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Health: Whose Responsibility? The remarkable medical advances in the past and the marvelous technology of the present lead us to believe that our major health problems can be solved if only we can find the money to support the necessary research.

It isn't so!

Some experts believe that there won't be any major medical breakthroughs in the future. For example, there won't be a single cure for cancer—for cancer really is many diseases with multiple causes.

The "instant" age we live in—instant coffee, frozen dinners, instant television replay—leads us to unreasonable expectations in all areas of life. We've come to expect instant solutions whatever the health problem regardless of whether it resulted from our own carelessness, neglect, excesses, or abuse.

A recent Louis Harris poll showed that people have unreasonable expectations of what physicians can do to cure disease, and that people grossly underestimate the seriousness of major diseases, believing that cures exist when none do, or that major breakthroughs will occur in their lifetimes. We've developed an attitude of "a pill for every ill."

Medical and health personnel have contributed to this attitude. In our efforts to humanize practice, unrealistic expectations may occur. For instance, a retarded child can never attain normalcy, no matter how effective the rehabilitation program. This isn't a criticism of such programs, since improvements can often be demonstrated, but parents must be made aware of their child's limitations, and learn to live within the restrictions imposed by these limitations.

It has been said that "man does not die—he kills himself." He kills himself by overeating or eating unwisely, by drinking and smoking too much, by exercising too little, by too many stresses, and by careless use of automobiles and other high-powered machinery.

The major progress in health in the future will depend on individuals themselves, on their willingness to take responsi-

bility for their own health practices. It will also depend on motivation to act against pollution and other environmental health hazards.

It can be argued that the American lifestyle continues to be a major health hazard, and that changing lifestyles will do more for the nation's health than any amount of curative medicine. Our affluence ruins our health. Our health problems, in contrast to those in many other countries, result from our ability to buy rich diets, to ride rather than walk, to use labor-saving devices, to imbibe excessively in alcohol and other drugs.

What can be done? Only what individuals really want to do. And that's where Extension comes in.

Because health is literally everyone's business, many different groups can and should be involved in the dissemination of health-related information. And health should be viewed very broadly, encompassing the prevention of accidents and illness as well as the maintenance of high level physical and mental well-being.

The traditional role of Extension in transmitting and disseminating the results of research applies to health as well as other fields of endeavor. Of course, Extension personnel *are* involved in health, and have been for a long time. Early in the present century, the University of Wisconsin made an outstanding contribution in the fight against tuberculosis—then the leading cause of death—through the promotion of testing of cattle for tuberculosis. The relationship of other animal diseases, such as rabies or Bang's disease, to humans is well-established and control of these diseases in animals is a contribution to human health.

Saving lives through the prevention of farm accidents contributes to health. Safe garbage disposal, pure water supplies, and clean air also contribute to health. Safe practices in food preservation, home safety, and family relationships are also related to health.

Since health is so closely related to nutrition, could more attention be directed to this area? Could manufacturers be encouraged to use less sugar in the cereals and less salt in the soup?

Can people be motivated to eat more nutritious snacks instead of junk food? Can schools be encouraged to substitute fruit and other nutritious snacks for the ubiquitous candy machine? Can restaurants be encouraged to make available smaller meals (why can't an adult order a child's portion?), serve more low-caloric meals, provide skim milk, have more vegetables and fruits on the menu? How can people be

motivated to order more nutritious meals when they're available?

Does Extension have a role in encouraging the development of more bicycle and hiking trails? Do we truly understand the relationship of music and art appreciation in the reduction of stress and the promotion of mental health? Are there ways of encouraging more participatory sports and other types of exercise?

Can Extension personnel influence the amount of violence on television? And in a television age, do we recognize the importance of reading for pleasure?

Are there more effective ways of working with existing resources in helping people learn how to live healthy lives? Can local libraries be encouraged to develop health-related collections, design displays and exhibits on health topics, and the like?

These are but a few of the unanswered questions that can be addressed by Extension faculty. Indeed, Extension has a role in promoting a more healthful lifestyle for the clients it serves.

The Forum is a place for **Journal** readers to express their feelings on any topic they think is important to Extension. Don't make it longer than one double-spaced page. Send to George Blume, editor, Cooperative Extension Service, Virginia Polytechnic Institute and State University, Blacksburg, Virginia 24061