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SEPTEMBER 11TH AND BEYOND:
WHAT IS THE ROLE FOR PUBLIC HEALTH?

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As Maureen McCue so aptly describes in this second issue of the International Journal of Global Health, public health professionals can and often do play a crucial role in responding to natural disasters like Hurricane Mitch. But with the world still shuddering from the events on September 11th when over 5,000 people were killed in terrorist attacks on the World Trade Center and the Pentagon, public health professionals and those who educate them are now also compelled to examine and expand their roles in responding to a new global threat – now evident to all.

How can our unique constellation of experiences and expertise, both in the academy and in the field, help to address such an unprecedented event? Though it is clear that any long-term resolution will, by necessity, require fundamental changes in political, social and economic policies; we propose that public health professionals have an obligation to participate actively and publicly in responding to the current crisis. The very foundations of our work offer, perhaps, the best rationale.

According to the Ottawa Charter for Health Promotion (1986), among the fundamental conditions and resources for health are peace, education, justice and equality. Modern conceptions of health such as this, though they may seem inadequate in the face of the September 11th events, recognize that these underlying factors are essential elements of the foundation for human well being and global health. Furthermore, the inexorable linkages between health and human rights necessitate health professionals’ involvement in working to respect, protect and fulfill the human right to health as defined in the Universal Declaration of Human Rights and other key human rights documents.

Working from both public health and human rights foundations, public health professionals need to utilize their expertise to contribute to public dialogue and political action which will insure a reasoned and just response to the terrorist attacks in September, as well as to critical analysis of government policy abroad. The latter is necessary not because U.S. foreign policy was the primary impetus behind the attacks on innocent American civilians, but because where the necessary preconditions for global health are lacking, human life and health remain at risk. Students have much to learn by sharing in careful and critical analysis of our government’s actions both domestically and abroad – through the health and human rights lens. For public health professionals, such critical analysis is both a patriotic act and an educational duty.

Health educators understand the value of human life and instilling in our students that value, not in a hierarchy of lives hyphenated to nation/state origin, but as equal life
and equal death, is an educational objective worthy of our public health foundations. Our goal should be to prepare our students to discover and create while honoring the value of human life in every action they take as professionals and citizens.

Activist and advocacy activities long used effectively in public health – education, research, lobbying, letters to the editor and editorials, public forums, direct action – can influence both public opinion and decisions made by public officials. Advocacy is particularly effective when professional and grassroots organizations work together; and public health professionals are well prepared to assume leadership roles for coalition building and networking. Such activities offer invaluable experiential learning opportunities for students and should be part of every health education professional preparation program.

One example of such an activity has been initiated by the Center for Human Rights at the University of Iowa. Dubbed “All Johnson County Reads the Same Book,” the project is promoting community-wide reading of the novel, The Last Summer of Reason, by Algerian author, Tahor Djaout. The mass book reading will be followed by community discussions and dialogues centered around the lethal consequences of the rigid interpretation of religious texts, regardless of the religion represented – certainly a timely topic today. Public health and health education professionals in higher education are particularly well-positioned to provide organization, resources and leadership for thoughtful and unbiased educational efforts such as this.

Public health has been defined as “ensuring the conditions in which people can be healthy” (Institute of Medicine, 1988). Public health workers and health educators in many settings have long contributed to ensuring such conditions through health education and health promotion, contributing to the formulation of public policy, assurance of services, assessment, and other efforts. In these historic times, the ideal of the attainment of health as a fundamental right of every human being has perhaps never been more threatened on a global scale. Now is the time for the individual and collective human resources of public health professionals to be fully utilized.

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