



## REVIEW PAPER

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# Healthy lifestyles in the perspective of *homo eligens*

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### ABSTRACT

The article is devoted to lifestyles in the context of health. According to vision of A. Siciński – lifestyle is a culturally conditioned way of meeting needs, habits and norms. They regulate the value systems adopted by an individual or group. Lifestyle is formed by the interaction of widely understood living conditions and individual patterns of behavior. Behaviors in turn are determined by personal characteristics and sociocultural factors. Lifestyle and health behaviors are shaped throughout a person's life, but its foundations are formed in childhood and adolescence. The author of the article considers that a key category in the analysis of pro or anti-healthy lifestyle is the free choice of man.

A man can decide how he wants to live and also in what health he wants to live. His choices determine the way of life. The theoretical basis for discussing in this article the above-mentioned issue will be Siciński's concept of so-called *homo eligens* which is little known, but worthy of dissemination. It is the most important part of his theory of lifestyles.

**Keywords:** life style, health, freedom of choice, patient, humanistic paradigm.

The article is devoted to factors influencing lifestyles in contemporary Poland in the context of their impact on health. The concept of lifestyle is a conceptual category that is often found with such concepts and definitions as a way of life, a cultural pattern of behavior, values and attitudes.

In the literature, there are many definitions of the lifestyle. For example, according to A. Tyszka, it is a culturally conditioned way of life, a model of life, a motive of action, a hierarchy of values, a directive and a means of their implementation. The lifestyle consists of a syndrome of subjective factors (e.g., aspirations) and objective factors (e.g., economic conditions). It expresses the balance between aspirations, awareness of needs, preferences and the possibility to satisfy needs<sup>1</sup>.

<sup>1</sup> A. Tyszka, *Uczestnictwo w kulturze. O różnorodności stylów życia*, Warszawa, 1971, p. 87.

In turn, according to B. Fatyga, lifestyle is a culturally conditioned way of meeting needs, habits and norms. It is regulated by value systems adopted by individuals and groups. It manifests as an entirety of processes with multi-faceted, internal structural relationships. It means a specific set of daily behaviors of members of a certain community. They reflect their position enabling social identification<sup>2</sup>.

According to another author – A. Siciński – lifestyle is a culturally conditioned way of meeting needs, habits and norms. They regulate the value systems adopted by an individual or group. Lifestyle is formed by the interaction of widely understood living conditions and individual pat-

<sup>2</sup> B. Fatyga, *Rzeczy i ich miejsce w konsumpcyjnym stylu życia. Antropologia współczesności. Animacja działań lokalnych*, Uniwersytet Warszawski; retrieved from: <http://www.antropologia.isns.uw.edu.pl>; access: 30.10.2017.

terns of behavior<sup>3</sup>. Behaviors in turn are determined by personal characteristics and sociocultural factors. Their patterns and standard reactions are transmitted to human in the process of his socialization. It decides on his lifestyle.

Taking into account the elements of the above definitions, for the purposes of this article, in some simplification, I assume that the concept of lifestyle means a culturally conditioned way of meeting needs, habits and norms. It is defined by value patterns accepted by individuals and groups. In terms of my interests, they define their attitude to health.

Lifestyle and health behaviors are shaped throughout a person's life, but its foundations are formed in childhood and adolescence. The process of its formation can be observed both at the individual level, i.e., a particular human being, and at the social level.

Different social groups that implement different lifestyles represent certain segments of the social structure, and thus also certain status features, including the economic position. The systems of these values are fundamental to the distinction between lifestyles at different levels of stratification. According to B. Fatyga they are called the principles of styles<sup>4</sup>. By transforming these principles into an individual level, they allow the implementer of life to feel their lives as relatively coherent and meaningful. By making choices between these values, a person acquires the qualities of the person who chooses.

Therefore, the author of the article considers that a key category in the analysis of pro or anti-healthy lifestyle is the *choice*. Its incorporation allows for the construction of a specific continuum, in which various behaviors that show human relation to own health can be accommodated. On the one hand, the extreme point of this continuum is determined by biologically, socially and culturally conditioned behaviors, i.e., those that a man doesn't affect. These behaviors are forced and necessary. On the other hand, the behaviors resulting from free choices, undertaken

in principle without any limiting conditions. These behaviors are the emanation of the free will of man.

