



ALAMO
COLLEGES

NORTHWEST VISTA COLLEGE

Wellness and Health Promotion

Week 2

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Objectives

- A. Describe quality of life and list some measures used to describe quality of life.**
- B. List the differences in health status that cannot be explained by biological or physiological differences.**
- C. Define mortality, morbidity and rate.**

Quality of Life

General Sense of **Happiness** and **Satisfaction**
And **Contentment**

Hard to Measure

- **Personal sense of physical and mental health**
- **Assessments of “very good”, “good”, “fair” or “poor”.**
- **Number of sick days.**

How To Lead Flourishing Lives?

Scarcity/Poverty: Can cause increased health risks, high levels of stress, tunneling (narrow focus) and dysfunction.

Flourishing: Manageable stress, adequate resources, caring and respectful relationships, happiness.

To Increase Life Expectancy and Quality of Life...People Need

Knowledge

Motivation

Opportunities



Life expectancy is the average number of years lived after birth.

Resources

Mortality

Number of deaths that occur at a specific time, in a specific group, from a specific cause.

Texas and U.S Mortality Rates in 2015

	Texas rate per 100,000 people	U.S rate per 100,000 people
Single Cause Mortality		
Stroke	41.7	37.9
All Cancers	161.5	168.7
Suicide	11.8	12.3
Breast Cancer	20.2	21.5
Unintentional Injuries	27.2	39.4

Morbidity

Number of people with a specific disease, during a specific period, in a specific location.



Disease	Number of Cases per 100,00 Texans in 2015
Tuberculosis	1,222
Chicken Pox	1,874
Mumps	13
Measles	27
Hepatitis A	109

Rates

Formula that divides the number of events (cases) occurring in a population by the number of individuals in the population. occurred, usually expressed as a decimal.

Mortality Rate = *Number of Deaths/Population*

Morbidity Rate = *Number of cases/Population*

Rates provide much more information than number of cases.

	Texas 2015	
Vaccine Preventable Diseases	Cases per 100k	Rate per 100k
Chicken Pox	1874	.0187
Tuberculosis	1222	.0122
Mumps	13	.0001
Measles	27	.0002
Hepatitis A	109	.001

} **Morbidity Rates**

Health Disparities

Differences in the health of people that is not due to biological or genetic differences are called **disparities**.

Disparities are usually caused by:

