Matai Williamo Health and Social Determinants

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Case Analysis

Cardiovascular disease is a significant cause of death in Australia. Socioeconomic status is cited as the main reason for poor health outcomes. Studies reveal that cardiac disease will be the leading factor in death by the years of two thousand and thirty. Efforts are, therefore, to continue intervening in the problem along with the elimination of individual risk factors. The case of Matai unfolded the real picture of social, cultural and community influences on his cardiac health. The social determinants of income, transport and unemployment place his life in a chronic condition. He tries to do his best to recover from heart disease but is engulfed by the social standards and high norms of his community. Regardless of the advancement in the health sector, inequalities persist in Samoa's society.

The cardiac problems are continuously affecting the community of Samoa along with mortality and morbidity of the individual. Those patients with less commercial facilities face acute issues in diagnosing their disease. Staff and clinical doctors are not cooperating with individuals who have a small amount of money. The risk factor that is attached to the cardiac issue is the development of interventions and technical testing, which might reduce the alarming problem and can be used as a preventive measure (Betancourt, 2016). Around thirty thousand of the cases reveal that in different states, there is an increased rate of cardiac patients. However, studies show that modifications in diabetes, smoking, hypertension, socio-psycho issues, physical activity and the consumption of vegetables can efficiently increase the health of the cardiac patient. Epidemiological research has tried to identify individual risk factors that could influence the intervention of patients. To narrow the gap in the cardiac health sector, researchers are interested in developing a new approach to the determination of social factors. They try to collaborate on elements along with social and environmental problems.

People or individuals in certain communities have the impact of the social determinants of their health problems. Matai was alone, and his single daughter used to help, entertain, and assist him in diagnosing the problem of heart disease. He was also facing economic deficiencies and could not have the privilege of intervention through expensive healthcare technology. The multidisciplinary team assesses his case and diagnoses according to the requirements of his body (Bourgois, 2017). Matai needs the help of an individual to move, and due to health problems, he becomes weak. With the amount of pension and little income, he cannot do multiple tasks. His daughter was jobless, and he had no other source to earn money. The social determinant of the revenue also affects his life. While visiting the hospital with his daughter, he faces issues of increased heart beating and breathing.

The more exciting thing is that both of the family members have also taken care of their neighbour women who are confronted with the problem of leg ulcers. However, his willpower made him sustain in such a critical social and community environment.

With the age of seventy-one and the weight of one hundred thirty kilograms, Matai requires the services of a carer. He builds his psyche according to the habits of the isolated person. Society is not ready to help him out, nor is it even his neighbourhood. He has no spiritual teaching or affiliation, which also increases his loneliness (Clark, 2014). In the same way, the social and cultural determinants influence his life. The conventional style of dealing with weak people in society is still operating in the postmodern community. The culture of the Samoa community is based on the norms of the status quo, which does not allow weak people to get diagnosed by professional healthcare centres. (Prince, 2015). Education is low, and average individuals in society are affected by low income. The case of Matai reflects the actual economic condition of the society. The majority of the population of his community belongs to the Christian religion. There are Around two per cent or fewer Muslims residing there.

The social determinants and cultural norms influence the problems of health care in different communities. A short look at the health problems and the data calculations of socio-economic conditions reveals that an increasing number of people are facing issues of obesity, health care issues and diabetes. Some of them have acute problems with low income, unemployment, and expensive transport. People are increasingly confronted with the problem of cardiac attack. The standardised division of the hospitals in the community was significantly high during the years two thousand six to 2009. In the same way, the rate of diabetes was also top, and it was up to seven times in the Australian public. The community needs to be facilitated by donors and related agencies to eliminate issues like unemployment and low income. (Stanley, 2017).

Studies confirm that the rate of heart attacks and hospitalisation of people having cardiac problems is profoundly influenced by joblessness, low income and the expensive health care system. The case of the Matai reflects the accurate picture of low income, lack of proper transport and the social standing of his community. More people are driving towards death through the severe deficiencies in healthcare assessments and systems. Similarly, the issue of unemployment also affects the lives of ordinary people. In the postmodern era of technology, finances are not only essential for good health but also a vibrant tool which people like Matai use to upgrade their social status (Fazljoo, 2016). Cardiovascular disease is one of the most significant healthcare problems in Australia. Despite improvements during the last few decades, the issue of health care remains a burden on Australia’s economy.

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