

IMPROVING GLOBAL HEALTH: FORECASTING THE NEXT 50 YEARS

**PATTERNS OF POTENTIAL  
HUMAN PROGRESS**

VOLUME 3

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### Cover Art

The cover art is a representation of an oil painting by Margaret Lawless, artist for the PPHP series. Ms. Lawless is a contemporary abstract artist whose works in various media portray aspects of the human condition, human progress, and the interaction of humans with nature. In this particular painting, she emphasizes the potential inherent within all human beings to experience the full life cycle that health and a healthy environment enable. The S-curve suggested by the red band represents global transitions in health and life expectancy, the further improvement of which is the focus of this volume.

**IMPROVING GLOBAL HEALTH:  
FORECASTING THE NEXT 50 YEARS**

# **PATTERNS OF POTENTIAL HUMAN PROGRESS**

**VOLUME 3**

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# Preface

***Improving Global Health: Forecasting the Next 50 Years* is third in the Patterns of Potential Human Progress (PPHP) series, a series that explores prospects for human development and the improvement of the global human condition. Each volume considers one key aspect of how development appears to be unfolding globally and locally, how we would like it to evolve, and how better to move it in desired directions.**

The volumes emerge from the Frederick S. Pardee Center for International Futures at the University of Denver's Josef Korbel School of International Studies. The International Futures (IFs) project has worked for more than three decades to develop and use the strongest possible long-term, multiple issue capability for exploring the future of key global issues. The philosophical basis of the IFs project includes these beliefs: (1) prediction is impossible, but forecasting is necessary to help us understand change and to support policy development; (2) analysis should be built around alternative possible futures; and (3) forecasting tools should be as open and transparent as possible.

The first PPHP volume focused on the central issue of global poverty reduction, presenting first a long-range, base case forecast—an elaboration of the path we appear to be on. It then explored an extensive set of variations in that path tied to alternative domestic and international interventions. The second volume provided a long-range, base case forecast for global advances in education participation and attainment, and then developed a normative scenario, looking for aggressive, but reasonable, patterns to enhance global advances in formal education.

This third volume drills down into arguably the most important of all issues for humans: that of health. It recognizes the remarkable epidemiologic and demographic transitions that, while long underway, have gained, lost, and regained momentum in the last 50 years. During that half century to 2010, global life expectancy increased from just over 50 years to approximately 70—yet about 20 countries have a lower life expectancy today than they did two decades ago. This volume explores where the next five decades may take

us. We consider changing mortality and morbidity patterns, including the remarkable ongoing reduction of global deaths from communicable diseases, a pattern that hopefully will be consolidated and extended. We consider also the growing burden of noncommunicable diseases and injuries, especially as populations age nearly everywhere. And we examine possible alternative patterns of 15 specific causes of death and disability and their impacts.

The volume analyzes not only the drivers of change in human health, including advances in income, education, and technology, but also a number of more immediate risk factors (undernutrition, obesity, smoking, road traffic accidents, inadequate water and sanitation, indoor and outdoor air pollution, and climate change) and their health impacts. We focus heavily on the role of human effort in shaping health outcomes, as well as the roles of the natural environment and biological constraints.

Human health interacts closely with broader human development. Therefore, this volume devotes attention not only to the drivers of change in health prospects but also to the ways in which those prospects affect broader demographic and economic futures. Among the advantages of the IFs modeling system is the manner in which it links health forecasting to larger human systems.

Putting these pieces together, this volume uniquely looks forward across half a century at human health for 183 countries and the regions and groupings into which they fall, exploring a broad range of causes of disease and death, probing the deeper and more immediate drivers of change in human health prospects, and linking that analysis to the dynamics of the larger human development system. Our analysis recognizes the great uncertainty around such forecasts and attempts to explore the bases for alternative health futures and their implications. We hope this broad and deep exploration can contribute to the collective effort to assure improved health and well-being for peoples around the world. Those who wish to explore or extend our analysis will find the full IFs system at [www.ifs.du.edu](http://www.ifs.du.edu).

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# Acknowledgments

**The authors again owe special thanks to Frederick S. Pardee, who conceptualized the Patterns of Potential Human Progress (PPHP) series that this volume continues. We much appreciate Fred’s ongoing support for the work of the International Futures (IFs) project and his contribution of energy, enthusiasm, and ideas, including the special responsibility he has taken for the country-specific supporting data tables that accompany the PPHP volumes and appear on-line at the IFs website.**

The International Futures simulation modeling system, the core tool of this volume, has been developed over 30 years under the leadership of Barry Hughes at the Josef Korbel School of International Studies, University of Denver. Thanks to the support of the University and the Frederick S. Pardee Center for International Futures, the complete system, including both a downloadable version and an on-line version, is available for all users at [www.ifs.du.edu](http://www.ifs.du.edu).

IFs, developed originally as an educational tool, owes much to the large number of students, instructors, and analysts who have used or reacted to the system over many years and have provided much appreciated advice for enhancement. The first two volumes of this series provided names of many of those, and without repeating the list we thank them still again (as we do earlier team members, listed also in those two volumes).

