BNYCFP ended with a renewed commitment to act for the youth

STAR HEALTH REPORT

The sixth session of the Bangladesh National Youth Conference on Family Planning (BNYCFP) ended on ecently in Dhaka in hybrid format with two days of sessions.

The conference host SERAC-Bangladesh was joined by its partners including Foreign, Commonwealth and Development Office, USAID, Bangladesh Youth Health Action Network (BYHAN), Coalition of Youth Organisations in Bangladesh (CYOB), Jhpiego, Population Action International (PAI), Marie Stopes Bangladesh, Population Reference Bureau (PRB), Pathfinder International and UNFPA Bangladesh in organizing this largest youth gathering in the country on reproductive health and family planning.

More than five hundred youths joined the event with the theme "Commit and Act For Youth", where policymakers, high-level government officials, international and national experts on health and family planning spoke and shared experiences.

The conference opening plenary was chaired by Dr Mohammed Sharif, Director (MCH-Services); Line Director (MC-RAH), MCH-Services Unit



of Directorate General of Family Planning, whereas attended by the former Director-General of Family Planning Quazi AKM Mohiul Islam, UNFPA-Bangladesh, Chief of Health Dr Vibhavendra Raghuyamshi, Senior Country Director of Pathfinder International Bangladesh, Ms Caroline Crosbie, Senior Program Officer of Advance Family Planning and youth speaker, Mr Mervyn Christian, MPH and young city champion, UN-Habitat-Botnar, Md Nazmul Hasan.

On the first day, 500 young people actively joined in multiple sessions conducted by Pathfinder International, Population Reference Bureau, Population Action International, IYAFP and other potential partners.

On the second and final day, the conference secretarygeneral and SERAC-Bangladesh's **Executive Director SM Shaikat** moderated the closing session chaired by Director General of Family Planning Shahan Ara Banu, NDC, and the Minister of Health and Family Welfare Zahid Maleque, MP joined as the chief guest. Speakers and special guests included UNFPA Country Representative Dr Asa Torkelsson, Health Advisor of the Foreign, Commonwealth, and Development Office (FCDO) Dr Shehlina Ahmed, and a youth

representative Khadija Kalam. SM Shaikat, Executive Director

of SERAC-Bangladesh in his speech highlighted, the standard and scopes of the adolescent-friendly health services need expansion with more allocation of budget and increasing numbers of service providers, which is an area government and non-government actors have roles to play.

Health Minister Zahid

Health Minister Zahid Maleque said that, adolescents are the futures of the country. The government is trying its best to ensure health services at all levels in the country. The service facilities are equipped with information and services on family planning, sexualreproductive health. He emphasised that the vision of the Father of the Nation, Bangabandhu Sheikh Mujibur Rahman was to secure primary healthcare for everyone and freedom from hunger and poverty. This vision needs to focus more on the health and well-being of the young population.

DGFP chief Shahan Ara Banu confirmed her departments' commitments for youth and adolescents family planning services and information from national and grassroots levels. She reiterated that the National Adolescent Health Strategy 2017-2030 has been in operation to support the 1,103 centres for adolescents service. It is also a priority to extend the service hours of these centres until 5 pm, and the implementation is in progress.

The closing session was preceded by multiple plenary sessions by Jhpiego, UNFPA Bangladesh, Marie Stopes Bangladesh, CYOB, and Population Reference Bureau. Experts, policy makers, and youth representatives shared their ideas and exchanged ideas to improve the sector's current situation.

The organising host of this conference, SERAC-Bangladesh, declared the 7th season in 2022 during their closing remarks.

DID YOU KNOW?

Brain magnetic stimulation can enhance memory performance

Memories of past events and experiences are what define us as who we are. Yet, the ability to form these episodic memories declines with age, certain dementias, and brain injury. A study by the University of Glasgow, United Kingdom, shows low-frequency repetitive transcranial magnetic stimulation or rTMS stimulation can improve memory performance by reducing the power of low-frequency brain waves as memories form.

Based on current knowledge of the brain and the effects of rTMS, the researcher's hypothesised that they could improve episodic memory, and in the process, generate targets for future memoryrelated therapies.

The researchers first analysed past data from 40 college students who had been asked to memorise lists of words. Half of the students received slow rTMS over the left dorsolateral prefrontal cortex while memorising the words, and the other half received rTMS over a control region of the brain. Then, in a new experiment, researchers collected data from 24 college students who each performed a similar memory task under both rTMS conditions

Analysis of both datasets revealed that the slow rTMS applied to the prefrontal region led to the reduced power of low-frequency (beta) waves in the parietal region of the brain, which is known to be involved in attention and perception.

The electrophysiological results suggest that frontal stimulation affects a broader network and improves memory formation by inhibiting parietal areas. These are complex but exciting effects that require further experiments to better understand their neural basis.

HEALT Hulletin



Beating challenges to global child and adolescent health

The latest special issue of PLOS Medicine outlined different aspects of child and adolescent health and development and the social determinants of health. It focused specifically on the health of infants, children, and adolescents in the context of the UN Sustainable Development Goals (SDGs).

