



Editorial

Global Communication Is Central to Health

SCOTT C. RATZAN

The events of September 11th changed the world by initiating a new war to eliminate terrorism.

Even though these events may seem dreadful to everyone, two thirds of opinion leaders polled outside the USA said it was “good that Americans know what it is like to be vulnerable.” This December 2001 poll of 275 opinion leaders in 24 countries conducted by the Pew Research Center for the People and the Press also indicated that nearly three out of five who reside outside America believe U.S. policies were a major cause of the attack. Yet, on the other hand, only one in five inside America viewed U.S. policies as a cause.

Regardless of leadership opinion, many now are beginning to realize there are many factors necessary to make the world safer. While it is important to combat and eliminate the hatred and violence head-on, we must equally address the issues that contribute to the animosity.

To improve life for the millions who do not have the opportunity to attain the quality or the quantity of life associated with development, we must advocate for sharing of the 21st century’s wealth and opportunities.

The current world situation that breeds lifelong poverty drains human and societal resources, driving despair and hatred in the globalized “order.” Indira Gandhi warned of this years ago in describing the environmental plight: “Poverty is the greatest polluter.” She pointed out the obvious: As long as people are poor, their immediate issue is survival.

A new global insecurity has emerged as new and old threats make no distinction between races, nations, or regions. This insecurity has redirected resources for preparation against a possible human-made smallpox scourge along with continued spending for military might to advance security through strength.

In the past, the world has attempted to address such security issues with treaties. Recently, many of the important ones have not included the U.S. as a signatory.

As the treaty mechanism itself has become less effective, UK Prime Minister Tony Blair has suggested we must begin to profess responsibility and develop a new Moral Order—an “order” as a monument of everlasting good, a testament to those who have lost their lives as a result of terrorism.

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One of the first critical steps toward that new moral order is to invest in health and education to prevent more than 13 million people from dying each year of infectious and other diseases.

While we have known for years that people who are poor and illiterate are more likely to get sick, we now know much more about how ill health also creates and perpetuates poverty, triggering a vicious cycle that hampers economic and social development.

In December 2001, 18 of the world's leading economists and health experts presented a WHO report entitled "Macroeconomics and Health: Investing in Health for Economic Development." It views investment in human resources with health as a key factor in economic growth and social development. This emphasis is crucial to overcoming lifelong poverty for millions, as just a few health conditions are responsible for a high proportion of the avoidable deaths in many poor countries.

This report provides additional evidence that health gains trigger economic growth that can lead to poverty reduction. With communication as a crucial element in advocating health, this could translate into well-targeted measures that could save the lives of some eight million people per year while generating economic benefits of more than \$360 billion annually by 2015–2020.

On average, the cost of providing the essential interventions per person per year in low- and middle-income countries will be \$34 as of 2007. In contrast, over 100 times that amount is currently spent per person in the United States. Extrapolating this to provide the essential health interventions in the low-income countries, it would be about \$66 billion per year. If the costs were borne between the high-income countries and spent on effective, evidence-based interventions that would be developed with the low-income countries, the economic benefits would vastly outstrip the costs of the program.

By allocating economic resources to lead to improvements in people's health, we would be morally advocating an "order" with ideal investments in the prime asset of humankind. If the world's poorest countries are to have any chance of catching up with the rest, investment in health yields a high return.

This also means investing in education so that people are able to learn to their full potential, earn their living, and nurture their children, older people, or those with disabilities.

Nobel Laureate Amartya Sen identifies the inequities as "global omissions"—the absence of an adequately strong, globally shared effort to combat the lack of educational facilities and healthcare. He calls for an urgent need for a comprehensive program of global cooperation in eradicating illiteracy and untreated illnesses.

Even though we can use the recent exigency of health insecurity and bioterrorism and the known focal threats of HIV, malaria, and other infectious diseases (e.g., tuberculosis), we must also continue to leverage communication among other causes of ill health.

One example is that both the XIX Olympic Winter Games and the VIII Paralympic Winter Games in Salt Lake City in February 2002 will be tobacco-free events. This symbolizes the moral obligation to protect smokers and nonsmokers alike by prohibiting the use and sale of tobacco products.

A similar concept is the theme of World Health Day 2002—"Fit for Health." It builds on the ancient ideal, "mens sana in corpora sana"—a healthy mind in a healthy body. By focusing on fitness and physical activity, it too can contribute to improving the health of populations globally and of generating a positive sense of well-being.

The crucial role of communication to advocate that health be taken seriously at the highest levels of political leadership and also part of the daily diet and lifestyle of the global citizen is paramount. To be effective, this "moral order" would include health as a cornerstone in wider social, economic, and political contexts.

Our 21st century moral obligation for action is the right thing to do in a world with hatred and armaments commanding center stage. We have the opportunity to save the lives of millions of people, to promote health, and also to provide freedom from disease. The ultimate outcome will be happier people living in better communities and a global society we all can be proud to be a part of.