

Subj Chron: CF/EXD/SP/1987-0024
See also: CF/EXSTMNT/1987-0005

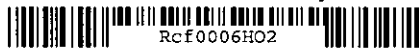
Address by Mr. James P. Grant
Executive Director of the United Nations Children's Fund (UNICEF)
to the
Seventh Congress of the
International Physicians for the Prevention of Nuclear War

Moscow
30 May 1987

“Mobilizing for Peace...Through Health for All”



UNICEF Alternate Inventory Label



Ref0006H02

Item # CF/RAD/USAA/DB01/1998-02026

ExR/Code: CF/EXD/SP/1987-0024

Seventh Congress of the International Physicians for Preve
Date Label Printed 13-Dec-2001

cover + 10 pp + ob



United Nations Children's Fund Fonds des Nations Unies pour l'enfance Fondo de las Naciones Unidas para la Infancia
Детскому фонду Объединенных Наций 联合国儿童基金会 منظمة الأمم المتحدة للأطفال

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MOBILIZING FOR PEACE ... THROUGH HEALTH FOR ALL

It is a special privilege for me to speak to an IPPNW Congress for a second time, both before and after your organization was justly recognized with the Nobel Peace Prize.

We are today addressing, in this distinguished forum, the two most critical issues of the late twentieth century. First, we are addressing the threatened mass tragedy - of nuclear war. Second, we are challenged by the mass tragedy already-in-progress of unnecessary ill-health and premature death which now afflict so many millions of men, women, and children on our planet.

On the first of these great causes, a cause in which this organization has already so distinguished itself, I would like only to remind you of the clear public statement which has been made by UNICEF's Executive Board:

"The massive accumulation of armaments reflects and aggravates international tensions, sharpens conflicts in various regions of the world, hinders the process of detente, exacerbates the differences between the opposing military alliances, jeopardizes the security of all States, heightens the sense of insecurity among all States, including the non-nuclear-weapons States, and increases the threat of war including nuclear war".

My theme today is the second of these two most critical issues of our times - the preventable tragedy of ill-health and early death. And to indicate the sheer scale of that tragedy, I would point out that the death toll among the world's under-fives alone is approximately equal to the tragedy of one Hiroshima bomb being dropped every three days. The daily toll of premature deaths among the world's people as a whole is, of course, very much larger still.

Action on child survival

But I would like to begin my address to this theme with some much-needed good news - good news which many of you here in this hall have helped to make, and good news which, I believe, points the way towards a new horizon in human health.

Two years ago, I had the privilege of addressing this Congress in the city of Budapest. On that occasion, I spoke to you about the prospects for a revolution in the survival and healthy growth of the children of the developing world. My theme then was that the annual toll of 15 million child deaths each year could be halved within ten years and at a relatively low cost. And as some of you may remember, I argued that this could be achieved through the mobilization of today's new communications capacity for the purpose of empowering the vast majority of families with existing low-cost techniques, such as full immunization and oral rehydration therapy, and with existing knowledge about such crucial things as breast-feeding, safe weaning, and birth spacing.

I am glad to be able to report to you today that, although there is still a very long way to go, major strides have been taken down that road in these last two years.

At the beginning of this decade, immunization coverage of children in the developing world was no more than five per cent. As a result, vaccine-preventable diseases were claiming approximately four and a half million young lives each year. But in the last four years, vaccine use has trebled and quadrupled as almost 80 nations have begun to accelerate their immunization programmes towards the goal of universal child immunization by 1990. Already, immunization coverage in the developing world has risen to almost 40 per cent. And even though measles immunization still lags behind, the result is that vaccines are now saving the lives of an estimated one million children every year in the developing world.

There is similar, but slower, progress to report in the spread of the oral rehydration therapy which, as you all know, can usually prevent - and at very low cost - the diarrhoeal dehydration which remains the single biggest killer of children in the modern world. Six years ago, only two or three per cent of the world's parents were empowered to use ORT. Today, the World Health Organization estimates that approximately 20 per cent of all the developing world's families are using the therapy. And the result is the saving of approximately half a million young lives every year.

