

EDITORIAL

Development of a public health programme in Greenland

PETER BJERREGAARD

Centre for Health Research in Greenland, National Institute of Public Health, Copenhagen, Denmark

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The dramatic development of Greenlandic society in the twentieth century and the concomitant improvement of health in the country has been documented in several publications [1,2]. Public health interventions have played their role, especially the large-scale tuberculosis campaigns of the 1950s. The mortality from tuberculosis decreased from an awesome 700 per 100,000 person-years (35% of all deaths) in 1950 to 26 per 100,000 10 years later. Mortality from acute infectious diseases decreased at a similar pace. This was due to case finding, isolation, and treatment, but also to vastly improved housing conditions and nutrition [3].

A changing disease pattern calls for changing health policies, and in 2003 the Greenland minister of health decided to establish a public health programme. The work is in progress and the final programme is expected to become politically endorsed in 2006. The input to the programme will come from four main sources: a dialogue with the general public scheduled to take place during 2005; political views; epidemiological research results; and discussions in a steering group composed of civil servants and health professionals.

The steering group has selected four areas to be further evaluated and it is likely that, in addition to existing intervention programmes, the future programme will include themes from these areas. Existing intervention programmes include suicide prevention, preventive measures directed at children and pregnant women, and a dental health programme. The new areas are: alcohol and violence; diet and physical activity; reproductive health; and smoking. The epidemiological background for choosing these is outlined below.

Alcohol and violence

Average alcohol consumption has decreased considerably in Greenland since a peak during the 1970s and 1980s. It is now, at 12 litres of pure alcohol per adult per year, at the same level as the (high) consumption in Denmark. The drinking pattern is, however, characterized by occasional consumption of large volumes (binge drinking), which increases the likelihood of violence, social problems, and injuries. More than half of children born during 1960–85 reported having experienced alcohol-related problems in the home, and it is known from other studies that growing up in a disharmonious family with alcohol misuse significantly increases the risk of later psychiatric disease and suicidal thoughts.

Diet and physical activity

Type 2 diabetes was virtually unknown in Greenland in 1960 but its prevalence now surpasses that in Denmark, a pattern similar to that observed among the Inuit and other indigenous population groups in Canada and the US. This is thought to be due to an increased reliance on Western food and a decreased level of physical activity in combination with genetic susceptibility. The prevalence of obesity is similarly on the increase among adults as well as children. With regard to cardiovascular disease the situation is less obvious. While mortality from ischemic heart disease seems to be slightly lower than in the other Nordic countries, and decreasing, the mortality from other heart diseases and from stroke is higher [4]. The pathophysiology of cardiovascular disease among the Inuit is far from clear, but the lesson from

diabetes in combination with the rapid rise – or high level – of the prevalence of traditional risk factors warrants a major preventive effort in spite of the absent increase in disease incidence.

Reproductive health

During the 1970s and 1980s the incidence of both gonorrhoea and syphilis was very high. They have decreased considerably but the gonorrhoea rate is, at 1,162 per 100,000, still much higher than in the other Nordic countries. Chlamydia is now the most prevalent sexually transmitted disease. HIV/AIDS is confined to a rather small group of socially disadvantaged and alcohol-dependent persons. Another major reproductive health problem is the fact that although contraception is widely available and free, half of all pregnancies are terminated by an induced abortion.

Smoking

The prevalence of smoking is at a record high, as is mortality from tobacco-related cancers and chronic obstructive lung disease. About 70% of adult men and women are current cigarette smokers. The smoking prevalence decreased somewhat during

the 1990s but mortality from tobacco-related diseases continues to rise due to the time lag.

It is satisfying to realize that the public health programme in Greenland to a large extent will be based on epidemiological evidence. Furthermore, in addition to four problem-centred working groups, a fifth working group has been established with a view to ensuring the monitoring and evaluation of the programme, and developing guidelines for future public-health-related research.

The development of the Greenland public health programme is an outstanding example of interaction between science and politics in the field of public health.

References

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