



## **Role of Family Medicine in Reducing the Risk of Health Neglect in Low Socioeconomic Communities**

**Mohammed Ibrahim Habadi<sup>1\*</sup>, Yousef Hussain Alharthi<sup>2</sup>,  
Khalid Mohammed Razim<sup>3</sup>, Abdulelah Abdullah Aljurbua<sup>4</sup>,  
Hamda Daifullah Alazwari<sup>5</sup>, Ali Mohammed Alfalahi<sup>6</sup>,  
Khalid Abdulradhi Alshaeri<sup>6</sup>, Nawaf Hameed Almohammadi<sup>7</sup>,  
Mohammad Abdullah Assaggaf<sup>8</sup>, Omar Mohammad Alrashedi<sup>9</sup>,  
and Naif Ayidh Almalki<sup>10</sup>**

<sup>1</sup>Department of Family Medicine, International Medical Center, Jeddah, Saudi Arabia.

<sup>2</sup>College of Medicine, University of Tabuk, Tabuk, Saudi Arabia.

<sup>3</sup>Department of Family Medicine, Bani Malik General Hospital, Jazan, Saudi Arabia.

<sup>4</sup>College of Medicine, Qassim University, Buraydah, Saudi Arabia.

<sup>5</sup>Primary Health Care, Ministry of Health, Mecca, Saudi Arabia.

<sup>6</sup>College of Medicine, Umm Al-Qura University, Al Qunfudhah, Saudi Arabia.

<sup>7</sup>Primary Health Care, Ministry of Interior, Jeddah, Saudi Arabia.

<sup>8</sup>College of Medicine, King Abdulaziz University, Jeddah, Saudi Arabia.

<sup>9</sup>General Physician, Ministry of Health, Riyadh, Saudi Arabia.

<sup>10</sup>Department of Internal Medicine, King Faisal Complex, Taif, Saudi Arabia.

### **Authors' contributions**

*This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.*

### **Article Information**

DOI: 10.9734/JPRI/2021/v33i38A32064

Editor(s):

(1) Dr. Giuseppe Murdaca, University of Genoa, Italy.

Reviewers:

(1) Maria Alexandra Fernandes Rodrigues, Universidade Eduardo Mondlane, Mozambique.

(2) Aravind Varma Datla, Dr. N T R University of Health Sciences, India.

Complete Peer review History: <https://www.sdiarticle4.com/review-history/71633>

**Review Article**

**Received 15 May 2021**

**Accepted 21 July 2021**

**Published 22 July 2021**

### **ABSTRACT**

Family medicine and family physicians have exerted significant efforts in reducing the impact of the deteriorated socioeconomic factors in some communities. They attempt to enhance the quality of care for individuals. Continued research and dedicated levels in this field can also be associated

with clear and innovative approaches to enhance the management of certain diseases and to improve the quality of care to reduce patients' negligence related to potential management plans. It has been reported that family physicians have major roles in elevating the quality of care, achieving better disease management, and enhancing the quality of care for the corresponding patients because they have direct involvement with the individuals' community and patients. In this literature review, the aim is to discuss the impact of socioeconomic status on healthcare and the role that family medicine plays to enhance the quality of care for corresponding individuals' community. The continued care of family physicians towards the health care of patients can significantly enhance the quality of life and have related health outcomes. Setting priorities and prescribing suitable treatment regimens are two important factors that might solve the problem of negligence to treatment regimens in low socioeconomic communities. Local authorities should also provide suitable environments for patients to enhance the nationwide outcomes and to reduce the burdens over the healthcare facilities by calling for integrated social, providing medical efforts, and enhancing the quality of care for patients.

*Keywords: Family medicine; quality of care; epidemiology; management.*

## 1. INTRODUCTION

Many factors have been involved in the socioeconomic status of the different communities, a status that is now evidenced to greatly impact the quality of healthcare and the related outcomes. Family medicine and family physicians have exerted significant efforts in reducing the impact of the deteriorated socioeconomic factors in some communities to enhance the quality of care for individuals. Continued research and dedicated levels in this field can also be associated with clear and innovative approaches to enhance the management of certain diseases and to improve the quality of care to reduce patients' negligence related to potential management plans. [1]. Accordingly, to achieve success in these communities, overcoming the different social factors like poverty, toxic environments, and other community characteristics are essential to enhance the quality of care, which can be easily achieved by the integrated efforts of family physicians [2-4]. It has been reported that family physicians have major roles in elevating the quality of care, achieving better disease management, and enhancing the quality of care for the corresponding patients because they have direct involvement with the individuals' community and patients. In this literature review, the aim is to discuss the role of family medicine in reducing the risk of health neglect in low socioeconomic communities.

