

Public Health: Moving from Debt to Legacy

1986 Presidential Address

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Thank you Dr. Sencer, President Carter and everyone who is here because they believe in public health.¹ In 48 hours, The Carter Presidential Center will be dedicated and will be given to the people of the United States. Part of that complex addresses the presidency—not the presidency of President Jimmy Carter, but the institution of the presidency, and how what one president does affects all presidents thereafter. Theodore Roosevelt, for instance, and the Panama Canal, a story that was addressed again by President Carter. The most striking lesson that I have learned in the past year as the President of the APHA is the continuity of public health—what we do in public health is the product of the past. The direction, the breadth, the depth of the stream is dependent upon the people that walked before. Isaac Newton said that he was able to see so far only because he stood on the shoulders of giants, and that's the way it is in public health. Just as certainly as the past determines what we do today, so are we determining the force of the current in the future. I would like to talk this morning about three things: the shoulders that we stand on, the crisis that we face in health and how we are handling it, and the legacy that we hope to leave.

The Past

First, let me focus on two moments in history—1872 and 1886. Eighteen seventy-two was a special time for us. It was the beginning of the APHA when Stephen Smith invited a group of “refined gentlemen”—both criteria have now been dropped—to discuss the possibility of a national sanitary association. At that time, only three states and the District of Columbia had boards of health. (As an aside, Stephen Smith returned for the 50th anniversary of the APHA, and at the age of 99 he made a speech which he started by saying, “I would like to talk about the future.”) What were the times into which APHA was born? In 1872, Jesse James had robbed his first train, Yellowstone Park was created, and Susan B. Anthony was arrested in Rochester, New York for attempting to vote in the November 5th presidential election. The environment was right for this organization. Pasteur published, in that year, his paper on fermentation and Ferdinand Cohen published the first major work on bacteriology. In addition, the US Congress passed a bill assuring equal pay for equal work, and our first consumer protection bill was signed.

Fourteen years later, in 1886, the APHA was already a vibrant and vital organization, as it met in Toronto. At that time there were papers given on sanitation, hog cholera, and night soil. But the presidential address that year was a surprise to me, because it is applicable today. The presidential address covered such things as the role of states versus the Federal Government, the health burden of alcohol, environmental sanitation, and the problem of smallpox vac-

ination injuries. Three specific items from that presidential address require mention—one was the suggestion that the statesman and the sanitarian had to work in harmony. Today, we would say the public health worker and the politician. The second was a statement that health is sometimes too precious a commodity for the particular market in which we are compelled to make our purchases. And third—astonishing to me in light of a similar debate that is now going on in international health—was a debate on the usefulness of single interventions. The essence of the debate was that if you reduce death rates for one cause, death rates increase for other causes, and you re-establish the previous overall death rate. We now know, of course, that is not true and our success in public health is the accumulation of one program after another finally bringing us to the health level which we enjoy today. So it has gone, annual meeting after annual meeting until here we are at the 114th annual meeting—with a view of public health that is spectacular, not because we are so great, but because of the shoulders we stand on.

A word about those shoulders. The giants are people, such as the great Hungarian, Semmelweis, who taught us to look at numerators and denominators and reach logical conclusions. In his case, the logical conclusion was “wash your hands.” “We,” of course, includes John Snow, William Farr, Edward Jenner, Benjamin Rush, Walter Reed, Wade Hampton Frost, Joe Mountin, and so forth, but this misses the fact that there are thousands of people who made their ideas reality. When I think of the children who are in school today would otherwise have been dead, or crippled, or mentally retarded but for the immunization program in this country, it becomes clear to me that it is not just because someone developed the vaccine, but it is also because someone bottled it, and ordered it, and shipped it, and tested it, and administered it. Each child benefited because no one in that human public health chain failed to do their part—and that is amazing. Equally amazing to me is the challenge not yet met. In this world, 10,000 children die each day of vaccine-preventable diseases, 70,000 a week. If we had to enter a stadium every Friday afternoon, face the parents of the 70,000 children who died that week, and explain to them what went wrong, then we would understand the global crisis on the front line.