IFs team members who made special contributions to this volume include Jonathon Chesebro (data), Brent Corby (data), Eric Firnhaber (photographs), Mariko Frame (photographs), Kia Tamaki Harrold (background working papers), Mohammad Irfan (data and systems support), Josiah Marineau (data and help system), Lisa Matts (supporting research), Jonathan Moyer (web support), Britt Reiersgord (references, photographs, and more), Graham Smith (references), Mark Stelzner (data), Marc Sydnor (photographs and project support on earlier volumes that made this one easier), and Julie Thompson (supporting research). Most especially we express tremendous appreciation

to Janet Dickson, who worked closely with the authors throughout the writing and production process. She brainstormed with us, kept us on task, edited the volume, and oversaw the production process.

This volume owes a special debt of gratitude to Colin D. Mathers, Mortality and Burden of Disease Coordinator, Department of Health Statistics and Informatics, World Health Organization, and a founding leader of WHO’s Global Burden of Disease project. From our first approach to Dr. Mathers, requesting information about the methods of the GBD project, he was unfailingly helpful. He provided unpublished data from the project and the coefficients used in its formulations, and he patiently answered our questions about the GBD project’s methods and approaches. He also reviewed the penultimate manuscript and provided feedback that has saved us from many errors.

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Most recent funding for IFs has come from Frederick S. Pardee, the United Nations Environment Programme, the U.S. National Intelligence Council, and the European Commission. Other developments within International Futures have been funded in part by the Strategic Assessments Group of the U.S. Central Intelligence Agency, by the Frederick S. Pardee Center for Longer Range Global Policy

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At Paradigm Publishers, Jennifer Knerr, longtime editor and friend of the IFs project, was wonderfully helpful and supportive, and the hands-on editorial guidance provided by Carol Smith and Jeska Horgan-Kobelski was invaluable. At Oxford University Press in New Delhi, we are grateful for the warm support and partnership of Neha Kohli, Associate Development Editor, and Urmilla Dasgupta, Commissioning Editor. We are extremely appreciative of the beautiful design and layout work on all of the series volumes by Trevor Bounford and Denise Goodey of Bounford.com. And with this volume, we were extremely fortunate to welcome Eleanora von Dehsen to our team; we much appreciate her help in standardizing our presentation.

Finally, the authors built on tremendous foundations of work directed toward improving global health. The hope that motivated our work was that we might contribute something to that ongoing stream of effort by exploring the possible trajectory of global health and its broader human development consequences over the next 50 years. Other than the authors, of course, none of the named individuals or institutions bears any responsibility for the current status of the model or for the analysis presented here. Their support is nonetheless greatly appreciated.

Barry B. Hughes  
Series Editor

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# Abbreviations and Acronyms

AIDS	acquired immune deficiency syndrome	LEB	life expectancy at birth
ARI	acute respiratory infection	LES	linear expenditure system
ART	Antiretroviral therapy	MDGs	Millennium Development Goals (UN)
BMI	body mass index	MICS	Multiple Indicator Cluster Survey (UNICEF)
BRICs	Brazil, Russia, India, and China	NCDs	noncommunicable diseases
CDC	Centers for Disease Control	NGOs	non-governmental organizations
CDs	communicable diseases	OAP	outdoor air pollution
CEC	Commission for Environmental Cooperation	OECD	Organisation for Economic Co-operation and Development
CO <sub>2</sub>	carbon dioxide	OLS	ordinary least squares
COPD	chronic obstructive pulmonary disease	PAF	population attributable fraction
CRA	Comparative Risk Assessment project (WHO)	PM <sub>2.5</sub>	particulates with a diameter of 2.5 micrometers or less
CSDH	Commission on Social Determinants of Health (WHO)	PM <sub>10</sub>	particulates with a diameter of 10 micrometers or less
CVD	cardiovascular disease	ppm	parts per million
DALYs	disability-adjusted life years	PPP	purchasing power parity
DHS	Demographic and Health Surveys (USAID)	RR	relative risk
EC	European Commission	SAM	social accounting matrix
EPP	Estimation and Projection Package	SI	smoking impact
FAO	Food and Agriculture Organization (UN)	SIR	smoking impact ratio
GBD	Global Burden of Disease project (WHO)	UNEP	United Nations Environment Programme
GDP	gross domestic product	UNFPA	United Nations Population Fund
GHIs	Global Health Initiatives	UNICEF	United Nations Children's Fund
GISMO	Global Integrated Sustainability Model	UNPD	United Nations Population Division
GMAPS	Global Model of Ambient Particulates	USNIC	United States National Intelligence Council
GNI	gross national income	WDI	World Development Indicators (World Bank)
GUAM	Global Urban Air quality Model	WHO	World Health Organization
HDI	Human Development Index	WHOSIS	World Health Organization Statistical Information System
HIV	human immunodeficiency virus	WHS	World Health Survey (WHO)
IAP	indoor air pollution	WSH	water, sanitation, and hygiene
ICD	International Classifications of Disease	YLDs	years lived with disability
ICSU	International Council for Science	YLLs	years of life lost
IFs	International Futures computer simulation model		
IHRs	International Health Regulations		
IIASA	International Institute for Applied Systems Analysis		
IPCC	Intergovernmental Panel on Climate Change		