This is not the place to report in detail on the struggle to promote other low-cost methods of protecting the lives and growth of children. Suffice it to say that immunization and ORT are beginning to lead the way towards a child survival revolution - in the context of primary health care. And it is a revolution which is already saving the lives of approximately one and a half million children each year.

The wider potential

On the occasion of this, your seventh international Congress, I would like to project this theme onto an even larger screen.

I would like to set before you the proposition that the same basic approach - the approach of mobilizing today's new communications capacity to inform and support the vast majority of people in putting into practice what is already known - could literally bring about a new generation in world health - for adults as well as children, for East as well as West, for industrialized and well as developing nations.

That potential arises from one of the most basic, and yet least acted-upon, facts about human health in our times:- the fact that almost all the major threats to human life and physical well-being are, at this point, more susceptible to informed actions by individuals than they are to further medical breakthrough or even increased professional services.

Those major health threats form a list which will be familiar to you all. They include:

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|-------------------------------|--|
| <u>Cancers</u> | which every year kill over 4 million people (over 50 per cent of them now in the developing world). |
| <u>Heart disease</u> | which claims an estimated two to three million lives each year in the industrialized world. |
| <u>Diarrhoeal disease</u> | which kills nearly five million young children every year - almost all of them in the developing world. |
| <u>Measles and tetanus</u> | which together kill another three million children a year - again, almost all of them in the developing world. |
| <u>Respiratory infections</u> | which claim the lives of an estimated three to four million young children every year, again mostly in the developing nations. |

And to this list must now be added:

- | | |
|-------------|---|
| <u>AIDS</u> | which, although not yet in the ranks of the world's major killers, may well claim the lives of anywhere between five and thirty million people over the next ten years. |
|-------------|---|

The combined impact of these major threats to human life and health may be summarized by the fact that, on present trends, they will bring about over two hundred million premature deaths in the twelve years between now and the end of this century.

The knowledge road to health

As I have already indicated, these major threats to human life and health have one crucial characteristic in common:

Almost without exception, they can be most effectively combatted by changes in human knowledge and behaviour. So much so that the toll they take could be at least halved by empowering people with what is already known, and by supporting them in using this information to take greater responsibility for their own and their family's health. And because this approach is relatively low in cost, these great gains could be made despite the difficult economic climate which now prevails.

The scientific and the medical profession - your profession - has, for example, patiently accumulated the knowledge which could empower people themselves to make swathing inroads into cancer and heart disease. It is a point familiar to you all. And it is a point which has been dramatically highlighted by the Centers for Disease Control in Atlanta, which has suggested that the average U.S. male today could add approximately ten years to his life expectancy by not smoking, by drinking alcohol only in moderation, by eating more healthily, and by taking regular exercise - four steps which are largely within the power of the informed individual rather than of the medical professional. (I need hardly point out that it would take many billions of dollars, annually, to add even one year to the average American life expectancy by means of medical technology, whereas this ten-year gain by means of changes in life-style is virtually cost-free.)

To take cigarette smoking as one example, the World Health Organization estimates that tobacco - promoted by an industry which spends over two billion dollars a year on advertising - is the main cause of many more than one million premature deaths each year and over 300,000 in the United States alone.

Turning to the developing world, it is also clear that medical science now knows how to enable families to protect their children from the great scourges of diarrhoeal disease, measles, tetanus, whooping cough, and acute respiratory infection - the handful of causes which account for more than two thirds of the fourteen million child deaths in the world each year.

If all parents were informed and supported in using ORT, in knowing the importance of a full course of vaccinations, in recognizing when respiratory infections threaten life, in knowing how crucial it is to breast-feed infants, to wean safely, and to space births at least two years apart, then those parents themselves would be empowered to save the lives of approximately seven million young children each year - and at very low cost.

