

Feature

Health

MAY 31: WORLD NO TOBACCO DAY

Tobacco or Health: Time to Make the Choice

by Md Anowarul Islam Khan



of its detrimental impact on health. In the developed world tobacco smoke is the most common pollutant of indoor air and is usually the predominant source of air pollution. Workers in some industries are exposed to special health risks from the indoor air pollution generated by industrial process. These factors impose additional risk with tobacco smoke in work place.

Health hazards

In the world a total of three million deaths each year.

It was disclosed that 2500 million dollars are spent annually all over the world for advertisement of tobacco which is enough to immunize all new-born child against six killer disease

TOBACCO consumption all over the world has become a potential threat to public health and economic losses as well. Report shows that 30-40 per cent of the male and 20-40 per cent of young female population in the developed countries are in the habit of smoking. The situation of smoking in the developing countries with a rate of 40-70 per cent among the male and about 10-20 per cent among women would have much more devastating consequences in their socio-economic life. Studies on smoking indicates that 70 per cent of males and 20-30 per cent of female population are exposed to smoking in Bangladesh, the highest of its kind in the world. Unfortunately, the prevalence of smoking is higher among the lower income group. About 80 per cent of rickshaw pullers are spending their money on smoking. At the same time labourers and low-paid illiterate working people uses tobacco much more than the educated and rich people. Here, people uses tobacco in the form of cigarette, cigars, bidi, gull, chewing with betel leaves, putting inside the tongue for a long time and in some other peculiar forms, whatever may be the form or style of smoking or use of tobacco, it certainly affects health with the same intensity sparing none.

Passive smoking

Medical science very successfully established the fact that hazards of smoking are not only limited to smokers alone. It can also seriously affect those who are forced to inhale the smoke delivered into the air by others.

Tobacco smoke is becoming a concern environmentally as it pollutes the atmosphere. Awareness should also be there

India's 'Invisible' Menace

THIRTY-FOUR-YEAR-OLD Dhanraj drives a truck between Delhi and Bombay. He knows about HIV, but hates condoms and refuses to believe India is hurtling toward an AIDS pandemic.

Rachna, 24, works long dusty hours in a flour mill here. She is often forced to have sex with the mill owner. Once there was an AIDS awareness drive in the mill itself, after which she insisted on condoms. The mill owner's reply was to beat her up.

Raju is 16, an assistant to a truck driver who is older. The man is kind to him, and they sometimes share a homosexual relationship, Raju says. The body once heard a radio spot that homosexuals get AIDS, but he has no idea what either word means.

The deadly virus is spreading fast in India, but most people still refuse to see the insidious threat in their midst.

Dr PR Dasgupta who heads the government's National AIDS Control Organisation (NACO) admits the problem is serious. NACO says 14,807 people have so far tested HIV positive as of Feb. 28.

But Dr Ishwar Gilada, secretary of the Independent Indian Health Association (IHO) and a renowned AIDS specialist, dismisses the official figures as just the proverbial tip of the iceberg. The IHO estimates India already has 100,000 AIDS cases and two million HIV positives.

Such figures have made India Asia's foremost AIDS hot spot, followed by Burma which has 500,000 estimated HIV cases, and Thailand which is believed to have some 400,000 people who are HIV positive.

Africa was caught unaware, so was America, Gilada said in New Delhi recently. "But here in India, we allowed this man-made and government-sponsored calamity to grow unchecked."

The doctor, who has been campaigning tirelessly among sex workers in Bombay's red-light district — South Asia's biggest — is outraged by the government's slow response to the AIDS crisis.

Eight precious years have been lost since AIDS was first detected in the country. The fumes, and government funds were not being wisely spent.

As unaware is India's close-knit community of trans-sexuals who have been forced by

Perils of a puff



Native Americans smoked and chewed tobacco for its medicinal effects. Introduced to Europe in mid 1500s. First cigarette advertisement in Europe and North America. Tobacco smoke contains toxic substances like nicotine, carbon monoxide.

tries. On the other hand, about one hundred thousand million dollars the smokers spend each year to inhale the dangerous substances into their body symptom.

Economic consequences also encompasses loss of human lives, treatment facilities and expenses due to smoking related diseases. Smoking reduces life expectancy rate on an average of 10-15 years, during which period, one could have contributed significantly in the socio-economic activities and development. If one lived a healthy life. Because of smoking related diseases and complications, a large number of people have to abstain from their jobs which ultimately causes low production. Smok-

ing also reduces the productivity of its victims and instigate criminal and unsocial activities in different ways that affects social and economic life of other people. Cigarettes may bring harm to the personality, honesty and human qualities of the smokers and his fellow colleagues. All these are to be consciously considered by all concerned towards building a tobacco free society.

