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Strengthening public health in China

Since the emergence of COVID-19 in December, 2019, in Wuhan, China has recorded 92 000 cases and 4749 deaths and seems to have brought its outbreak under control. While the COVID-19 pandemic has shaken Chinese society, the country's long-term future health challenge will be tackling a growing burden of non-communicable diseases. According to the Global Burden of Disease Study (GBD) 2019, the four leading causes of morbidity and mortality in China are ischaemic heart disease, stroke, chronic obstructive pulmonary disease, and lung cancer, and the leading disease risk factors are tobacco smoking, high systolic blood pressure, and dietary and air pollution risks.

This 2020 special issue of *The Lancet Public Health* highlights important areas for public health in China in the coming years: an ageing population, an unaddressed mental health burden, protection of young people, and reduction of inequalities.

The population aged over 70 years in China is projected to reach over 300 million in 2060-meaning that healthy ageing will become ever more important. The study by Longfei Jia and colleagues provides a detailed picture of the prevalence and risk factors for dementia and cognitive impairment in China. Importantly, the authors found that the leading risk factors associated with cognitive decline include rural living, educational attainment, smoking, hypertension, and diabetesindicating that future interventions could target modifiable risk in populations with greater identified burden. The country-level analysis of GBD 2019 data by Tingling Xu and colleagues found that prevalence of moderate and severe vision loss has increased far more rapidly since 1990 in China than in other G20 countries driven especially by population ageing. The importance of preventive intervention for healthy ageing is reinforced in the study by Junning Fan and colleagues, which found that frailty was most prevalent in older women, but also that signs of frailty in younger adults were associated with increased risk of mortality.

How China's rapid socioeconomic and demographic changes might affect the mental wellbeing of the population cannot be overlooked. In their Comment, Michael Ni and colleagues highlight the unaddressed burden of mental ill health in China. Although evidence suggests that the prevalence of mental disorders

in China has increased, data are sparse. For Ni and colleagues, there is an urgent need to better understand the epidemiology of mental health across the Chinese population and to reduce cultural and organisational barriers to prevention and treatment.

Children and adolescents can be particularly vulnerable to poor mental health. In their Correspondence, Chun Wang and colleagues highlight the alarming prevalence of self-harm among adolescents in China and urge the Government to go further in establishing mental health services for young people. Protecting young people needs to be central. For example, the large national survey by Zhenping Zhao and colleagues cautions that public health agencies in China should carefully monitor e-cigarette use, which they found has increased between 2015 and 2019, to ensure that use does not increase, especially among young people.

Finally, regional and urban-rural disparities and inequalities are far too evident in China. In the study by Xi Li and colleagues, which found that as many as 10% of participants had high risk for cardiovascular disease, risk varied substantially by region and was highest in north-eastern provinces. Public health in China should aim to reduce geographical inequalities by tailoring interventions to locality and working through primary care to engage with local communities.

Such a localised community approach to public health can help to equitably reduce the burden of non-communicable diseases across such a large and diverse country. For Zhongiue Li and George Gao, community-level public health with a focus on detection and education has been key in the country's response to COVID-19.

China has robust systems to respond to infectious diseases and is well placed to develop and strengthen community public health systems to tackle non-communicable diseases and health inequalities. Reform, modernisation, and investment in a prevention-focused primary care system that integrates with public health services could improve health across the country and ensure that China's trajectory of improving health continues and leaves no one behind.

■ The Lancet Public Health

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For more on mental health in China see Articles
Lancet Psychiatry 2020;
6: 211-24

For more on primary care in China see Review Lancet 2020; 395: 1802–12