In this context, the purpose of further consideration will be to draw attention to the importance of lifestyle choices that are visible in attitude towards one's own health, as well as their determinants. A man can decide how he wants to live and also in what health he wants to live. His choices determine the way of life, located on the indicated continuum between its extreme points.

The theoretical basis for discussing the above-mentioned issue will be Siciński's concept of so-called *homo eligens* which is little known, but worthy of dissemination. It is the most important part of his theory of lifestyles.

This author, considering the complexity of the problems related to the analysis of everyday life, points to the need to adopt different classifications of lifestyles. Following this thought, it should point out that one of them can be based on the criterion of relation to one's own health. It is visible in the decisions taken in this regard. According to A. Siciński, the main category of pro or anti-health lifestyle analysis would be the category of choices preceding these decisions. The basic criterion for distinguishing between the styles is the ability to select a style associated with a situation of choice. The other criteria relate to the lifestyle of the person making a choice in the environment in which they live.

Assuming indicated by A. Siciński perspective of the choices made by people in their daily life<sup>5</sup>, it can point to the typology of lifestyles that affect health. These are:

- › style restricting the ability to make health choices by an individual, formed in the unfavorable social (family) context;
- › style of avoiding health choices;
- › style of amplifying health as a primate value, a goal, a specific prescription for life;
- › conservative style which consists in suppressing health problems; preserving the existing health situation;
- › style of modifying the health situation.

The above typology shows, therefore, certain sets of attitudes and behaviors, as well as the general philosophy of human life. It takes into account the three spheres of reality, i.e., the

<sup>3</sup> A. Siciński, *Style życia w miastach polskich (u progu kryzysu)* (in:) *Styl życia. Koncepcje, propozycje, odniesienia* (eds.) A. Siciński, Warszawa 1998, p. 19.

<sup>4</sup> B. Fatyga, *Rzeczy i ich miejsce w konsumpcyjnym stylu życia. Antropologia współczesności. Animacja działań lokalnych*, Uniwersytet Warszawski; wersja internetowa, retrieved from: <http://www.antropologia.isns.uw.edu.pl>; access: 30.10.2017.

<sup>5</sup> A. Siciński, *op. cit.*, p. 58.

worldview, goals and life aspirations, behaviors and activities, and the sphere of men's products.

The above-mentioned different lifestyles, which affect health, depend on the environment, social and cultural conditions, the economic and political situation of the state, and norms, values and beliefs that are recognized by the individual.

In this perspective, it is necessary to return to the earlier concept of *homo eligens*. The author, A. Siciński believes that it can be treated in two ways. First, as an existential thesis. It is based on the conviction that the meaning of human behavior cannot be reduced to the sum of reaction to conditions. Its essence is the ability to make choices, and thus to cross these determinants<sup>6</sup>.

This possibility is a traditional subject of dispute between representatives of various sciences, especially the humanities. Without discussing its essence, it should only be remembered that it has formed two essential positions in this respect, i.e., deterministic and indeterministic. Generally it can be said that this distinction results from the difficulty in resolving the issue of the extent to which a person can manage his or her behavior, so a person can decide about his or her actions in a more or less free way. In the context of my interest, it is the extent to which an individual can develop a pro or anti-health lifestyle.

Analyzing the various positions in this area, a compromise position of moderate indeterminism can be adopted for consideration of health choices. According to this variant, the free will of man in the choice of his own health experiences various, variable constraints. Except in extreme situations, they usually don't eliminate it completely. However, it would be sarcastic to note that man, to some extent, can liquidate his free will by himself. An example of this situation is an alcohol dependence, a lifestyle that is called alcoholism or addiction to drugs, recently also Internet addiction.

However, the analysis of the above mentioned issues in their relation to pro or anti-health lifestyles would be very interesting and probably needed, but for further consideration in this article, the second dimension of the concept of *homo eligens* is more useful. It is about its methodological aspect. It concerns the possibility of understanding social and psychological phe-

nomena. It is impossible without a look through the prism of the choices made by people. They must be taken into account during the construction of different dependency patterns, including in the medical sciences. Because, regardless of the degree of development, such as operating techniques, health or disease, the person decides ultimately, i.e., the patient. As a *homo eligens* can, e.g., refuse to undergo medical treatment. It will be under conditions, such as full consciousness, the manifestation of his free will. The complexity of this problem is evident in the difficult debate over the admissibility of euthanasia.

The concept of *homo eligens* as a methodological thesis may provide a good starting point for borders of medical interventions in health. Paradoxically, they are determined by the most interested, i.e., the patient. However, the issue is to what degree it is independent of the doctor. Discussion of medical decisions must take into account this aspect.

