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## *In this volume*

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### **Electronic publication and submission of papers by floppy disk or email begin**

The year 1995 brings us to volume 49 of the JECH. The year will be the time for preparing for our jubilee volume (volume 50) aimed at celebrating the expansion of social and preventive medicine and epidemiology in Britain, North America, and Europe.

But 1995 will also have important developments of its own. Several supplements will be published with papers from throughout Europe and we propose to take a major step into electronic publishing, initially by means of electronic networks.

The form of electronic publishing will enable us to publish supplementary material for articles which would otherwise

be too long (or have too much tabular data) and to publish conference abstracts easily and quickly. For a selected group of papers it will also enable us to increase the number published and give us a shorter time from acceptance to publication. The proposal is that the electronically published material will be indexed as usual in the journal itself and also, we hope, in the abstracting services.

Authors will be advised in the near future about the details which will be linked to submission of papers on floppy disks or by email. In all these cases some graphic presentations may cause difficulties but tables of data should be no problem.

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Our wide geographical spread of papers continues, including information from the former Eastern bloc. Several papers including one from the large US nurses study consider further evidence about the relationship of early life experiences to heart and other diseases in adulthood. Various aspects of screening for cancer and other illnesses are covered, together with consideration of instruments for surveying health and well-being as perceived by individual people.

Our Editorial continues the debate in this and other journals about the philosophy and value of health promotion. Across Europe there can be few more pertinent questions

than those about the opportunity costs of various interventions aimed at promoting health and welfare. Professor Kelleher, a member of our Editorial Board, refers to the so-called Mad Hatter's Tea Party (from the book *Alice in Wonderland*) which may not be very familiar to colleagues who did not grow up with middle class English children's books! The idea is that individuals as different as a dormouse, a white rabbit, a hat-maker ("mad" from mercury poisoning) and Alice (in Wonderland) can sit and talk together (at the tea table) but achieve nothing – not even proper communication – because of vastly differing modes of thought and perception. Good luck with the rest of the story!

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## *Editorial*

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### **Health promotion: shades of Lewis Carroll**

#### **Public health policy**

The promotion of health is increasingly being adopted into public health policy in countries around the European region. There are now several examples of countries where proactive approaches have been considered on the lines of the World Health Organization's strategy, *Health for all by the year 2000*. The United Kingdom's *Health of the Nation* emphasises specific targets based around population changes in traditional risk factors for coronary heart disease, accidents, and cancers.<sup>1</sup> Within my own country, Ireland,

the National Department of Health has produced this year a document entitled *Shaping a Healthier Future* which advocates measurement of health services in terms of health gain and social gain.<sup>2</sup> There is a renewed emphasis on primary care; reoriented proactive services generally and health promotion strategies appear in virtually every aspect of health care delivery. Later this year a more detailed health promotion strategy is expected. Its contents are unknown but it is likely to maintain the emphasis on cross sectoral responsibility for health that has been a