Statements on the First of April 2006

I went to a meeting on the first of April 2006, in the morning, to hear about strategies for public health action in the next few decades. The first speaker showed many slides and was out to convince us – by fact, emotion, and elegant style – that his conclusions were inescapable. When he finally presented the slides with his conclusions, they were neither unexpected nor innovative but seemed important. It was pleasant to see them again, like meeting old friends. They reminded us that the numbers of old people within the next decade will vastly increase, driving up the proportion of disabled and sick people; they referred to the deterioration of the environment which will change the face of Europe so much that we shall not recognize it any longer; and they stated that the loss of human life in natural and man-made disasters is so important that disaster preparedness and funds for intervention in areas stricken by catastrophes must receive very high, if not highest, priority in the domain of health.

I was almost ready to listen to the next speaker who announced that he will present his ideas about the future with reference to the facts that we had just heard when a rebellious thought came to my mind – what if the premises that were presented to us were not true but were just alarming news that people tell you on the first of April – April Fools’ Day – to frighten you and make you feel better, so much better after you discover that the bad news that were announced were just an April Fools’ Day’s joke?

I first wanted to chase away this clearly heretical thought but then decided that it might be amusing to think some more about these three often repeated statements and produce their opposites as an alternative way to peek into the panoramas of the future. After a while I concluded that the first statement – that there will be many more old people in the world in the years to come – can only be true if we consider the situation in the future with the definitions of today. Otherwise this statement cannot be accepted as a premise for preparing forward-looking strategies for public health and should not be repeated any longer. When my grandfather reached the age of 60 everybody felt that he was lucky because he had reached old age. At the time it was hardly think-
able (and it would have probably been considered somewhat indecent) that a gentleman of his age climb up a mountain and descend on his skis at great speed or spend 30 minutes every morning running in shorts around a city block. Today, colleagues from the hospital in the French city of Grenoble told me that injuries that were obtained in the course of skiing and other sports were among the main reasons for hospital care of people of 60 to 70 years of age in their town. The so-called elderly are engaged in sports and in many other physically and mentally challenging activities. They take pleasure in doing so and do it successfully. The biological definition of old age – based on functional capacity and self-perception - has moved upward for at least 10 years and it is likely that it will move even further into a higher age. Thus, although there will be more people over 60 in the world, the number of old people will not increase, it might in fact decrease. Take Japan, for example: in twenty years from now the proportion of the population over 60 (who are today considered functionally old) will grow from 26.3% to 41.7%, while the proportion of the population in their eighties – who will be functionally old people in the year 2020 - will be 15.3%, thus lower than the 26.3% of people aged over 60 counted as old in Japan today.

The second statement – that deterioration of the natural environment will change the face of Europe so much that we shall not be able to recognize the continent any longer – has been with us for a long time. The Green parties in many countries have built their strength on promises to preserve the environment. The preservation of the environment has been the motto of a variety of proposals and actions ranging from notices in hotels asking guests to indicate which towels they will use again (so that they do not have to be washed) to the composition of songs that school children sing about the beauty of the trees.

Yet, there are many other changes that are affecting Europe but receive much less attention although some of them may well contribute more to the disappearance of Europe as we know it today. The most important of these is the demographic change that is transforming Europe – with much more force than the deterioration of the environment. The European birth rates are far less visible on the political or public health horizon.

To maintain a population stable in numbers, there should be 2.1 children per woman. Most of the European countries are far below this rate – Russia and Italy have 1.2 children per woman, Germany and Austria 1.3, and Spain 1.1 – which means that the population of Spain will be halved with each succeeding generation unless things change in a drastic manner (1). Immigrants to Europe – many of them much more inclined to have children than the current citizens of European countries – might keep the total numbers of people with European passports the same: but the changes of Europe as we know it today, in terms of culture, religion, and ways of life are likely to be of such magnitude that even the name of Europe may no longer be applicable to the continent. Europe will be different because its population will be very different from its population today. Its new population will build in a style that will be in keeping with its traditions, make and use food in ways in which it was done elsewhere over centuries, spend their time differently and possibly also dress in more colorful ways. Europe will change but the deterioration of the environment will not be the main reason for it.

Neither should the third statement of the 1st of April 2006 – that man-made and natural disasters are causing a huge loss of life and that disaster preparedness should be given priority attention, be accepted in its present form. The loss of human life due to preventable diseases is still incomparably greater than that due to disasters. No less than 3 million newborn babies die every year (2) from dis-
eases that are preventable, an (annual!) loss that is ten times greater than the cited consequences of the tsunami disaster in 2005. Many more people at other ages die from causes that could have been eliminated. Countries worldwide have donated generously to help the victims of the tsunami: had the same amount of money been used to deal with other causes of death, at least ten times more people could have been saved from death, disease and impairment. Disaster preparedness should be one of the concerns of public health authorities and of governments, but there are many other tasks that should be given priority.

And so the take-home message of the first of April of this year was a reminder that many of the statements that are being made about health need to be seen from more than one angle and carefully re-considered. The automatic and continuing reproduction of statements about public health based on our knowledge and perceptions of the world in previous decades (and taken out of their current or future context) is not only foolish: it is harmful because it stops us from seeing the wider reality and from selecting the best way to improve the world, at least a little.

References