- gender
- race/ethnicity
- education
- income
- disability
- location

Disparities Due to Gender

Women Generally Have

Longer Life Expectancy Lower Death Rates

Lower Rates of Intentional Injuries

Higher Rates of Lung Cancer

Higher Rates of Alzheimer's Disease

Higher Rates of Depression

Disparities Due to Race/Ethnicity

African Americans

Hispanics

Infant Mortality

Heart Disease

Prostate Cancer

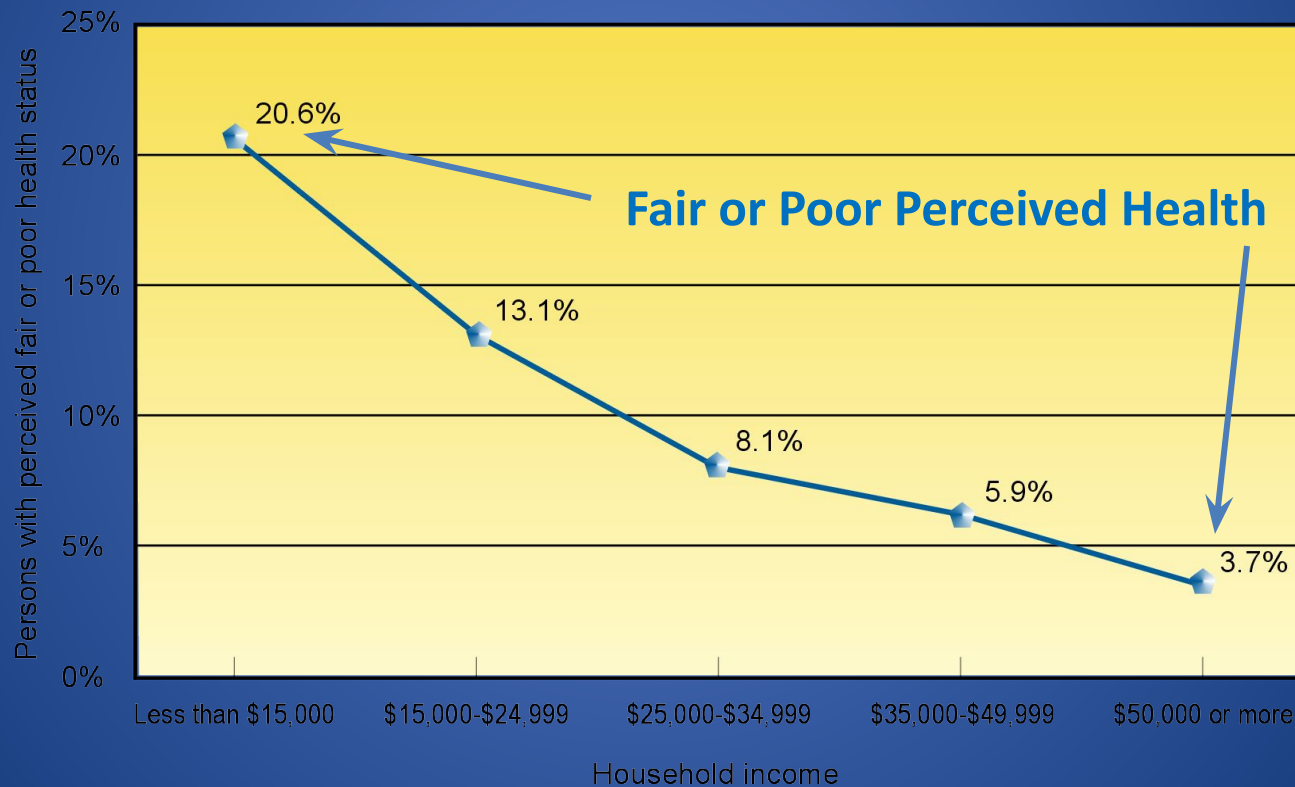
Complications of

Diabetes

Obesity

Hypertension

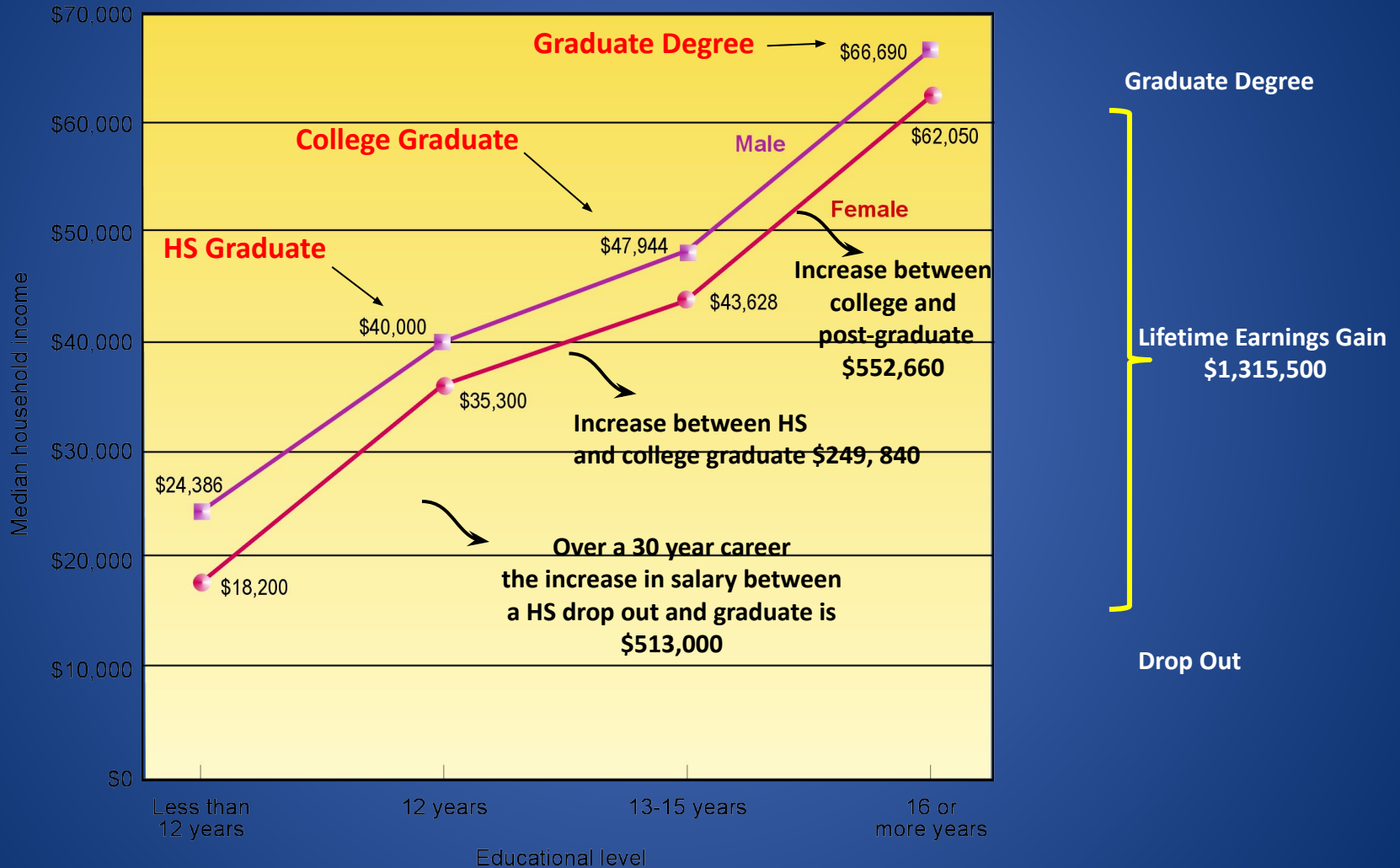
Disparities Due to Income



Low Income

High Income

Relationship Between Education and Income



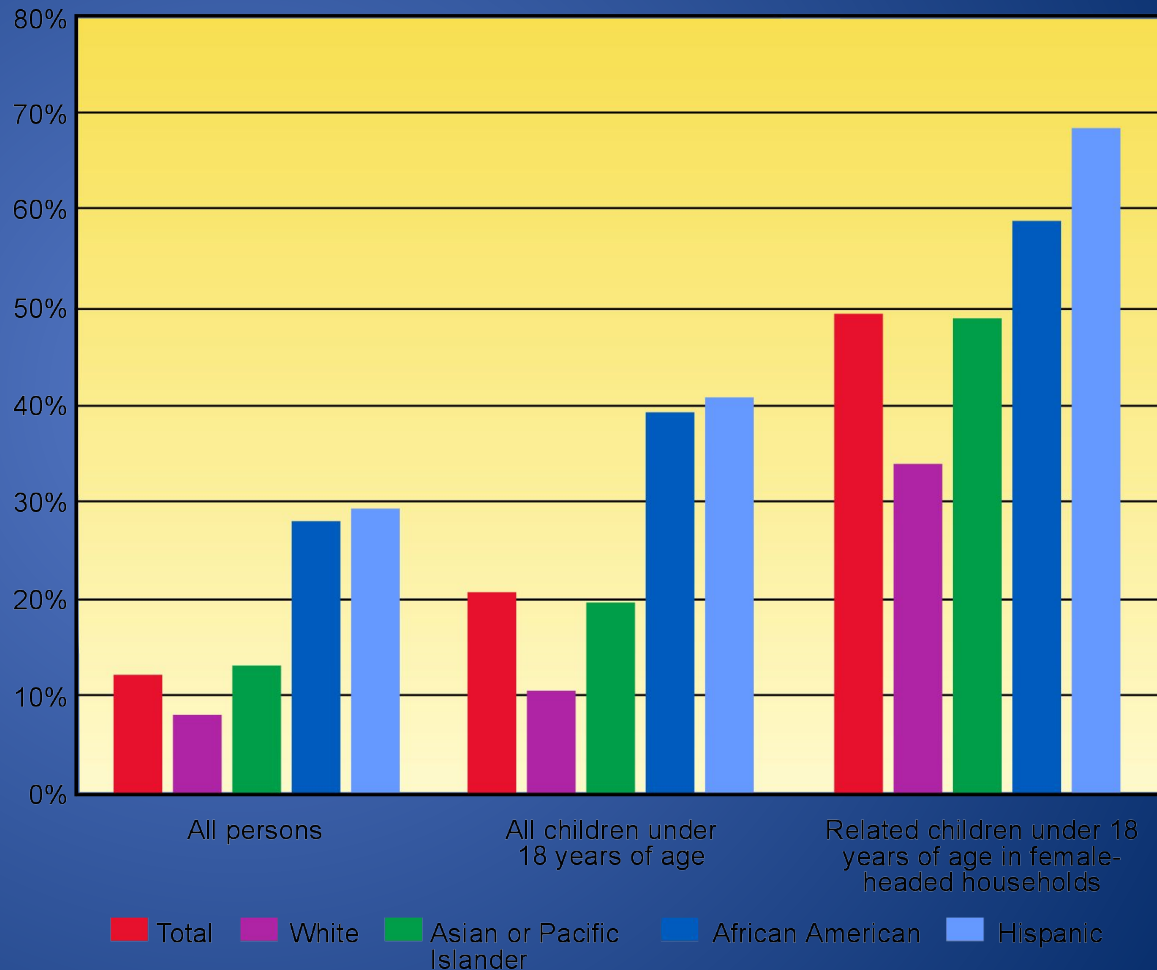
Race/Ethnicity of Persons Living Below the Poverty Level

