



PUBLIC HEALTH



t is commonly assumed that the reasons for the massive improvements in the health of Europeans during the past 100 years can be attributed to the impact of scientific medicine. However, recent historical analysis of death rates from the different epidemics of infectious diseases which used to be so common has shown that this has not been the case. Most of the decline in deaths from the major killers had already occurred

before there were any effective treatments. The real cause of improved health can be credited to economic development, improved nutrition, sanitation and water supplies, improved housing standards and the adoption of birth control. This realization and growing concern at the cost of building expensive hospitals and running high technology services within them with apparently little impact on overall health has led to reappraisal of medical priorities throughout the world.

The World Health Organisation has adopted a strategy to achieve Health For All by the Year 2000, which is based on a shift of emphasis towards promoting good health and preventing disease and on community based primary medical care. It is clear that the major modern health problems of heart disease, stroke, accidents, cancer, alcohol and drug abuse, AIDS and suicide are best tackled by a health promotion and preventive medical approach. This approach recognises that most of what needs to be done to improve health lies outside the medical sector itself. In Spain generally, this new emphasis is becoming accepted but now Barcelona has begun to play a leading part in the establishment of a new city-based public health movement in



collaboration with cities across Europe as part of the World Health Organisation's Healthy Cities Project.

Eleven cities, including Barcelona, are working together to analyse the state of health of their citizens and to produce city health plans which will identify what action needs to be taken in each area of local public policy to achieve improvements in health — housing, the

environment, sport and culture, recreation, education and economic development will all be examined from the point of view of the impact on health of the policies which are adopted locally. During the next five years there will be regular meetings and exchange of information and experience between the cities so that they can learn from each other and further the cause of European internationalism through mutual understanding and a variety of cultural exchange. In March, Barcelona hosted a workshop to decide the measurements to be used by cities in describing their state of health and future planned meetings include one in Denmark, when children from throughout Europe will give their opinions on what a healthy city should be for children. Such has been the interest in the project that the World Health Organisation has been overwhelmed by more than 50 towns and cities wishing to join. Rather than turn them away, what has now happened is that national groups of collaborating cities have been formed in Finland, Sweden, Germany, Holland, Spain, France and the United Kingdom to enable as many cities as possible to take part. It seems that in this work, as in so much else at the present time, Barcelona is at the forefront of European development.

JOHN ASHTON PROJECT CO-ORDINATOR