Editorial

Investing in health

There is an increasing evidence base examining the effectiveness and cost-effectiveness of public health interventions, although it might be cogently argued that as public health professionals we do not always make the economic case as powerfully as we might. How we mobilize this evidence base and the barriers and challenges to doing so are explored by Richardson\(^1\) in this journal, and are relevant to us in whatever setting we are working. One challenge we must confront are the concerns that effective public health interventions may merely postpone and may even extend periods of morbidity and costs at the end of life. This provides us with a real impetus to develop and test interventions that promote health and well-being in older adults and to move beyond life expectancy as the sole measure of public health success.

Papers in this edition of the journal contribute further to the evidence base for public health practice with a systematic review on school-based interventions and reduction of BMI in children\(^2\)—is there enough evidence now to routinely implement these in practice or do we need more? Other areas where huge strides have been made include tobacco control, but data shows that rates of smoking in England and Wales are now four times greater in the most disadvantaged compared with the most affluent, contributing significantly to health disparities\(^3\) highlighting an urgent need to understand how best to reduce smoking prevalence in more disadvantaged groups.

However, some key interventions that really work—and date back to the Victorian period in the UK—are still not fully implemented across the world. Basics like piped water remain elusive in parts of the former USSR and Eastern Europe despite recent improvements.\(^4\) As public health begins to work more closely again with local authorities in England, there is an intriguing paper which demonstrates an association of physical activity behaviours with urban form—the layout of our towns and cities\(^5\) revealing the potential opportunities to work more closely with urban planners in these new structures. Arguably, the equivalent to the great Victorian achievement of sanitation now needs to be replicated in creating urban environments that allow and support walking and cycling for transport, leisure and social interaction.

As economic recession hits across many countries with attendant effects on health and mortality, we present a paper which suggests that recent increases in coroners’ use of narrative verdicts in England may affect the reliability of local and national suicide rates\(^6\) and hence our ability to monitor key changes in this area at this crucial time.

In our Public Health Education and Training section Tulchinsky\(^7\) reflects on the critical role of Schools of Public Health and their equivalent and highlights the crucial role these have played and continue to play particularly where other public health structures are less well developed.

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References