Considering the possibility of using the *homo eligens* concept to reflect on the essence and the determinants of these decisions, it is worth emphasizing that they are more about health in a broader perspective. In this approach, accepting the definition of health is decisive. The concept of health can be defined in different ways. At this point, I will indicate only positive and negative definitions. Representatives of the first of these trends point to the absence of disease or pain, and thus the state of functioning of the body and its individual organs, which don't disclose any of the known types of diseases and pathology<sup>7</sup>. It could be called normal, with the proviso that this is a rather an obscure term. It should be noted that this approach has a clear biological and medical dimension. It is difficult to refer them to the vision of *homo eligens*.

Contrary to this, proponents of the positive way of defining health more broadly define its essence, paying attention also to other aspects. This way is therefore more useful for thinking about lifestyle decisions. The definition formulated by the World Health Organization in 1948 is an example. According to it, health is a state of equilibrium and bio-psychosocial well-being

<sup>6</sup> A. Siciński, *Styl życia, kultura, wybór*, Warszawa 2002, p. 81.

<sup>7</sup> Cf. e.g.: R. Gil, A. Dziedziczko, *Pojęcie świadomości zdrowotnej, zdrowia i choroby*. *Zdrowie Publiczne*, n° 2/2004, p. 253.

that allows an individual to adapt to the environment and realize life plans and aspirations. The indicators of good health can be: human activity, self-fulfillment, ability to perform social roles and tasks, positive relationships with the environment, and ability to adapt to social change<sup>8</sup>.

This definition has many advantages for further discussion in this article. It is worth mentioning them briefly. Thus, it departs from the earlier, reductionist understanding of health in biological terms. It accentuates its multidimensional, which is evident in the diverse needs of man, i.e., biological, psychic and social. It also draws attention to subjective health, breaking the monopoly of medicine for its definition. Finally, it sets health in a wider social context and emphasizes its association with cultural values and norms.

This definition allows associating health with the different lifestyles of the modern world. On the basis of this it is also possible to raise the question of the importance of the health choices made by a man with free will. These issues are becoming more important, because it becomes increasingly widespread view that one of the most important factors affecting the man's health in the modern world is the lifestyle.

Lifestyle can be analyzed at two levels, i.e., individual and social. I will continue focusing on the first one which refers to the concept of *homo eligens* indicated in the title of the article.

A person who chooses, forms his style of life in an autonomous way, using the attribute of free will, also in the choices about their own health. He or she has more or less fundamental influence on this style. In this context, it is easy to show that among the determinants of human health, free choices are of prime importance. They decide whether it is a pro or anti-health style.

It is worth recalling that in the national health programs since 1996, it is assumed that lifestyle dominates among the different determinants of good health. Its part is estimated at 50.00% in their general structure, while genetic factors at 20.00% and health care at 10.00-15.00%<sup>9</sup>.

Analyzing the importance of a particular lifestyle for maintaining good health in more detail and in light of the above indicators, it is important to

<sup>8</sup> D. Callahan, The WHO definition of health, *Hastings Century Studies*, n° 3/1973, p. 77.

<sup>9</sup> J. Domaradzki, O definicjach zdrowia i choroby, *Folia Medica Lodziensia*, n° 40/2013, p. 7.

note that its determinants are defining behavior. It is about health-promoting behaviors, which, in the light of modern medical knowledge, have a positive effect on health. Although they are formed throughout life or not, the period of childhood and adolescence is decisive in this respect. However, it is worth noting that the importance of free choices in terms of health behavior is relatively small at this stage of human development. This is due to the fact that his psyche is still developing and the degree of maturity and autonomy of thinking is not generally high. On the other hand, the value and importance of good health are socialized. The message and patterns passed by parents, school, peers, mass media, and various services and medical entities have the impact on the effects of this socialization (positive or negative). Our own health experiences, which in the period of adolescence aren't generally large, but grow over time, also play a role. Pro or anti-health behaviors become an indicator of psychological and social maturity. They also decide on the fixation of a particular lifestyle.

Regardless of the various sources of message and cultural patterns, at the social level, the following standards of healthy lifestyles are commonly indicated and accepted.

