Editorial: are we ever ready for change?

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Editorial: a changing world

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In a casual conversation with friends reminiscing about the good old days (as perceived now) I was reminded about the reason why I established Dynamics of Human Health (DHH) by the common phrase "the world has changed"!

The word 'changed' is frequently and freely used to claim innocence and gives the perception that change occurs on its own. You see, we are too accustomed to regularities in the nature and we even teach them at schools, e.g. the four seasons, although over time we have dismissed small irregularities such as a change in temperature as a blip in the system. And one day we woke up to realise how regular the blips are in the system. Can we claim that we were never aware of the changes happening around us?

Change due to evolution has been slow and at a set pace (millions of years), while in the twentieth and twenty-first century— numerous changes are observed in one's life time. The causes or reasons for this rapid pace of change surely cannot be explained by evolution alone; the only other influencing process is human development and behaviour. In the name of science and progress we never replace what we take away or destroy from the industrial revolution to nuclear testing to technology and space travel.

There is no doubt that human beings can do almost anything. With the current level of technological advancements we do much more now for humanity and we could do even more in the future than is currently happening. We can further utilise technological advancement only if we adopt a holistic approach to development rather than develop for the sake of development. For example, we refer to technological advancements and gadgets as 'solutions' to justify their development, which raises the question 'solutions to what problem?' (Said. Shahtahmasebi & Millar, 2013).

But there is a high price to pay. In an earlier editorial (Said Shahtahmasebi, 2014) the notion of degrees of freedom was presented in which change is not only inevitable but as a result of our actions. For every advancement that we achieve we lose some degree of freedom.

We trade off perceived gains/improvements in our lives as a result of social and technological advancement for loss of degrees of freedom including changing social norms and expectations. Trade-offs occur in all aspects of life, e.g. due to advancements in technology, medicine and human development (e.g. culture, language and freedom of expression).

Medical technology has certainly improved health outcomes, but the loss of freedom may be related to a new relationship between changes in behaviour and capabilities of medical intervention. For example, are we more likely or less likely to look after our health given that medicine appears to have a remedy for most common illnesses: either through medication or surgery or both? The availability of options such as taking a pill or surgery to lose weight, or lung/heart transplants reduces the likelihood of behaviour modification. But in order for someone to live another person must die, or become 'spare parts' donor. At the micro-level, organ transplantation is a real medical option. It is plausible that even though organ transplantation is not a straightforward option and depends on many factors to be successful— nevertheless it is an option. The mere possibility of transplantation may attenuate any risk associated with behaviour that increases the likelihood of poor health and death. For example, after decades of advancements in medical technology and prioritising health care services, heart disease and cancer are still the top causes of death.

There is no doubt that change is inevitable, the whole of the universe is designed to evolve and change. The reason we inflict loss of degrees of freedom is because micro- and macro-level changes are not always in line with the direction of universal change. Life on earth is supported with finite resources and as these resources deplete faster and faster, life support becomes less and less sustainable. Our perceptions, attitudes and expectations of science and technology may have blinded us to the fact that there is only so much that can be achieved with finite resources. Thus, we enjoy some of the benefits of science and technology but we lose some degrees of freedom by becoming physically and mentally dependent on them.

It seems to me that the dynamics of human behaviour is affecting change all around us, including our own individual and social behaviour (the feedback effect). These changes will have consequences on health and social outcomes, e.g. environmental changes will affect health outcomes not known previously, or, cultural and social changes will impact on personality and mental wellbeing. The question is whether we have changed in the right direction so that our health services have the capacity to provide appropriate care, or, whether society has changed fast enough to be responsive to changed outcomes.

It is safe to assume that 'change' did not happen on its own and is the result of the cumulative impact from our behaviour on earth. How ready are our health and social services to respond to health outcomes as a result of change?

References

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