

A document content analysis of health service research papers on goals for care

APPENDIX B

Presentation of goals for care, their defining characteristics and typical concrete goals associated with them.

<b>Concepts of goals for care</b>	<b>Defining features</b>	<b>Typical goal of care is...</b>
1. Balance and homeostasis	Health is a balance between external/ internal forces, bodily components or bodily physiological processes. Characterized by words like balance, equilibrium, homeostasis, allostasis, holistic.	...is to re-establish balance or homeostasis.(1, 2).
2. Biomedical	Health is absence of disease. Diseases are caused by natural forces, which disturb biological -anatomical structures, -biochemical and/or -physiological processes. Disease definitions are agreed upon by the medical profession.	...is to provide the Evidence Based Medicine (EBM) that is likely to remove root cause of disease.(2-4)
3. Health outcomes	Health is the observable presence/ absence of a health outcome defined as relevant for any given disease.	...is to provide EBM likely to produce desired outcome and minimize risks.(5-7)
4. Disease prevention	Health is absence of disease, and depends on disease prevention through identification of increased risk for-, and/or early signs of a disease.	...is to provide EBM likely to postpone disease onset/ deterioration.(8, 9)
5. Bio-psycho-social	Health is absence of disease. Builds on bio-medical concept, but emphasizes that disease is experienced and observed in terms of human dysfunction, within the unique biological, psychological and social context of each human being.	...is to provide EBM likely to remove cause of disease and/or improve function in the personalized context.(4)

6. Disability	Health is defined by the person's ability to perform " <i>the necessary, usual, expected and personally desired functions</i> ". (10, 11) Disability arises from the condition itself, and ability is modified by personal coping skills and social- or environmental adaptations to disease.	...is to restore functional ability through treatment of condition, enhancement of coping skills and/ or manipulation of environment.(10-12)
7. Health is a resource for wellbeing	Health is understood as <u>wellbeing</u> , in bio-, psycho-, emotional-, social- and spiritual terms. Texts are unspecific in terms of how to recognize poor health.	...is to restore wellbeing.(13, 14)
8. Health is a resource for everyday life	Health is understood as bio-psycho-social <u>functioning</u> which supports activities of everyday life.	...is to recognize and address deficits in activities of daily life.(2, 15, 16)
9. Health is a resource for self-care	Health is the ability or capacity for self-care.	...is to recognize compromised self-care and to support self-management.(16-18)
10. Health is a resource for autonomy	Health is the ability to function <u>autonomously</u> , in terms of making decisions, to pursue decisions within social context and ability to execute decisions.	...is to recognize and act to remove factors, which restrict individual autonomy.(16, 19, 20)
11. Health is a resource for personhood	Health is the foundation for defining who we are, our identity, our «personhood», including our spiritual beliefs. Threats or damage to our identity causes <b>suffering</b> , which is akin to poor health.	...is to detect the effects of poor health on identity and understand the suffering this produces in the individual, and then act to alleviate suffering.(21-24)

12. Health is a resource for spirituality	Health both supports a spiritual belief, and health supports the individual's spiritual activities. Spirituality connects the individual to a larger cause or religious belief. Spiritual beliefs can also support health by creating frameworks for sense and meaning in times of suffering.	...is to restore ability to align life choices and actions with beliefs, and/ or to understand health and suffering in terms of the belief system.(21, 25-27)
13. Health is socially constructed	Health is a social construct, which we understand in terms of the cultural, regulatory and historical context of the society in question. The impact of a condition depends on the society's ability to make resources for health available to the individual.	... is to make social- and environmental resources available to the person, such as health care, information, social support and physical aids which can support the person's ability to manage health.(2, 10)
14. Supernatural	<p>Health is thought to be caused and maintained by supernatural or religious forces..</p> <p>Supernatural health is perhaps the oldest health model in human history. Typical interventions appeal to higher religious or supernatural forces, via institutions found outside of health-care systems. While we recognize its existence, we position our analysis within a health care context, which is why we have excluded this health-concept from further analyses</p>	...is to appease religious/ supernatural forces.(3, 28)

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