- › In the field of physical health – attention to the body and the immediate environment, physical activity, rational nutrition, tempering, sleep – appropriate duration and quality.
- › As related to psychosocial health – using and providing social support, avoiding excess stress and dealing with problems and stress.
- › In terms of preventive behaviors:
  - self-control of health, self-examination, submission to preventive examinations,
  - safe behavior in everyday life (especially in the road, at work), safe behavior in sexual life,
  - avoiding risky behaviors (e.g., smoking, alcohol abuse, abuse of medicines not recommended by the doctor, use of drugs and other psychoactive substances)<sup>10</sup>.

A similar list of healthy behaviors was formulated by J. Wardle, A. Steptote<sup>11</sup>. They assumed

<sup>10</sup> Cf. D. Ponczek, I. Olszowy, Styl życia młodzieży i jego wpływ na zdrowie, *Problemy Higieny i Epidemiologii*, n° 2/2012, p. 262.

<sup>11</sup> J. Wardle, A. Steptote, The European Health and Behaviour Survey: rationale, methods and initial results from the United Kingdom, *Social science and Medicine*, vol. 8/1991, p. 929.

that leading a healthy lifestyle requires: not smoking, to reduce alcohol consumption, physical activity, use a healthy, balanced diet with a particular focus on the right breakfast and not eating between meals, safe sexual behavior, stress avoidance and stress reduction skills, moderate exposure to the sun, adhering to road safety rules, finally, performing periodic preventive examinations and self-examination (self-control of the body)<sup>12</sup>.

Referring to the issue of free human choices which affect different behaviors within the pro or anti-healthy lifestyle, it should be emphasized that the final decisions are made by the individual. An important research task is to identify the factors that affect certain decisions and choices. As I have already indicated the concept of *homo eligens* is particularly useful as a methodological thesis for undertaking such research. It allows to define the way and the logic of the procedure. However, this provides the basis for an analysis of lifestyles influencing the health situation only at the level of individual behavior. It is therefore only one of the methodological proposals, clearly compromise. Its possible adaptation to a higher level of analysis, for example the local environment, or the general society would require considerable simplification, and even resign from the analysis of the factor of free choice as too individual. Synthesized approaches are based on frameworks of factors determining pro or anti-health lifestyles. They include what is suitable for generalizations, typical, useful for discussion at different levels of analysis. Therefore, it is difficult, to include in them a poorly perceptible factor of individual choice, i.e., individual, autonomous decision.

The combination of individual and social level of health decisions is one of the most difficult questions in research methodology. The author has no ambition to solve it. Nevertheless, I will try to point out certain premises and assumptions in this direction, based on the humanistic vision of the human being – the patient.

So, first of all, it is worth combining the theses of A. Siciński, concerning the styles of life in contemporary Poland, including the lifestyles of the

<sup>12</sup> E.g., piersi u kobiet. Cf.: A. Ostrowska, Prozdrowotne style życia [in:] Styl życia a zdrowie, z zagadnień promocji zdrowia (eds.) A. Ostrowskiej, Warszawa 1999, p. 28.

family<sup>13</sup> with the attempt to integrate the theory of socialization Ch. E. Frazier and Jan Włodarek<sup>14</sup>.

This combination provides a good theoretical basis for constructing humanistic research models of lifestyle influencing health. Therefore, this allows to include the concept of *homo eligens* in the field of view. It can be used to avoid a too reductionist interpretation of the possible indicators of pro-health attitudes, thus to determine the impact that factors other than biological-medical factors have on these attitudes. The point is to draw attention to the importance of different styles of life in the typical environments of modern Poland. As I have already indicated, they are associated with free health choices.

Ignoring them as pro or anti-health factors results in an incomplete dependency model. This determines that the determinants of health-oriented attitudes don't decide definitively about their formation or not. On the other hand, the lifestyle is a sociological category, a free choice – philosophical, so with a reductionist approach to the problem, their use in medical schemes can be a source of resistance.

However, constructing models with a broader intellectual perspective, going beyond a strictly medical point of view, is becoming more and more intentional. It takes into account current, interdisciplinary trends in scientific methodology. It is therefore worth trying to indicate the theoretical premises for them. They should take into account the following assumptions.

1. They must be multi-factorial, multi-faceted. Lifestyle is a complex factor resulting from the overlap or interaction of many different determinants simple or single-minded.
2. It should be indicated what a lifestyle factor means.