Thirdly, let me also attempt to put the great and growing global threat of AIDS into this same context. AIDS - of which over 100,000 cases have now been reported from over 100 countries - may very soon enter the lists of the top five or six causes of premature death on this planet. And here too, the heart of the solution lies in behavioural changes which are within the power of the informed individual. As much as 90 per cent of all AIDS transmission could be prevented by three things - safe sexual practices, blood screening, and sterile means of injection.

Whether we are talking about the challenge of the major health threats in the industrialized world, or the greatest health problems of the developing world, or the new and universal threat of AIDS, I would therefore suggest to you that the challenge is principally one of informing and supporting people in applying what is already known.

It therefore follows that potentially the greatest ally in the struggle for world health in the remaining years of this century is today's new and unprecedented capacity for reaching out to communicate with, and to support, the vast majority of the world's families in taking more control over their own and their families health.

An information revolution for the poor

This new capacity to communicate - this information revolution - is well-known to all in the industrialized world. But it is perhaps less widely recognized that in the past two decades the developing world has also revolutionized its capacity to communicate. In the Third World today, the majority of people now have a transistor radio; the majority of communities now have at least one television set; the majority of children now attend school for at least two or three years; and the majority of adults can now read and write.

In addition, millions of primary health care workers have been trained in recent years, and hundreds of thousands of religious and voluntary organizations, women's organizations and youth movements, trade unions and co-operatives, now form a vast network of potential communications and support for the majority of the developing world's families.

But - and this is a very big but - today's health knowledge and today's new communications capacity does not automatically mean that one will be effectively used in the service of the other. To realize this great potential, now so grossly under-utilized, it will be necessary for nations to consciously mobilize all possible channels of communication and support in order to empower people to use today's knowledge.

This is what UNICEF means when it talks of "social mobilization" as a way forward towards the great United Nations goal of "Health for All".

There are, of course, many pitfalls on this road. In practice, the relationship between information and behavioural change is often a complex

one. And the realities of poverty - and in particular the realities of women's lives in poor communities - often make it more difficult both to receive new knowledge and put it into practice. And I would especially stress that today's enormous potential for "self-health" should not be used as an excuse to absolve governments from their responsibility for building comprehensive primary health care services.

Yet for all the problems, there is increasing evidence that a great opportunity now stands before us - and that this opportunity is beginning to be seized by a growing list of nations.

Mobilizing all for health

In several western industrialized nations - prominently the United States, Finland, and Belgium - the campaign to raise awareness of the links between smoking and both cancer and heart disease has suddenly been stepped up by a quite dramatic spontaneous mobilization of the mass media and of educational, health and legal channels. In the U.S. alone, there has been an eight per cent drop in cigarette consumption in the twelve months since Surgeon-General Koop made his dramatic announcement about the health effects of passive smoking. In Finland, it is now an offence to smoke in the presence of a pregnant woman. In Great Britain, we are also now seeing a decline in male smoking - and male lung cancers - as a result of a conscious campaign of public education. Also in the U.S., heart disease has begun to show signs of decline as a result of changes in lifestyle made by informed individuals.

Meanwhile in Eastern Europe and the Soviet Union, similarly unprecedented steps are now beginning to be taken to bring about behavioural changes designed to reduce the health impact of alcohol abuse.

Less widely known is the parallel mobilization now beginning to happen in the developing world. In the last three years, for example, nations such as Colombia, El Salvador, Turkey, Syria, Senegal and a score of others have doubled and trebled their immunization coverage by mobilizing all possible communications resources. Turkey in 1985 succeeded in fully immunizing 80 per cent of the nation's young children by using all channels - TV and radio, schools and mosques, health centres and work places - to inform parents about the importance of a full course of vaccinations. Similarly, in the much poorer context of Senegal, immunization levels have this year been boosted to 75 per cent - the highest level in Africa - through the active leadership of the President and the widespread involvement of all the nation's organized resources - the school-teachers, trade unions, employers, entertainers, sports organizations, religious leaders, the mass media, and of course the health services themselves.