Prevention and control

Worldwide it has been realised that smoking should be avoided for the protection and promotion of health as well as social and economic emancipation. Prevention of smoking needs coordinated and comprehensive efforts in a planned and organised way by the individuals, social and cultural organizations, health and allied govt. agencies, educational institutions, religious organizations, youth and women organizations, media networks like radio, television, newspapers and other forms of media available in the country. Political commitment and regulatory measures are also important to fight against smoking. A positive and sustainable awareness programme has to be taken for cessation of smoking and discouraging this life-killing habit.

An effective anti-smoking campaign right from the community to the national level should be stimulated through existing media and methods.

Many countries have started to impose ban on tobacco advertisements and its import. In some countries newspapers do not publish any advertisement on cigarette rather they publish anti-smoking messages.

Acknowledging the vital role and human responsibility of media personnel towards prevention of smoking, WHO has rightly chosen the them on world no tobacco day '94. "The media and tobacco: getting the health messages across." It is expected that media can be used to convey knowledge and suggest changes in behaviour that moulded the habit of smoking. Intervention by the media can also facilitate the better coordination of action for the prevention and control of smoking. A sound media intervention policy in the prevention of smoking to safeguard human lives and property may be adopted by the government at the earliest.

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efforts to tell them about HIV/AIDS.

Recently, a study done on children in seven schools here revealed that 60 percent — majority of whom were boys — were either picking up sex workers or going to neighbourhood women.

The study by Dr Shankar Chaudhury of the AIDS cell in the premier All India Institute of Medical Sciences, discovered the boys were not using condoms.

"The worrying aspect is that introducing sex education in schools is taking a long time," says Chaudhury.

EARLY childhood is an exciting time of discovery and accomplishment. During the first five years, children develop from helpless, dependent babies into walking, talking preschoolers with minds of their own. These remarkable transformations take place as children learn through everyday opportunities to participate in ordinary family activities.

Because vision plays such a primary role in early learning, very young children who are visually impaired are at risk for developmental delays. Depending on type and severity of vision loss, these children will benefit from specific attention to their different learning needs.

Developmental accomplishments in normal children (birth through five years)

To provide specific attention to the needs of visually impaired child we first need to know the major accomplishments of sighted children during the first five years of life.

Infancy: During the first year, children develop voluntary control over various behaviours which enables exploration of and interaction with the environment.

By nine months, babies can sit unsupported and move by rolling, crawling, and scooting. They can reach and grasp objects, push one object aside to get another, and transfer objects from hand to hand. During this time, infants begin to imitate what they see and hear. These infants respond to social interaction, they approximate intonation, and enjoy give-and-take games.

Toddlers: Toddlerhood i.e. 18 months through 36 months is a period of increasing autonomy and active physical exploration. Toddlers have a natural desire to touch and master whatever they see. They spend their time throwing, banging, touching, handling, opening, and closing, and putting together and taking apart.

Pre-schoolers: During the preschool years, i.e. 36 months through 60 months children become more proficient in using words to communicate feelings and ideas in cooperative and imaginative play, in daily living skills, and in following classroom rules. Much of this learning is obtained through observation and imitation and interaction with peers. Preschoolers develop friendships and learn how to interest in appropriate ways with children and with adults.

Development sequence of a visually handicapped child

Now let us turn to the problems of how to help a child who is visually impaired:

The child with low vision and the child who is totally blind will each have a different way of learning.

The process of identifying the specific needs and learning opportunities for each child must involve family members, programme staff, specialists, and of course, the child.

Issues related to developmental milestones

Caregivers often want to know when they should expect

Early Childhood Intervention for the Visually Impaired Child

by Sultana S Zaman

children with visual impairments to reach certain developmental milestones. When do children who are blind begin to walk? When do they learn how to use a cup? It is difficult to give precise answers to these questions. We know that all children vary in their rates of development and that each child is different.

A child who is visually impaired will certainly need more time to acquire developmental skills that are related to vision. It is not surprising that children who are visually impaired show delays in early development if milestones of sighted children are used for assessment. However, recent study based on parent reports of selected skill acquisition found that many infants with visual impairments and no other disabilities acquired some developmental skills on a schedule similar to sighted infants.

Infants with visual impairments and additional disabilities

needed more time to acquire these skills. fine motor development was the most delayed, and there were some differences in the order of skill acquisition. Thus, what may seem like a delay could be a different sequence of developmental skills that is natural for children who are visually impaired.