Unfortunately, this isn't easy, so the research model that include this factor can be quite unclear. In Poland, lifestyle research was conducted, among others, by A. Siciński<sup>15</sup>. By this

<sup>13</sup> Cf.: T. Siciński (eds.) Style życia w miastach polskich. Wrocław 1988; Badania „rozumiejące” style życia: narzędzia. Praca zbiorowa (eds.) A. Siciński i A. Wyki, Warszawa 1988.

<sup>14</sup> Cf. these Authors: Integracja teorii dewiacji. Podejście indukcyjne z zastosowaniem materiału biograficznego. Ruch Prawniczy, Ekonomiczny i Socjologiczny 1981, n° 4, p. 171 et seq.

<sup>15</sup> A. Lipski, Styl życia jako problem zdrowia społecznego, Ruch Prawniczy, Ekonomiczny i Socjologiczny, zeszyt 1/1998.

concept, he understood the set of daily behaviors, specific to a given community or individual, or, in other words, a distinctive "way of being" that distinguishes a given collective or individual from others ", manifesting its social position<sup>16</sup>. According to this author, this term includes not only human behavior, but also "psycho-physical mechanisms that underlie these behaviors: human motivations, needs, accepted values ", so all the factors that cause that behavior and others are chosen from the repertoire of behaviors which are designated by a given culture, in more or less conscious or even unconscious manner"<sup>17</sup>.

As we can see, changing the above theses into an operational definition of pro or anti-health lifestyle is a difficult task, its solution would require the completion of specific indicators. However, A. Siciński shows examples, the most important of them in the behavioral and axiological dimensions are:

- › human time budget (including the periodicity of his behavior),
- › work,
- › consumption of material goods (including "general attitude towards the world of things"),
- › hygiene and attitudes towards health (and illness),
- › intellectual and aesthetic needs (participation in culture and education),
- › recreation,
- › participation in sociopolitical life,
- › attitude towards religion,
- › forms of coexistence between people (in the family, social groups, neighborhood, etc.) moreover, distinguished by A. Siciński as "psychosocial nature",
- › value systems (felt and recognized) and
- › human self-identification<sup>18</sup>.

The above-mentioned catalog of indicators could thus be a good starting point for formulating research assumptions and analyzing possible relationships between the lifestyles of people from different social backgrounds and shaping or not, pro-health attitudes.

3. The study of these relationships would also require factors such as the level and type of education, economic status, type of work performed, the nature of the environment of origin and the environment of living<sup>19</sup>.

4. The dependency model should finally take into account the humanistic vision of man<sup>20</sup>.

It assumes that a person formed his or her attitude towards health by making various choices. These choices are an expression of his free will. The problem is how the free-will factor can be defined in an appropriate form for the research. This is the main problem of adopting the concept of *homo elicens* as a methodological thesis.

In conclusion, it follows from the above that the formulation a framework for research on the role of pro or anti-health lifestyles in maintaining good health or not is a difficult and risky task regard to the result. It assumes the construction of generalizing schemes that simplify the essence. They lose individual factors, unique, but often decisive for the effect. However, it is an impossible task to capture a detailed, complex map of individual, partial relationships and interactions. Although a consequence of this has to be a difficult methodological compromise, resulting in some schematization and simplification of research results, there is no other way of proceeding at the present stage of methodology development.

It follows that it is necessary to decide on the necessity of simplification by taking into account the possibility of applying the concept of *homo elicens* to a model of research into factors determining pro or anti – health lifestyle. It concerns concentrating on the operational definition of the decision. In this view, it can be assumed that they are indicators of a specific human will. They become its behavioral determinant. They determine the intensity of healthy behavior.

Defining for the needs of the proposed model, it is worth noting the definition of the concept of these behaviors by H. Sękowa. According to her, these are reactions to the situation, as well as the habits and purposeful activities, i.e., behav-

<sup>16</sup> T. Siciński (eds.) *Styl życia. Koncepcje i propozycje*, Warszawa 1976, p. 25.

<sup>17</sup> T. Siciński (eds.) *Styl życia. Przemiany we współczesnej Polsce*, Warszawa 1978, p. 155

<sup>18</sup> T. Siciński (eds.) *Styl życia. Przemiany...*, p. 156.

<sup>19</sup> The following works by this author should be indicated: *Od naturalizmu do humanizmu w kryminologii*. Katowice 1991 and *Kryminogeneza w ujęciu kryminologii humanistycznej*. Katowice 1997.

