The road to Rio

Paved with good intentions

Next week world leaders meet in Rio de Janeiro for the United Nations conference on the environment and development. Since the conference was first proposed in 1988 its agenda has been constantly revised and its radicalism watered down. At the time of writing declarations on natural resources, the atmosphere, and biological diversity are expected to be signed. Although it is regrettable that consensus has been so difficult to achieve, it should hardly surprise. At least since the industrial revolution development and the environment have been regarded as natural enemies.

As the first country to industrialise, Britain was soon confronted with the downside of development and its grim effects on health. As early as 1842 Chadwick, in his report The Sanitary Condition of the Labouring Population, drew attention to the relation between the accumulation of excrement, overcrowding, and lack of clean water and the incidence of disease and premature death. The first comprehensive analyses of urban mortality confirmed "the inequality with which deaths are distributed in different districts." In 1858 in his first report Simon drew the firm conclusion that the observed excesses were largely due to environmental and social deficiencies "which could be remedied."

But in the 1850s the world contained only about one billion people. At this level of population the oceans and the air were still sufficient to dilute and absorb waste and the consumption of the world's renewable resources was not beyond the capacity for regeneration. Recently, concern about the consequences for the global ecosystem of the consumption of energy by the world's escalating population—currently just short of 5·5 billion and likely to reach 10 billion by the year 2050—and the accumulation of its waste has forced the United Nations urgently to reappraise the relation of health with the environment.

In 1987 the Brundtland Commission's report, Our Common Future, urged that the present generation should so order and contain its economic development as to bequeath the environment in a healthy condition to its successors. This theme was taken up and applied specifically to health in Implementation of the Global Strategy for Health for All by the year 2000, a remarkable report just published by the World Health Organisation's Commission on Health and Environment as its main contribution to the conference in Rio. The report concludes that although there is a powerful synergy between health, environmental protection, and use of sustainable resources health has rarely received due consideration or priority in environmental or development programmes.

The report points to three main global objectives. The first is to achieve a sustainable basis of health for all by slowing down and then halting population growth as soon as possible and by promoting patterns of consumption among the affluent that are consistent with ecological sustainability. The second is to provide an environment that promotes health, and the third is to make all people and organisations aware of their responsibility for health and of its environmental basis.

In pursuit of the third objective—a wider awareness—the BMJ's recent series of articles on health and the environment is particularly timely. Anyone with any doubts of the urgency for action in Rio need look no further than these articles (soon to be published by the BMJ as Health and the Environment). They describe vividly how man, the main cause of environmental degradation, "has become its principal victim." Thus while the estimates of the growth of the world's population are revised upwards and the profligate consumption of energy continues to escalate, the spread of deserts due to altered rainfall patterns, land degradation, ozone depletion, and acid rain are already threatening food production. A fifth of the world's population lacks sufficient food. During the International Drinking Water Supply and Sanitation Decade, which ended in 1990, safe water supplies were extended to 81% of urban dwellers and 58% of rural inhabitants; despite this, because of further increase in the population the absolute number of people still without access to this basic service continued to grow.

On global warming the authors of the articles conclude that although the case for an upward trend is not yet proved beyond doubt, the potential risks to health, indeed to survival itself, for many millions of people are so dire that "as with acute medical emergencies there is no time to wait for the return of the investigations which would confirm the diagnosis." Unfortunately, there is little evidence that national governments have so far given much heed to this message. Thus while the United States Environmental Protection Agency has estimated that to stabilise atmospheric carbon dioxide emissions will have to be cut by at least half, Britain has agreed only to stabilise emissions by 2005 and the United States has so far refused to agree any limits at all.

One of the more controversial themes of the articles is the attribution to the car and private motoring of an almost criminal role in the deterioration of environmental health. The world's 400 million car fleet not only provides the largest single component of photochemical smog and consumes far more energy per passenger per kilometre travelled than most forms of public transport but at the same time is creating escalating problems of traffic congestion and noise in cities.
Motor cars also consume a phenomenal amount of space and
within Los Angeles, for example, account for no less than two
thirds of that huge city’s land area being given up to
motorways, other roads, and areas for parking. In many parts
of the world the car also dictates overall urban planning and
transport policies in favour of the car owner. Thus in terms of
recreation facilities and shops offering cheap and healthy
foods the choice offered to the car owner is usually much
greater than that offered to households without cars (in
Britain two fifths of the total).

The crucial paradigm is the currently unstable relation
between population, health, and a sustainable environment.
One implication of the instability is that a new approach to
equity between the developed and developing world is
urgently needed so that wealth currently lost in waste and over
consumption can in future be invested to reduce poverty and
ignorance. Furthermore, from now on new development
policies must be assessed for their impact on health as well as
the environment. The achievement of these aims will require
major changes in the attitudes of people as well as of
governments.

At all levels the health professions in their traditional role as
advocates and agents for both private and public health have a
key part to play in drawing attention to the serious threat to
global health occasioned by a growing “energy hungry and
throwaway society.”

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A meeting of rich and poor

Poverty and environmental destruction are linked and must matter to us all

The ideological divide between East and West has ended, and
the major split in the world now is between rich and poor.
Last week the World Bank warned that world poverty is
increasing and pointed out its intimate link with environ-
mental destruction.1 “Alleviating poverty,” said the bank, “is
a moral imperative and a prerequisite for environmental
sustainability.”2 The bank, whose record on alleviating
poverty has not always been admirable, now estimates that
$75 billion a year will be needed by 2000 to carry out essential
programmes on water and sanitation, electric power, road
transport, carbon dioxide emissions, agriculture, population,
and female education.

It looks increasingly as if world survival will depend on
the rich not only meeting the costs of environmental improve-
ment but also shifting resources to the developing world.
But the early signs on next month’s “earth summit” in Rio de
Janeiro are that the rich and poor are squabbling.3 President
Bush has finally been persuaded to attend but has suggested
that he will agree to nothing that will harm the United States
economy in the short term for fear that he will not be re-
elected. This is a wholly inadequate response. The dialectic
of democracy, said one of Mr Bush’s predecessors, Thomas
Jefferson, is the unremitting conflict between the hopes of the
many and the interests of the few. The world desperately
needs rich and poor to get together, and it must be for the
rich—with their power and resources—to take the lead.

The rich and poor confront each other most starkly over
Third World debt, and Dorothy Logie explores the problem
on p 1423. In 1990 the developing countries received £28.3
billion in aid but had to pay back £34.5m in interest on their
debts.4 That year every man, woman, and child from the poor
world had to pay the rich world £17.40.5 In several countries
debt exceeded gross national product.6 Poverty and hunger have increased, the quality of water supplies and educational
and health services has fallen—and, as a direct consequence of
debt, estimates Unicef, half a million children die each year.7

The debt crisis grew out of the oil crisis of the ’70s. Commercial banks were flooded with “petrodollars” and
were desperate to lend them. They encouraged the bigger

1 Chadwick E. 1842 The sanitary condition of the labouring population of Great Britain. Edinburgh:
University Press, 1987. (Brundtland Commission’s report.)
4 World Health Organisation. Implementation of the global strategy for health for all by the year 2000:
world health assembly, item 17.)