interacting, and balancing.
5. “Blessed” health, which is a totality of health where one is ready to extend help to others in the community and achieve strength and spread.

These five layers of health achieved with the following simple protocol:

1. Eat plant-based food, feel well, and work well.
2. Control your breath and enhance vital energies with good habits and work ethics, which in turn reduces stress.
3. Clear your mind with meditation and positive interactions to channel mental and emotional energies for positive health and progress.
4. Acquire knowledge, interact with community, and make informed decisions with mindfulness.
5. Become a vital leader in spreading health and happiness.

VIII. CONCLUSION

Health in general is perceived and understood like an ancient story of elephant and 5 blind men. Once five blind men approached an elephant for the first time and wanted to figure out what “the object” is. Each blind man touched a different part of the elephant and perceived it differently. The first one thought it to be a rope by touching the tail. The second one perceived it to be a mountain by touching the body of the elephant. The next one thought it to be a stick by feeling the tusk. Yet another one thought it to be a pillar, and so on. This is known as the theory of blindfold predictions. All of them may have different perceptions, but the truth is beyond perceptions. In a comparable way, one should understand the concept of health in its totality and essence. Assessing health at physical level only can contribute to one fifth of the total of health.

In “We-Health” model, health is a summed-up equation of health at all levels including the physical, life-force, mind, intellectual, and interactional. All of it adds up to the totality of health referred to in this article as “We-Health” or

“Blessed Health”. In this model, there is no room for depression and hence other prevalent common mental health issues can be prevented.

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REFERENCES

- [1] G. Null, C. Dean, M. Feldman, D. Rasio, and D. Smith, “Death by Medicine”, 2004.
- [2] D. Blumenthal and R. DiClemente, *Community-Based Health Research: Issues and Methods*. New York: Springer Publishing Company. October 2003. 27 ISBN: 0-8261-2025-3.
- [3] R. Schiavo, Editor-In-Chief, “Importance of community-based communication for health and social change”, *Journal of Communication in Healthcare*, Vol 9, No. 1, 2016
- [4] W. Harris, *The scientific basis of vegetarianism*, Hawaii Health Publishers, 1995, ISBN-13: 978-0964653801.