AIDS: Opportunity as well as tragic disaster

At the same time, we are also now beginning to see a dramatic mobilization of today's communications capacity to combat the threat of Acquired Immune Deficiency Syndrome - AIDS. In New York City, San Francisco and elsewhere

today, we are seeing quite dramatic changes in sexual practices in response to public information campaigns. And although I would stress AIDS not in isolation but as yet another example of a major threat to human health which is most effectively fought by empowering people with behaviour-changing knowledge, I would also like to say a special word about the unprecedented efforts now beginning to be mounted to stop the spread of this particular disease.

The effort to combat AIDS must involve the greatest exercise in communication, and probably the greatest efforts to bring about behavioural change, that the world has ever seen. Fortunately, these efforts need not be mounted in a vacuum. We need not "invent the wheel" in order to respond to this sudden new challenge, because we have a wealth of recent experience - from the smoking and alcoholism efforts in the industrialized countries, and from our even more relevant child survival efforts in the developing countries - which can now be applied to this urgent new task. Clearly, that task will be the most difficult and challenging in the developing countries, but that is also where we now have demonstrably effective experience in informing, educating, motivating, and mobilizing the mass public - the poor and the illiterate as well as the rich and the educated - into health-protective actions.

But if one contrasts the tragic consequences of AIDS with the long-established trend lines of death and disablement from these other causes, one sees again the propensity of the world to respond to the "loud emergencies" which command headlines and attention, while virtually ignoring the far more devastating "silent emergencies" of on-going deprivation and death. The world will, surely, mount a massive effort to combat AIDS. But will it, simultaneously, continue to ignore the tens of millions of other deaths and suffering which could be readily prevented?

It will be disappointing indeed if the effort to control AIDS was mounted for AIDS and AIDS alone. For it is precisely this kind and scale of social mobilization which must be extended to all countries - and sustained - to combat dehydration, respiratory infections, vaccine preventable infections, heart disease, and cancer - the core group of health problems which represent, as we have seen, the greatest threats to human life and health in our times.

It is also important to note that the same infrastructure which countries have been building to support vaccinations and other child, mother and community health interventions will be indispensable when an AIDS vaccine is developed.

I would therefore suggest that the massive campaign being mounted to combat the spread of AIDS ought to be embarked upon, and learned from, as part of a wider effort to empower people everywhere to protect and promote their own and their family's health by their own well-informed and well-supported actions. And if that were to happen over the next decade, then it may be that even the dark cloud of AIDS will prove to have a silver lining of hope.

The political commitment

This revolution can be brought about. It is not a fanciful theory. But it does require a strong political commitment to do it.

- Two years ago, the political leadership in Turkey took the decision to mobilize the nation for immunization. That decision is now saving the lives of over 20,000 Turkish children every year.
- Four years ago, senior medical professionals in Egypt persuaded their government to mobilize for the promotion of ORT. That decision has halved the death rate from diarrhoeal disease and is saving the lives of many tens of thousands of Egyptian children each year.

Other opportunities abound. Reports now coming in to the World Health Organization from over thirty projects around the world are showing, for example, that deaths from acute respiratory infections are being halved at very low cost by applying what is already known.

It can be done. The practical experience of the 1980s has clearly shown that the toll taken by the five or six major threats to human life and health could be cut in half within a decade from now.

The crucial role of the medical professional

In all of this, it goes almost without saying that the role of the world's physicians - in their individual capacity, in their professional organizations and in their most influential forums such as this Congress - is a crucial one.