Developmental milestones in normal children (birth through five years)

to obtain another, and overcoming obstacles to get desired objects are a few examples of how problem solving is developed through exploration.

At this age, toddlers will be interested in "feelie" or "search and sniff" books, switch-activated toys that provide a variety of sensory feedback, and objects related to a "big picture" of the activity.

Considerations for 'preschoolers' who are visually impaired

With the diagnosis of a baby's visual impairment, a family may be confused and have difficult feelings, regarding decisions about medical interventions, and questions about the future. Establishing caregiving routines will be important for both baby and caregiver. Finding ways to interpret and respond to a baby's behaviour will encourage responsive caregiving and help a baby develop trust. Talking to a baby during caregiving routines will develop and association between the good feeling of having needs met and the sound of a caregiver's voice.

Other consistent sensory cues include the way a baby is handled and held, the smells and textures of caregivers and caregiving activities, and the tastes of familiar food and drink.

In the absence of eye contact and gaze, infants need alternative ways to maintain contact with primary caregivers and to recognise familiar people. Ways to do this include talking to the baby, having a special way of touching the baby, helping the baby touch the person's face, and wearing a special cologne.

Infants who are visually impaired may seem passive and uninterested in the world because visual stimulation first motivates interaction, then reaching, and later crawling.

Infants who are blind require more time than the visually able infants to initiate self-

driven play.

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Issues related to developmental milestones

Caregivers often want to know when they should expect

reduced movement and locomotion. This delay seems related to the absence of visually directed reaching, limited practice in hip and trunk rotation in different positions. We can encourage movement by calling to the child, providing other sound cues, using toys with sounds, playing "come and get me" games and by touching the infant's hand with a desired object to encourage reaching and grasping.

Considerations for 'toddlers' who are visually impaired

Toddlers who are visually impaired benefit from simple explanation of ongoing activities, verbal prompts to guide participation and recognition of what they have done. They need encouragement to explore the environment actively in order to practice motor skills and to develop concepts related to spatial relationships.

Playing with various toys in different ways, using one object

to develop age-appropriate skills in meaningful activities.

Selecting pre-school materials for the visually impaired

• Provide toys that produce auditory feedback when manipulated, such as musical instruments and cause-and-effect toys.

• Provide real objects when possible, especially when children are learning new concepts; for example, use real fruit and vegetables instead of plastic ones.

• Provide toys that encourage age sharing, turn taking, and playing with other children; for example, playground equipment, blocks, and cars.

• Provide creative play-materials that are related to real life experiences and develop an understanding of various roles; for example, cooking, shopping, going to the doctor, and going out to eat.

• Provide pictures that are appropriate for children with low vision; for example, colourful, simple illustrations rather than cluttered, glossy photographs.

• Provide objects that invite tactile exploration, manipulation, and discovery.

Teaching strategies

• Encourage an understanding of whole/part relationships by providing the big picture whenever feasible.

• Consider how vision loss restricts a child's perception of an object or activity.

• Use familiar routines and a predictable schedule that will help children learn specific skills during naturally occurring situations, that will motivate them to participate, and that will provide them with a "big picture" of the activity.

• Model and facilitate interaction with other children.

• Encourage active involvement in typical pre-school activities, creative play, snack time, story time, cooking, art, dressing, hand washing and toileting.

• Provide opportunities for children to develop sensory skills.

• Provide meaningful language to help preschoolers who are visually impaired develop developmental concepts.

• At story times select books that will engage children: a "feelie" book or one with clear, colourful pictures for children with low vision.

• Encourage children with low vision to use their vision by holding materials at whatever angle or distance is best for them.

• Help pre-schoolers who are visually impaired develop an understanding of their vision loss and their own answers to questions about their eyes.

• Provide positive feedback in ways that children like and understand; for example, through praise, gentle touches on the arm, or a little hug.

