

The Main Public Health Problem of Population in the Future: Aging Conditions or Adolescent and Youth Conditions

Masoud Amiri^{1,*}

¹Social Health Determinants Research Center, Shahrekord University of Medical Sciences, Shahrekrod, IR Iran

*Corresponding author: Masoud Amiri, Social Health Determinants Research Center, Shahrekord University of Medical Sciences, Shahrekrod, IR Iran. Tel: +98-3813333710, Fax: +98-3813334678, E-mail: masoud.amiri@yahoo.com

Received: October 12, 2013; **Revised:** January 26, 2014; **Accepted:** January 27, 2014

Keywords: Public Health; Adolescent; Youth; Elderly

Nowadays, most policy makers state that the main public health problem of many populations is aging and related consequences and therefore chronic diseases among elder people will be the most important problems of future (1-5), although it has been confirmed that the origin of many elderly diseases returns to the early life conditions (6, 7). Furthermore, many developing countries are experiencing a huge adolescents and youth population which their problems have often been neglected due to aging of their populations. In fact, health professionals are involved in the health of aging population as well as health of adolescents and youth because of their substantial effects on most of the morbidities in aged community.

Fortunately, many morbidities and mortalities of adolescents and youth could be prevented; however, it is unknown that how, when, and in whom, these conditions would develop in early adolescence and youth. There are many different problems among adolescents and youths including mental health issues and their potential relations with risky behaviors (with prevalence of 15%), risky sexual behavior, sexually transmitted diseases (STD), early sexual experience as well as sexual abuse and the increased use of alcohol and marijuana at younger ages (8). Unhealthy lifestyle could indeed be considered as the most important issue among adolescents and youths. In fact, unsafe lifestyles in young generation will have a costly consequence for the health services in the future. For instance, Hooshmand and colleagues studied on 4412 adolescents (49% female) who were followed up from grade nine to 12 on their depressive symptoms and six health-risk behaviors (alcohol use, amount of alcohol consumed

per drinking episode, cigarette smoking, marijuana use, hard drug use, and delinquency) (9). In another study, Garrusi and colleagues performed a study to explore the way that Iranian University students live (10). They found that some students, particularly those who were studying medicine, were not enjoying a healthy lifestyle, with better situation of female students than males.

It remains a big question to be answered: "What should we do now?" In one hand, the world population is going old with their own conditions; on the other hand, many (developing) countries have huge adolescent and young population with special needs and attention. Due to the lack of enough financial support for research and delivering services to both groups, what will be the decision of national decision makers about making a balance in giving services to these two important age groups? Do we know about the health services inequality among these two groups? Tomorrow would be too late to think about the ways of improving healthy lifestyle among current young people and future elderly population. Today is the time for action.

Acknowledgements

No help was received from anyone.

Financial Disclosure

I have no financial interests related to the material in this manuscript.

Funding Support

I received no financial support for this manuscript.

Implication for health policy/practice/research/medical education:

Due to lack of enough financial support for research and delivering services to both groups, what will be the decision of national decision makers about making a balance in giving services to these two important age groups? Tomorrow would be too late to think about the methods of improving healthy lifestyle among current young people and future elderly population. Today is the time for action.

© 2014 The Authors. This is an open access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

References

1. Amiri M. Stomach cancer mortality in the future: where are we going? *Int J Prev Med*. 2011;**2**(2):101-2.
2. Amiri M. Early life Conditions and Trends in Mortality at Later Life: Is There any Relationship? *Int J Prev Med*. 2011;**2**(2):53-5.
3. Amiri M, Janssen F, Kunst AE. The decline in ischaemic heart disease mortality in seven European countries: exploration of future trends. *J Epidemiol Community Health*. 2011;**65**(8):676-81.
4. Amiri M, Janssen F, Kunst AE. The decline in stomach cancer mortality: exploration of future trends in seven European countries. *Eur J Epidemiol*. 2011;**26**(1):23-8.
5. Kunst AE, Amiri M, Janssen F. The decline in stroke mortality: exploration of future trends in 7 Western European countries. *Stroke*. 2011;**42**(8):2126-30.
6. Amiri M, Kunst AE, Janssen F, Mackenbach JP. Cohort-specific trends in stroke mortality in seven European countries were related to infant mortality rates. *J Clin Epidemiol*. 2006;**59**(12):1295-302.
7. Amiri M, Kunst AE, Janssen F, Mackenbach JP. Trends in stomach cancer mortality in relation to living conditions in childhood. A study among cohorts born between 1860 and 1939 in seven European countries. *Eur J Cancer*. 2006;**42**(18):3212-8.
8. Bennett DL, Bauman A. Adolescent mental health and risky sexual behaviour. Young people need health care that covers psychological, sexual, and social areas. *BMJ*. 2000;**321**(7256):251-2.
9. Hooshmand S, Willoughby T, Good M. Does the direction of effects in the association between depressive symptoms and health-risk behaviors differ by behavior? A longitudinal study across the high school years. *J Adolesc Health*. 2012;**50**(2):140-7.
10. Garrusi B, Safizadeh H, Pourhosseini O. A Study on the Life-style of the Iranian University Students. *Iran J Psych Behav Sci*. 2008;**2**(2):41-5.