

One Health Une santé

Collective global amnesia. One Health's greatest challenge

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The biggest threat to the health, well-being, and persistence of humanity is not COVID-19 or climate change. It is not the extinction crisis or the destruction of wild habitats nor global terrorism or the rise of artificial intelligence. It is collective global amnesia. This metaphoric disorder is manifested by the tendency of societies to recognize a new potentially catastrophic threat, react to it for a few years and then move on. Like its real counterpart, transient global amnesia, societies' recall of recent events vanishes, and we cannot seem to remember where we are or how we got there. COVID-19 dominates our attention now, but it was avian influenza a few years before. Plastic pollution is much on our minds today, but persistent organic pollutants were the challenge when I was in university. One disaster replaces the other in popular and political attention, even when the preceding disaster is unresolved and still looms over us. By shifting our attention and resources from one acute threat to the next, we retain the very circumstances that allow the next disaster to emerge. One Health is at risk of suffering from this disease with its obsession on infectious (and more recently viral) diseases.

Prognostications of doom have long been part of the human experience. They have swarmed around us throughout history from the Four Horsemen of the Apocalypse, to the anticipated environmental collapse at the start of the Industrial Revolution, to the looming decay of societies and ecosystems due to climate change. Optimists point out how frequently deadlines for demise have passed without event or when humanity has "invented itself" out of a disaster, as evidence that our ability to foresee Earth-shattering events is bad. Psychologists explain that apocalyptic predictions help us make sense of a seemingly senseless world and fulfill a psychological need to predict. But as more causes of doom keep getting heaped upon us, it is getting harder to rely on history repeating itself and assume humanity can continue to thrive in this new era of pandemic disease,

deprivation, and destruction. Confronting the persistent plague of collective global amnesia is a critical strategy to cope with a future that is increasingly difficult to predict.

The causes of collective global amnesia are threefold. First, our short attention span leads us to discount predictions of doom if we fail to personally experience their effects within a few years. Second, once something is no longer new, we normalize it and become accustomed to its presence. Third, with so many warnings and so little apparently within our control, warning fatigue sets in. The implication of collective global amnesia is that we do not sustain the necessary attention and investment in the "inter-apocalypse stage" to address the circumstances that gave rise to the current threat. As a result, we fail to build resilience against the next inevitable shock.

Collective global amnesia leads to the ongoing pattern of forgetting about the root causes of our biggest threats. It causes us to impulsively focus on a single, definable response to avert a forecasted apocalypse rather than sustaining focus on the suite of circumstances that lead to the anticipated disaster. Our impulsivity favors quick fixes that are publishable, patentable, or politically expedient, with inadequate attention on the unintended consequences of what we do. Afflicted societies wander off the task of creating and sustaining social and environmental circumstances that allow humans, animals, and future generations to reach their full health potential.

The most characteristic sign of collective global amnesia is the tendency to keep repeating the same questions because we selectively forget the answers found during the last catastrophic event. As a result, those afflicted with collective global amnesia treat the latest health challenge of the Anthropocene as a new puzzle that can be scientifically or technically resolved but provide only ephemeral investment in the tough problems at the core of our increasing vulnerability. This is linked to a characteristic preference for short-termism at the expense of long-term interests.

I first coined the term "collective global amnesia" as a metaphor for the policy and research funding agendas I encountered as a researcher working at the interface of humans, animals, and their shared environments. I traveled around the world investigating the causes of new diseases that not only threatened humans but also animals. It was easy to find funds to discover and describe new problems, track their effects, and determine their cures. The funds were usually tied to a specific disease or harm. However, it was exceedingly difficult to find support to empower local innovators to find ways to eradicate the social despair or ecological degradation that drove the behaviors at the heart of the emerging disease. This meant I was destined to be a

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documenter of demise, always trying to get ahead of an ensuing disease rather than helping empower systematic changes needed to prevent the next threat or at least, make the population more resistant and resilient to the next inevitable surprise. Those few projects that funded the latter lasted for 3 or 5 y, not enough time to shape a new, safer path forward.

Many national and international bodies are calling for interdisciplinary approaches, like One Health, to step up and deal with complex 21st century health problems. The world, however, is not interdisciplinary, it is “interprobleminary.” Life is made up of multiple, simultaneous assets, deficits, and problems that interact to pull us closer to or further from critical tipping points. Emerging diseases are not microbiological events. The extinction crisis is not an environmental issue. Climate change is not due to the type of fuels we use. They are the results of the constraints we place on human decisions and choice. Those decisions and choices are made in an interprobleminary way in which we trade off needs and expectations to formulate our responses. Collective global amnesia works against efforts to look at health as it is lived and experienced as a dynamic, changing, and multi-dimensional force. Instead, we simplify and attack deficits that threaten health one at a time. This strategy is growing less and less effective as the pace, scale, and variety of potential harbingers of doom pile on us. Instead, we need a long-term focus on what is behind the harms we see. One

Health needs to learn about what drives humans to make the decisions that lead to conditions of safety or conditions of risk. Furthermore, society needs to remember these lessons to ensure that the actions we take today to protect our well-being do not diminish the ability of other species or generations to benefit from the assets created through healthy, sustainable human-nature relationships.

The Millennium Ecosystem Assessment (1) showed us that healthy environments provide us with the materials we need to have options to respond to a changing future. They regulate our climate, secure safe water, influence disease patterns, provide our food, and support cultural integrity. Our continued attention on identifying and treating the harms that result from degrading human-environmental relationships at the expense of understanding how to empower sustainable health promoting changes to that relationship has and will continue to be the persistent plague that will lead to our apocalypse. One Health needs a balanced agenda that deals not only with proximate virological threats like COVID-19, but also creates and protects the capacities needed to resist and be resilient against the compounding threats of the foreseeable future.

Reference

1. <https://www.millenniumassessment.org/en/index.html>