2014 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

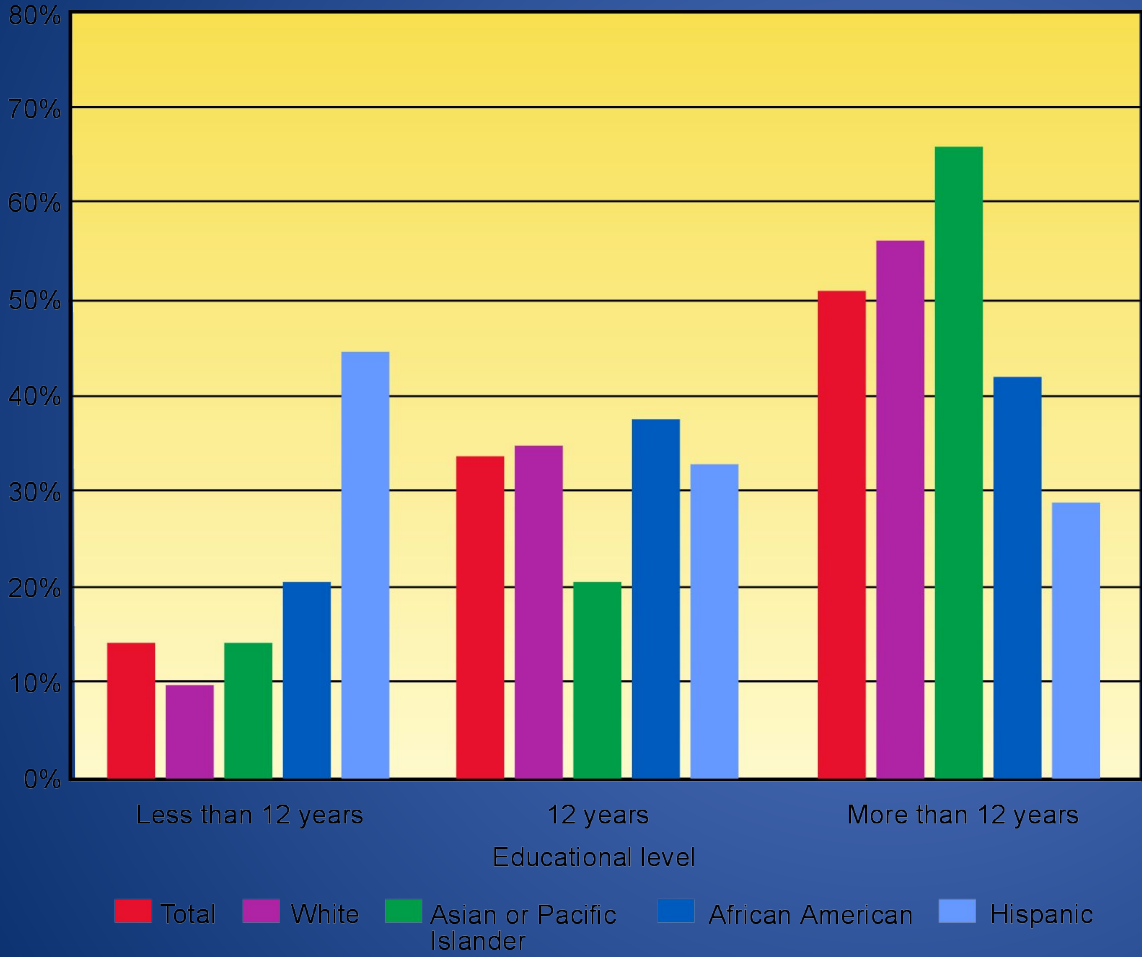
Persons in family/household Poverty guideline

For families/households with more than 8 persons, add \$4,020 for each additional person.

1	\$11,490
2	15,510
3	19,530
4	23,550
5	27,570
6	31,590
7	35,610
8	39,630



Educational Attainment by Race/Ethnicity



Disparities Due to Disabilities

**Activity Limitations
Control**

Weight

Access to Health Care



Disparities Due to Location



Higher Rates of Injuries.

**Higher Rates of Diabetes,
Cancer, and Heart Disease.**

**Less Access to Preventive
Services.**

Delay in Emergency Care.