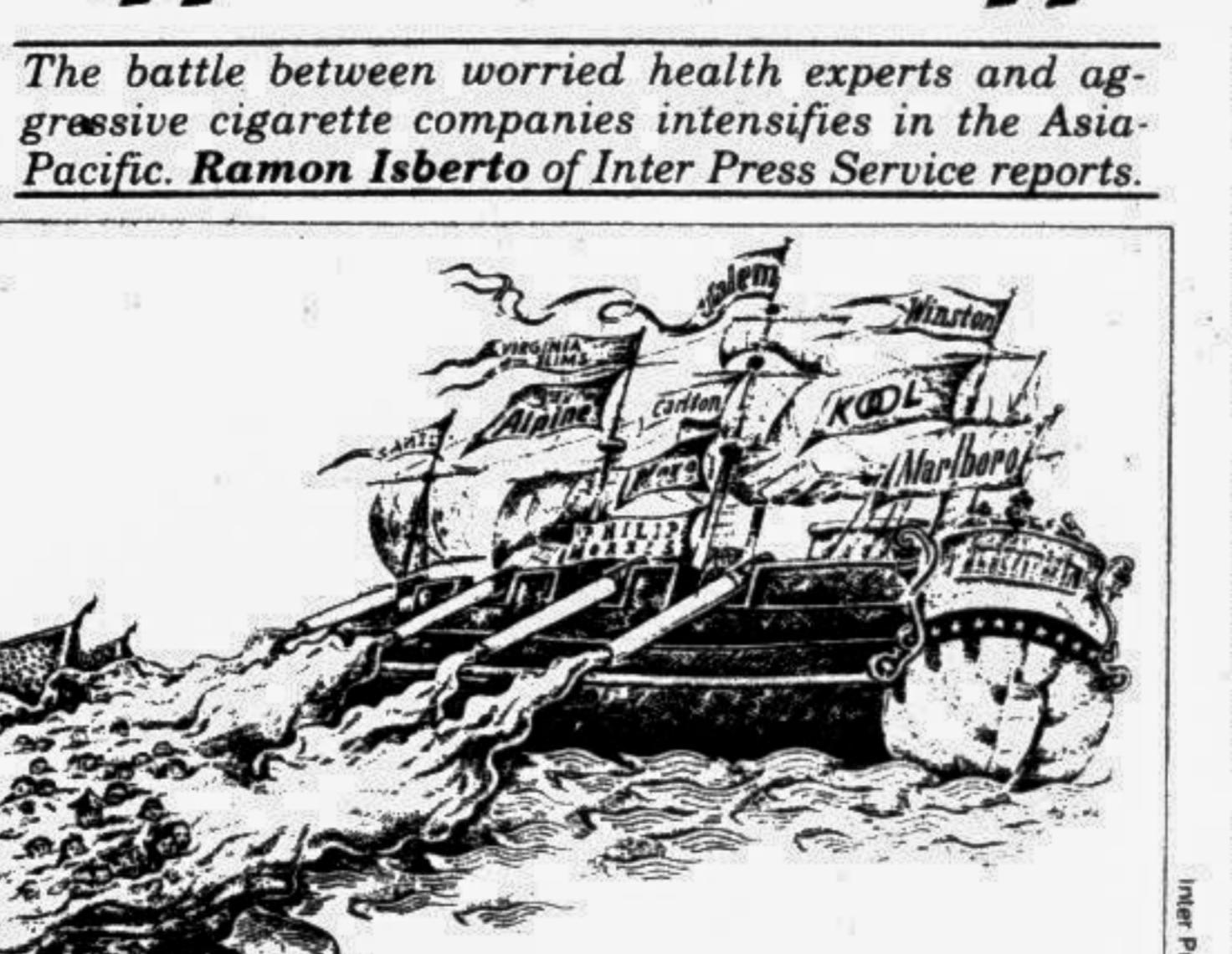
• Explain activities, what children will do, and your expectations for behaviours in a clear and understandable way.

• Finally, and most importantly, provide opportunities for children to learn, to succeed, and to have fun.

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Asia-Pacific: Huffs and Puffs Over Smoking

The battle between worried health experts and aggressive cigarette companies intensifies in the Asia-Pacific. Ramon Isberto of Inter Press Service reports.



They reckon Asia should see an epidemic of such health problems by the year 2025.

By then, the annual tobacco death toll would have risen from three million to ten million. Developing nations will account for 70 per cent of those deaths — two million in China alone.

Such dire prospects are pushing Asian governments to take action. China, where one-third or 300 million of the population over 15 smoke, wants to host the 10th World Conference on Tobacco and Health in 1997 in a bid to step up its anti-smoking drive.

The Philippines has aired TV counter-ads designed to discourage smoking. The campaign was called 'Yosi-Kadir' (literally: 'cigarette disgusting') which showed a chain-smoking character by that name being shunned by his friends.

But such counter-ad campaigns pale in comparison with the heavily-financed ad and marketing drives of the tobacco giants.

Even total ad bans may be all smoke and no fire. According to a study of the US-based International Advertising Association (IAA), smoking has increased in Thailand and Taiwan where total or partial bans have been in force.