<sup>20</sup> The pioneer of this trend in Polish science is L. Tyszkiewicz. Cf. this author: *Od naturalizmu do humanizmu...*

iors that remain within a certain objective or subjective knowledge, in relation to health. These behaviors may favor balancing of the burden and the action of pathological factors, they may interfere with this process and cause a violation of immune resources<sup>21</sup>. Therefore, it is important in health behaviors to have subjective knowledge, associated with subjective beliefs and so-called objective knowledge connected with possessing medical and socio-philosophical information<sup>22</sup>.

Therefore, if the above remarks refer to the issue of choices about pro or anti-healthy lifestyle, then the conclusion is that having this knowledge depends on many factors. However, the result of the so-called primary socialization can be decisive. It is made in the family. As a result, an adolescent learns some health habits and also acquires some knowledge about health and its value. However, environmental diversity causes that habits and knowledge in this area aren't uniform, determined by many factors (e.g., parent education, family financial conditions, etc.). Good material conditions are conducive to good health and vice versa. Poverty is negatively related to health and is associated with illness and high mortality. These facts are traditionally indicated.

Assigning great importance to individual decisions and behaviors, it should be noted that they are determined by the syndrome of cultural, environmental and socioeconomic factors. They define what is termed lifestyle.

In this context, it is therefore possible to raise the question of the ability to make the right choices in the protection of one's own health by persons whose socialization was disturbed, e.g., in pathological families. Analyzing the factors that affect it, it is important to mention two of them in particular. The first is their living environment, so the factor for which the growing man doesn't have too much influence. The second, however, is individual decision making in terms of own health. It can be assumed that in the pathological environment this possibility is severely limited.

<sup>21</sup> H. Sęk, Subiektywne koncepcje zdrowia, świadomość zdrowotna a zachowania zdrowotne i promocja zdrowia (in:) Promocja zdrowia. Psychologiczne podstawy zdrowia (eds.) Z. Ratajczak i H. Heszen –Niejodek, Katowice 1997, p. 45.

<sup>22</sup> K. Puchalski, Zachowania związane ze zdrowiem jako przedmiot nauk socjologicznych (in:) Zachowania zdrowotne (eds.) W.A. Gniazdowskiego, Łódź 1990, p. 177.

This is due to the limitation of human independence from other people living in these environments with him. The extent of his autonomy in terms of health choices is limited by factors that could be described as their antecedents.

Antecedents pro or anti-health, because this name could be supplemented with this adjective, also include factors and situations in which homo elogens have no influence. In other words, they are independent of his will. The result of a given life situation, e.g., a birth in the family from the margins of society. It is shaped objectively and is difficult to predict, so nothing is the rule. In this form, antecedents health choices, related to this and other lifestyles, are quite elusive syndrome of conditioning attributes. At this point, only some of them can be given as an example. These are:

- › Starting factors, e.g., temperament, intelligence, psychological mood, sex, education, negative family environment, place in the stratified structure of society, social status, the character of the neighborhood environment.
- › Generalized needs, such as sex, friendship, excitement.
- › Earlier health experience and knowledge about health, perceived solutions in terms of meeting the health needs (legal and illegal, such as taking drugs that alleviate pain or stress).
- › Evaluation of the available solutions, taking into account the effort required, speed and facility of achieving the effect, as well as the cost.
- › Factors of social exclusion, i.e., alcoholism, drug addiction, vagabonding, long-term stay without meaningful occupation, especially without work, learned helplessness towards their own health problems, or their disregard.

We get a multi-element model of conditioning attributes, including risk factors by entering the above antecedents into the process of developing pro or anti-healthy lifestyle of people from different social backgrounds (including pathological). On the one hand, it includes exogenous factors, including in particular environmental and social factors and situational factors. On the other hand, it includes endogenous factors, including somatic (genetic) and personality factors.

As we can see, the system of the antecedents is highly complex and it is multi-causal. As a result, the methodological concept of the man

who choose, formulated by T. Siciński, based on this system, can only be a certain vision. I use the word *vision* with full awareness. In the form presented in this article, it is an intellectual construct with a relatively low degree of finish.

Nevertheless, it may be an interesting, attractive starting point for analyzing the effects of non-medical factors, including lifestyles, on health. The daily experiences of people, patients, and medical staff confirm this. Modern medicine therefore should not distract from them. Recognition of the patient's freedom of choice is also consistent with the latest trends in behavioral sciences. According to it, the acceptance of the humanistic paradigm in the medical sciences gives it the highest possible rank in the sphere of existence.

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