But the greats are more than individuals. For 114 years, the American Public Health Association has provided yet another important shoulder to stand on so that, collectively, we have become a giant as certainly as any of the greats that I mentioned. We are a non-governmental conscience that has provided a way for workers in every state and every field to influence the individual and collective health of this country and the world.

I've had the good fortune to work with quality people in smallpox eradication, at CDC, with universities and foundations. I can assure you that your APHA staff is made up of quality people. They even compensate for the elected officials! They are professionals. They orchestrate your input. They make a difference in Washington, and maybe you didn't know this, but they lobby for the health of people, not for the health of the health industry, and not for the health of the

¹This Presidential Address was delivered on Monday, September 29, 1986, during the Opening General Session of the 114th Annual Meeting of the American Public Health Association, in Las Vegas, Nevada. Address reprint requests to William H. Foege, MD, MPH, Executive Director, Carter Presidential Center, 1 Copenhill NE, Atlanta, GA 30307.

public health industry. They lobby for the health of people, and we can be proud of them. Because of this history that we build on, the improvement in health during this century has been spectacular. You've all heard the figures of an increase in life expectancy of over 25 years, which comes out to two days a week, or seven hours a day. It means that for the 750,000 hours that have elapsed since the beginning of the century, life expectancy has increased for the average American by 15 minutes each hour, which means that your net investment is only 45 minutes if I talk an hour today.

But we can't be satisfied with that. Two years ago, President Carter inaugurated a study called "Closing the Gap" to ask the question, "With this improvement in life expectancy, are we realizing the gains that could be realized?" The results were dramatic. They showed that despite that improvement in life expectancy, two out of every three deaths in the United States are premature. Two out of three years lost before the age of 65 is an unnecessary loss, because we are not using the information that we have.

The Present

If the past in general has been so great, how are we doing in the present? We have a picture of hope, success, and progress, but it is on a bleak background. There is a crisis. Yesterday, the APHA Executive Board met with the Institute of Medicine Committee, which has been charged with looking at the future of public health. That IOM Committee felt that the logo that is behind me is inaccurate,*² that the fissures should extend farther to the left because the problems continue, from social injustice in South Africa, to the hopelessness and despair of much of the developing world, to the heartbreak of drugs and alcohol, to those who endure a lifetime of abuse, to the fatalism of many, the problems seem endless. How can we rationalize 30 years after having polio vaccine, the fact that there will be 4,000 to 6,000 children crippled around the world this week? I'm so pleased with the stance and direction that Surgeon General C. Everett Koop has given in smoking, and yet it worries me that people in this Administration prevent him from testifying on tobacco issues. Does it make you wince when Congress, in the face of convincing public health evidence, weakens the laws on hand guns? It simply makes me think Mark Twain was right—we have the best Congress money can buy! And how are we to feel comfortable about a Senate that debates an amendment by Senator Nancy Kassebaum to cut our contributions to United Nations agencies by 20 per cent, and not only debates it, but passes it? That is the law of the land. Can we quietly accept the Justice Department setting the rules of public health, making scientific determinations about the danger of infectious diseases such as AIDS? And what is going on in my state, Georgia, when we, this year, executed a retarded man? How can we handle an increase in DTP vaccine from 11 cents to \$11 in just a few years?

And how can we tolerate the promotion of tobacco products when we know the cost? In the case of the tobacco industry, there seems to be no final answer to the question, "How irresponsible can you get?" I say that deliberately, knowing that there are representatives of the tobacco industry in the room today, and I would like them to know that the public health people of this country do not want to put up with this any longer! On behalf of APHA, I testified before

Representative Henry Waxman on tobacco advertising, and I made the point that the 1,000 death-a-day burden is increasingly paid by women, by Blacks, and by the poor. In a country that requires truth in advertising for polio vaccine, we allow tobacco companies to promise women liberation and give them bondage, to promise Blacks freedom and give them slavery, to promise the poor a rich existence and then steal their very lives! At one time, I saw tobacco advertising as cold, calculated murder. I now characterize it as a crime of passion. Those tobacco executives and advertising executives involved are willing to condemn people to death to satisfy their lust for money.