## 2. METHODS

This literature review has been performed using an extensive literature search in Medline, Cochrane, and EMBASE databases on 4<sup>th</sup> June

2021 using the medical subject headings (MeSH), and a combination of all possible related terms. This was followed by the manual search for papers in Google Scholar and the reference lists are included at the end of this research [5,6]. This research discusses the role of family medicine in reducing the risk of health neglect in low socioeconomic communities and was screened for relevant information. There are no limits on date, language, age of participants, or publication type.

## 3. LITERATURE REVIEW

### 3.1 The Impact of the Low Socioeconomic Status on Health and Related Factors

Various social factors have been previously reported to affect the different aspects of the individuals living in different communities including social support, education, socioeconomic status, and employment [7-10]. However, it has been previously reported that the different social factors only affect health-related outcomes but not behavior, physical environment, or care. For instance, it has been reported that among the social factors, poverty and racial discrimination are two important factors that might impact the healthcare process and the quality of the provided care [10,11]. Higher socioeconomic communities can significantly provide stability in the healthcare quality that is provided to their patients [12]. Moreover, evidence in the literature shows that individuals with higher socioeconomic statuses usually experience a higher quality of care than other patients with lower levels and others that are poor, which indicates the impact of these factors on healthcare. It has been reported that

poverty and lower socioeconomic levels are usually associated with reduced access to proper nutrition and healthy food, proper healthcare education, and proper medical management. Accordingly, it has been reported that the health-related outcomes are usually poor in these patients as a result of these factors as compared to other patients from other communities [13,14]. Furthermore, it was previously reported that patients living in poor communities have been reported with higher rates of reduced life expectancy [15]. Evidence shows that the impact of socioeconomic status and education are significant on the life expectancy of the corresponding populations [16,17]. It was previously reported that the impact of education was more significant on the life expectancy of individuals that completed 12 years of education than others in the United States [18]. Also, it is now known that the prevalence of certain factors and conditions as chronic diseases, mental illnesses, and substance abuse is more in low socioeconomic communities [19]. Other factors related to the environment of these communities such as toxic exposure, poor nutrition, and poor availability of healthcare resources are also important factors that can significantly impact the quality of care and health-related outcomes for individuals in these communities. The impact of these events is even more significant on children. However, the significance might be related to the timeline of exposure [20-22]. Besides, it was previously reported that suicide rates among children in these communities are higher than other ones with enhanced socioeconomic characteristics [23]. Previous studies have demonstrated the effect of socioeconomic status on health behavior and related outcomes. It has been demonstrated that low socioeconomic levels are significantly associated with reduced quality of care than other communities with higher socioeconomic levels. The impact of health-related behaviors was also previously reported to be significant on developing mortality in the corresponding patients with lower socioeconomic levels [24]. Accordingly, these factors should be considered when drawing management plans of the different community diseases and disorders within the low socioeconomic communities.

### **3.2 Community-Oriented Primary and Responsive Care**

It has been noticed that establishing an efficacious family care team can significantly enhance the quality of care provided for patients

who reside in countries with low socioeconomic statuses. Providing high-quality care for these patients is so important because many of the patients that require adequate care suffer from chronic diseases and usually have difficulties in sticking to the right management and follow-up procedures as a result of the poor quality of care in such countries [25,26]. The role of family physicians in such situations is to enhance the provided quality of care by improving the care coordination of the corresponding healthcare facilities and can consequently address the socioeconomic and medical needs of these patients. For instance, in some areas within the United States with low socioeconomic levels, it has been proposed that commercial payers and governmental economic facilitations should be provided for coordinated family system-based healthcare services to elevate the quality of care in these situations and prevent any potential neglect [27,28]. Cost-saving approaches by healthcare insurance companies are also important in obtaining better outcomes and adherence to the guidelines and protocols of enhanced care to patients within the socioeconomic communities. This can significantly lead to early, and adequate management and follow-up of the diseases. Also, it can lead to improving the management modalities by constructing a feasible communication between the different parts of the healthcare systems, the patient, and the surrounding community. Therefore, it creates a sound atmosphere that obliges patients not to neglect any measures that are related to their healthcare and disease prognosis. This can significantly improve the outcomes and reduce complications. In addition, it can reduce the economic burdens on both the patient and the healthcare facility. Regarding community-responsive care, it has been reported that family physicians should provide a suitable environment that is non-judgmental and welcoming that can significantly enhance the compliance of patients to their therapeutic and follow-up modalities. Therefore, it can reduce the potential negligence of care [29,30]. Moreover, it was also reported that following the care guidelines and practices by the National Standards for Culturally and Linguistically Appropriate Services can lead to enhancing the quality of care for patients within low socioeconomic communities.