In UNICEF's work, particularly in recent years, we have witnessed again and again that the medical profession can either be a powerful accelerator or a powerful break on attempts to mobilize nations in support of the survival and growth of children. Where the medical profession uses its sometimes almost god-like influence to inform and guide the communications effort, to supervise health messages and endow them with authority and credibility, and to spread the word through its speeches, its meetings, its publications and by the powerful example of its daily professional practice - then the chances of success are multiplied many times over. If, on the other hand, the medical profession takes the attitude that health is best left to professionals, if it sees people as passive recipients of health care rather than as active participants in health promotion, then today's great potential will be tragically wasted.

I would therefore appeal that, from this most distinguished gathering of representatives of the profession, there should go out a call to all medical professionals everywhere to lend their leadership and expertise to the cause of mobilizing every possible means of communication and support in order to help empower people with today's knowledge in order that they might take more control over their own and their family's health. Your profession could lead a "Grand Alliance" against ill-health and early death - a Grand Alliance which

could result, before the year 2000, in the prevention of more than 10 million deaths a year in the human family.

If this can be done, then I believe we stand on the brink of a great non-technical breakthrough in the health of the whole human family - a breakthrough which, if we were to make the push now, could well result in the prevention of perhaps one hundred million premature deaths before the year 2000.

The implications of such a change could, I believe, go even beyond the great improvements in physical health which are certainly now possible. For the empowering of people to improve their own health also helps to build the confidence, the sense of increasing control over one's own destiny, which is a crucial and often missing element in the whole development process. And secondly, in as much as such a change would benefit the world's children, it would also make a major contribution to the long term development process. For there has always been an obvious but profound connection between the mental and physical development of children and the social and economic development of their societies.

Indeed, I would go further and suggest to you that if the world's leaders, and in particular the two super-powers, were to jointly declare their commitment to achieving the health breakthrough that is now possible, then it would also help to create a bond of common endeavour in a common ideal, and so contribute to the building of that confidence in co-operation which is so essential for the achievement of that other great human goal, the goal of world peace.

A new ethos

I would draw one more parallel between the stand which this organization has taken against the threatened tragedy of nuclear war and the stand which I believe ought now to be taken against the actual tragedy of avoidable ill-health and preventable death.

Few organizations have done as much as this one to change the prevailing world ethic on the question of nuclear weapons. I would suggest to you today that a parallel change in the global ethos is also a pre-condition of ending the mass tragedy of unnecessary ill-health and constraining the growth of a new danger of catastrophic dimensions - and which defies all boundaries, whether geographic or political.

For at different times in the past, we have seen that seemingly unchangeable evils such as slavery, colonialism and apartheid have been changed - or are being changed - because public and political opinion has eventually reached the point where it deprives such ideas of the oxygen of tolerance. I would therefore urge this organization which has done so much to cut off the oxygen of tolerance from the idea of stockpiling nuclear weapons to also use its enormous respect and influence to help cut off the sustenance of acceptance from the idea that it is normal for so many millions of men,

women and children to die unnecessarily each year - and for many millions more to live on with ill health and poor growth.

It is surely intolerable - as intolerable as slavery or colonialism or apartheid - for nearly 40,000 young children to be dying every day, and for millions more to be malnourished, stunted, blinded, brain-damaged and disabled by infections and malnutrition which the world could now prevent on a significant scale and at a manageable cost.

The best or the last

To close with one final twinning of the two great causes which this organization espouses, I would point out that forty years ago saw not only the birth of a new and terrible weapon and a new fear of war, but also the birth of the United Nations and of a new hope for peace. That contrast underlines the extreme alternatives which now face the human race - a contrast summed up in President Kennedy's words that "We have the power to make this the best generation of mankind - or the last".

Thanks to the efforts of organizations such as this to combat the threat of nuclear war, I do not believe that this will become the last generation of mankind. Given the renewed efforts of organizations such as this to sound the world-wide call for a new era in world health, I sincerely believe that this could become the best generation of mankind - and the first to bring the benefits of progress to all.