These counter forces are all a part of the crisis, but part of the crisis reflects our own success. Success in immunization doesn't allow us to shift money from that program to others. The price of no polio is that we continue to have a program but, because of our success, we are asked to do more things and we *should* do more things. The agenda seems to grow, but the resources don't grow accordingly. For instance, CDC has fewer employees now than it had 40 years ago when it dealt with only a single disease—malaria.

We could consume the morning on what goes wrong, but it would only be part of the story. The rest of the story is how, despite the crisis, public health continues to produce. And this is the good part—to see the strength of the infrastructure, with sanitation, immunization, core public health activities continuing even when we divert resources to AIDS. The good part is that public health has never been so powerful, so beneficial, or so relevant. The infectious disease revolution has been joined in the past 20 years by a cardiovascular revolution. We are in the early years of a cancer-control revolution. Two weeks ago, Texas unveiled its cancer control program, and I would urge every state to get a copy of that document. It's a comprehensive plan to prevent, to diagnose, and to treat. And, we are now getting a glimpse of the violence-control revolution in this country. This spectacular involvement of public health people is changing the world, and it's changing the social norms. We should give awards to the people working in California on the first plane that will go around the world without refueling. Despite their financial crisis, when they received a large check, a donation from a tobacco company, they sent it back saying they did not want to launch their plane on the cancerous bodies of millions. We should thank Bubba Smith who stopped advertising beer when he realized advertising does sell products!

The Future

Finally, what is the legacy we will leave as part of the public health continuum? Victor Sidel likes to quote Einstein: "that perfection of means and confusion of goals characterize the age." What are the goals of public health? They are nothing less than the health and quality of life for everyone. It's not a provincial statement, it's a global one. And how do we do that?

- Number 1: We must safeguard the philosophy of public health. If our philosophy gets confused, our actions become busy work. We are forced to repeatedly remind ourselves that the philosophy of public health is social justice. And that is unique, because the philosophy behind science is to discover truth, the philosophy behind medicine is to use that truth for a patient, but the philosophy behind public health is to use that knowledge for everyone, for social justice. It's clear, for instance, that segregation compromised both the quality of life and health and, therefore, civil

*Editor's Note: Dr. Foege was referring to the logo for the APHA 114th annual meeting, depicting the theme, "Local Health Services: Crisis on the Front Line."

rights was and continues to be an interest, indeed a duty, of APHA. And that is why this year the Executive Board voted to present the Presidential Citation to Winnie Mandela in recognition of her work for social justice. While this award has been tendered to her, it demonstrates the conditions in South Africa that we have been hampered in our communications, but we look forward to the day when this award can still be presented to her.

- Number 2: It's not just nice, but it's mandatory, for us to think globally. We must safeguard the global view. There is no longer any way for us to move away from the global village. What happens in Zaire ultimately affects your country. This is an interdependent world. For instance, the recession of the developing countries in the past six years has cost the United States economy one million jobs. And we are reminded that a frost thousands of miles away can affect the price of our morning coffee. The same is true in health. For decades, despite the absence of smallpox in this country, the United States was held hostage and had to pay \$150 million a year to keep smallpox out of the country. But, it isn't just that diseases in other countries cost us money, they cost us our humanity. As Schweitzer put it decades ago, "It is unthinkable that civilized people would keep to themselves the wealth of means for fighting sickness, pain, and death." We are going to make it or not make it in this world, based on whether we can inspire a new order where our first allegiance is to our global citizenship and our second is nationalistic. The forces are quite the opposite to that philosophy. As Admiral Hyman Rickover once said, "If the Russians would send a man to hell, we'd say we can't let them beat us to it!"
- Number 3: Safeguard the long-term view. Both the long-term and global views require attention to nuclear weapons. Victor Sidel spent time on this last year, but I must repeat some of it. On April 16, 1953, President Eisenhower gave what has been described as the best speech of his life. Speaking to the American Society of Newspaper Editors, this soldier by profession said, "Every gun that is fired, every war ship launched, every rocket fired signifies in the final sense a theft from those who are hungry and not fed, those who are cold and not clothed. This world in arms is not spending money alone, it is spending the sweat of its laborers, the genius of its scientists, the hopes of its children." It continues to be that—a theft which keeps a child from being immunized or getting food.