It should also be noted that the healthcare physicians should be flexible when hearing the justifications of patients to understand the reasons that pushed them to neglect their

medications and healthcare appointments, which might seem not suitable to some populations compared to others. This could be related to different habitual and cultural perspectives [31,32]. For instance, illiterate patients might not be able to understand the prescription of the physicians, and might be ashamed to ask for better illustration by the attending physician. Therefore, doctors must be trained to tolerate such issues which are common within these communities. Besides, it was previously reported that following dictations in dealing with these patients have been inversely associated with good healthcare outcomes while coaching and storytelling can significantly enhance the negative health behaviors of these patients and enhance compliance [33]. To achieve this goal, targeting peer-to-peer local organizations and gathering groups is encouraged to give support to patients who are in low socioeconomic communities.

### **3.3 Setting Priorities and Determination of the Potential Challenges**

Family physicians should continuously screen for the potential risk factors to the diseases in their communities, and to pay attention to the factors that are associated with the compliance and negligence of management by the corresponding patients. Accordingly, these physicians should be trained to address such issues, and many efficacious approaches for screening and follow-up of such conditions have been previously reported in the literature, such as the Everyone Project [34]. After the adequate identification of the challenges that hinder patients from sticking to their management modalities, efforts by family physicians and healthcare facilities should be organized to plan the best management modalities for these patients, aiming at enhancing the quality of care and reducing care neglect. Novel approaches about identifying the potential obstacles to the appropriate care from the patients can also be efficacious in identifying the potential risk factors and challenges facing patients within low socioeconomic communities. For instance, asking patients about the costs of their medications can properly inaugurate a discussion about the socioeconomic status of the patients, which makes it easy for the attending physician to identify the potential socioeconomic obstacles and risk factors for neglecting the planned care [35,36]. Besides, asking the patient about the potential impact of the family and the neighboring individuals is also an important factor, as these members were previously

reported to impact the care and compliance to treatment by the patients, especially within the low socioeconomic communities [37]. Furthermore, such environments usually have risk factors for disease acquisition that others in other communities as crowding might lead to infections that can cause resistance to treatment and poor compliance, As a result, these factors should also be addressed by the family physicians and healthcare personnel [38,39]. Efforts by the family physicians and the care teams should be gathered with that of the patient directing them to set therapeutic priorities to achieve better outcomes and elevate the quality of care. Instant dealing with the patients' problems and providing a time agenda for the treatment modalities and follow-up procedures should be provided by the family physicians. Besides, incorporating patients in the decision-making process can give them a feeling of sensation and satisfaction about the planned management modalities, and encouraging them to adequately stick and follow such plans [40,41]. Planning the management plan should also be done in compliance with the patients' socioeconomic statuses and living circumstances are also encouraged to find the management modality for these patients and to elevate the quality of care and treatment compliance. For instance, prescribing insulin syringes and anti-diabetic pills is encouraged in some situations when patients cannot afford insulin pens [42,43]. Giving priorities to the management of life-disabling conditions that might affect the quality of life of patients with multiple conditions is also encouraged while other conditions that are not urgent or are not associated with serious complications can be postponed not to overwhelm these patients with the multiple treatment disabilities that are required to all of these conditions [44,45]. Affording the drug with reliable self-administration is the most important two factors that should be considered by the family physicians when planning the appropriate treatment plan. Encouraging the patient about the importance of success in sticking to the treatment plan and making advances towards the planned management of the disease is also recommended [46,47].

### **4. CONCLUSION**

The continued care of family physicians towards the health care of patients can significantly enhance the quality of life and the related health outcomes. Setting priorities and prescribing suitable treatment regimens are two important

factors that might enhance the negligence to the treatment regimens in low socioeconomic communities. Local authorities should also provide suitable environments for these patients to enhance the nationwide outcomes and reduce the burdens over the healthcare facilities by calling for integrated social, providing medical efforts, and enhancing the quality of care for patients.

## CONSENT

It is not applicable.

## ETHICAL APPROVAL

It is not applicable.

## COMPETING INTERESTS

Authors have declared that no competing interests exist.

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*Peer-review history:*  
The peer review history for this paper can be accessed here:  
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