

Winners for Health

WHO and the International Olympic Committee (IOC) have signed an agreement to launch a "Winners for Health" program, precisely in order to enlist those members of society whose example and practice can inspire others, even though they are not formal health professionals. Olympic champions and popular sportsmen are role models for millions of young people. They can help convey the message that those promoting health don't want to take away things that are pleasurable, but rather to live their lives to the fullest and avoid damaging their health through such acts as misuse of alcohol and drugs.

Working with national organizations (including Olympic committees) which are being encouraged to organize health fairs, runs for health, and other activities, WHO will attempt, with the IOC, to stimulate and encourage national and international activities that underline the role of health preservation and protection as a fundamental human right for the individual and an integral part of national development. Here again, sport furnishes an excellent example: To the extent that a nation can provide good nutrition and a healthy way of life for its citizens, it can begin to produce individuals and teams capable of competing at all levels, from the village square to the Olympic stadium, at the same time adding to the joy of living by means of bodily and mental exercise.

Thus everybody can become a messenger for health. The message should be carried everywhere: Health is the only race where everyone is a winner.

REALIZING OUR HEALTH POTENTIAL

Carlyle Guerra de Macedo
Director of the Pan American Health Organization

This year's World Health Day theme, "Healthy Living: Everyone a Winner," has a special message for every man, woman, and child in the Americas. Given the proper knowledge of what is good or bad for our health and well-being, we have a responsibility to make the right kind of decisions for ourselves, our families, and our communities; and—once those decisions are made—we have an added personal responsibility to take action. When we do, we all become winners in the race for health.

We Are Decision-Makers for Health

The choices I am talking about relate mainly to what is now commonly referred to as lifestyle. Every day we are called upon to make choices which reflect our personal way of living and which also may have a direct effect on our mental and physical health. For

the most part, *we* are the ones who decide to smoke or not, how much to eat, what to eat, and whether or not to exercise, use alcohol, or take drugs.

Nowhere is the case more clear-cut than in deciding whether or not to smoke. The latest World Health Organization report on tobacco clearly states that the prevalences of smoking and the diseases it causes have reached epidemic proportions in the industrialized countries and are now rapidly rising in developing countries.

The harmful effects of smoking on health are widely known—among other things it is responsible for about 90% of all cases of lung cancer and some 75% of all chronic bronchitis and emphysema cases. It is estimated that one-third of all cancer cases are related to tobacco use.

At least one million premature deaths a year are estimated to occur worldwide because of the use of tobacco. In the United States, the report of the Surgeon General on cardiovascular diseases concluded that during the period from 1965 to 1980 there were over three million premature deaths among Americans from heart disease attributed to cigarette smoking and that—unless smoking habits change—as many as 10% of all people now alive may die prematurely of heart disease attributable to their smoking. The choice is obvious—tobacco or health; yet many people persist in smoking.

Up to now, I have been referring to those segments of our societies in the Americas that have the knowledge and the ability to make choices. But there also exist large segments which are not as privileged, victims of poverty and lack of education. These members of society are only *potential* winners in the race for health.

To reach these people, the Pan American Health Organization and its Member Countries have been working diligently in creating more personal responsibility among community leaders and workers in such areas as health, education, and agriculture. By providing better information and education on foods, nutrition, child care, immunization of children, and the need for safe water and basic sanitation, we are seeking to give everyone the knowledge to make basic choices affecting their health.

Through such initiatives, parents learn about nutrition, how to combat diseases, and how to stay well; and they become better able to meet their own needs and those of their families. With this basic knowledge they learn to make decisions and, by taking up their responsibilities, become winners in their own personal races for health.

Healthy Living Is Also a Social Responsibility

I would like to emphasize that personal or family responsibility for health through healthy living does not reduce the importance of community and social responsibilities, including those of governments. Healthy personal lifestyles in many ways depend on a nurturing social environment and express a commitment to improving society. At the global level, countries, governments, peoples, and communities

must be aware of the need to create social conditions which promote and facilitate healthy living by and for everyone.

As Director of the Pan American Health Organization, I urge all the people of the Americas to help us to improve the health of the hemisphere. As we observe World Health Day 1986, and in the years ahead, let us commit ourselves to taking action that will win health for all through individual self-reliance and community responsibility in a favorable social environment. "Healthy Living" truly makes "Everyone a Winner."

HEALTHY LIVING: EVERYONE'S DECISION

The disease patterns found in affluent countries are now appearing in the Third World, as fast food—with its risks of too much fat and "empty calories"—and sweetened soft drinks become increasingly universal. Cigarette billboards beckon everywhere. Alcohol production is rising fast, and per capita beer consumption in many developing countries may soon rival or exceed the traditionally high levels found in certain European countries.

The Paradox:

Longer Lives and More Sickness

Advances in public health are being countered by our disregard for healthy living. In Singapore 40 years ago, life expectancy was less than 50 years and the leading causes of death were tuberculosis and other infectious diseases. Today the average Singaporean can hope to reach age 71, but deaths from heart disease have doubled.

Cardiovascular diseases are responsible for almost half of all deaths in Ghana, and 13% of the population suffers from high blood pressure. In Sri Lanka, a significant number of people surveyed in one community had high blood pressure, diabetes, and angina—and were unaware of their conditions. A study of 1,100 Sri Lankan young men found that 70% were smokers.

Even worse for the industrialized countries, there is a nasty sting in the tail of the good news about increased life expectancy. Although a newborn child will likely live to at least age 70, life expectancy at the age of 45 is actually going down for those individuals who persist in lifestyle habits involving a bad diet, smoking, abuse of alcohol, and insufficient exercise.