Some of you heard John Kenneth Galbraith this summer as he talked about the problems we are in with military budgets and his conclusion that the first step must be to stop nuclear testing. Testing is done to *improve* weapons, and if we are willing to stop nuclear tests, we are drawing a line in the sand and saying we won't cross it, we won't have bigger weapons. And then, we can start the process of reducing the arms that we have. As Larry Levinger in a *Letter to a Russian* tried to explain, the American people don't deal with this. He says: "All over America, we are struggling to know is a Honda better than a Volkswagon? Can computers sell cows? Does Saturn have air? Do prunes cause diabetes? Will magnetism heal bones? We want to know how to bake righteous muffins and grow back hair. We are just a curious people, poking around the house, reading the corn flakes label and answering the phone. But, we do not want to know

what the Pentagon knows. How to make and deploy such efficient fire that not a drop of blood will boil but merely vaporize. We do not want to know what the Pentagon plans. We are going to give up human history, past and future. We are going to give up breathing and eating for an idea, and the idea is simply, my friend Dimitri, that you shall not have your way with us."

In 1954, when Albert Schweitzer delivered his Nobel speech, he spoke of the importance of making a beginning so that some measure of trust might arise among nations. He said trust is the working capital for all undertakings. But, he warned that the abolition of nuclear weapons will become possible, only if people decide that we should get rid of them and only if that world opinion can then influence our leaders. Tomorrow you will have an opportunity to go to the Nevada Nuclear Test Site and you will be able to say in the name of the APHA, in the name of reason, for the sake of those who will follow, that we're willing to take that step, because, as Galbraith has said, the ashes of Communism and the ashes of capitalism will be indistinguishable. We may be small, but we are part of world opinion.

Carl Sagan, who you will have the opportunity to hear tonight, has said "what a waste it would be after four billion torturous years of evolution, if the dominant organism contrived it's own self-destruction." There is no issue more important than the avoidance of nuclear war. You can sign up for that trip [to the Nevada Nuclear Test Site] near the registration desk. I'm pleased that we have in the audience today, Dr. Bernard Lown, who is one of the people who have helped to take that step of trust and who will be one of our leaders tomorrow at the Nuclear Test Site. As you know, the International Physicians for the Prevention of Nuclear War, organized by Dr. Lown and Dr. Chazou from the Soviet Union, last year, won the Nobel Peace Prize.

Two final priorities in the legacy that we leave: we often compare the weapons budget to the public health needs not addressed, as I have just done. Lester Brown has suggested that it is not likely that money saved from weapons systems will go into public health. He has suggested that instead, we become part of a movement to redefine security. For most people in the developing countries, security is not found in protection from a neighboring country. Security is instead found in having food today, in going through life without being crippled, in having top soil, in having a job, in not losing the forest, in seeing your children grow up. If it can be defined accurately, then security funds can be used for security. You say this is unlikely. Costa Rico did that decades ago. They disbanded their army for even greater security.

Finally, we must safeguard one of the most important activities of 114 years—defense of those who for some reason can't defend themselves. The vision of public health must cover all people. But because of the way the market system works, the special clientele of APHA will continue to be the poor, the homeless, the unimmunized, the hungry, the addicted, and those who simply find the system overwhelming. If Congress and the Administration had to look them in the eye, rather than looking into a TV camera, we wouldn't have a crisis on the front line. Let me assure you, we will survive any crisis that involves funding, political support, popularity, or cyclic trends, but we can't survive the internal crisis, if we become provincial, focus totally on the short term, or if we lose our philosophy of social justice. These 114 years are prologue. Because we care about the future, the public health workers of this country must once again turn crisis to opportunity as we ensure the world a rational health future.