The guest editors pointed out that "there are legitimate concerns that COVID-19 has negatively impacted progress in achieving the SDGs globally, and that urgent directive strategy are needed before hard-earned gains from the 2000-2015 MDG period is reversed."

The research studies included papers examining the drivers and determinants of child and adolescent health in diverse and challenging contexts. Adversity brought by poverty, pollution, worsening climate, and experiencing violence and conflict can impact child health. Reports on crucial health issues and interventions across childhood and adolescence included severe bacterial infections among neonates, anti-infection measures and nutritional supplementation to improve neonatal and child outcomes, cash transfers combined with additional interventions to improve child health in low- and middle-income countries, and sexual and reproductive health factors among adolescent girls.

The guest editors noted that to maintain the focus on child and adolescent health concerning the SDGs: "it is necessary to recognise and attend to the health inequities among children and adolescents arising from differentiated exposures to dynamic social contexts around the globe, including urban poverty, environmental degradation and extreme climates, violence and conflict, and unsafe school, family, and social environments".

Beware of some common masking errors



Star Health Desk

To protect yourself and others from COVID-19, you should wear a mask when you are indoors around other people. But common errors can leave you unprotected. Here are some mistakes you may be making -- and how to fix them.

You do not wash up before (and after) masking up

Before putting on your mask, wash your hands or use a 60% alcohol hand sanitiser to keep germs away. Handle your mask by the loops or ties, not the front or face. To remove it, grasp the ear loops or untie the strings. Then rewash your hands.

You do not wash a new mask Even if it is brand new, numerous things are likely touched, especially if handcrafted. So, wash it in hot water with residue-free detergent. Rinse it well. Then dry. Then soak your mask for 5 minutes in 2 teaspoons bleach or a gallon of bleach.

You do not store it right
The mask is easily thrown upon the
dashboard or seat. Meantime, your
mask needs a clean home. Put it
in a dry paper or mesh bag if it is
not damp or dirty. Put it in a clean
pocket or handbag if you are out
to dine but not on the table. Next,
wash your hands, then reapply.

You don a dirty mask

Masks attract germs and viruses.
They can cause infections if worn against the face for too long. After each use, wash your mask in hot water. Or wash it in hot, soapy water for 20 seconds. Dry on high or in direct sunshine. Wear a clean spare.

Your mask has seen better days
It is time to retire your mask if it has
holes or tears or is worn, sprung, or
stained beyond repair. Also, make
sure to wash your masks right away
if they get moist from spit or sweat.
Damp masks also do not function

You reuse disposable masks Disposable masks are one-time use. With a reusable one, check it leaves no side gaps. The blue side should be facing out. After using a disposable mask, put it into a garbage bin. If you remove your mask to eat, replace it afterwards.

You don't tweak your mask to fit If your mask is too big, don't cross the ear loops. Instead, knot each one to shorten it. Put the knots behind your ears to keep the mask from cinching. A hijab can be worn over the mask and secured with a safety pin or paper clip.

You use a coffee filter A filter on your mask does improve protection. Look for PM 2.5 filters. The tight weave catches tiny raindrops. The pores of a paper coffee filter are 20 micrometres, too large to act as a barrier. If your mask lacks a filter pocket, try one with

You pull it from your face to talk Talking with a mask on is weird at first. So it is normal to touch or tug at your mask to be heard. The mask should be worn loosely enough to allow you to breathe freely and move your mouth freely.

many layers of fabric or wear two.

You wear your mask below your nose Make your nosepiece if your glasses fog up. Join a few wire twist ties. Make a tiny incision in the upper band of your mask and insert the twist ties.

You wear your mask above your chin Your mask should cover your chin and the bottom portion of your face. This is because viruses can enter via your chin and reach your mouth, nose, and eyes.

You don't baby your face Wash your face with a mild cleanser to prevent breakouts and rashes. Then, apply moisturiser for additional protection. Your dermatologist can advise you on the finest components for your skin. It is also recommended to remove your mask every 4 hours for 15 minutes.

Source: WebMD

Can Al foresee the next virus transmission from animals to human?

Most emerging infectious diseases of humans (like COVID-19) are zoonotic – caused by viruses originating from other animal species. Identifying high-risk viruses earlier can improve research and surveillance priorities. A recent study at the University of Glasgow, United Kingdom, suggests that machine learning using viral genomes may predict the likelihood that any animal-infecting virus will infect humans, given biologically relevant exposure.

Identifying zoonotic diseases before emergence is a major challenge because only a tiny minority of the estimated 1.67 million animal viruses can infect humans.

The researchers are using viral genome sequences to develop machine learning models. They found that viral genomes may have generalisable features independent of virus taxonomic relationships and may preadapt viruses to infect humans. They were able to develop machine learning models capable of identifying candidate zoonoses using viral genomes.

These models have limitations, as computer models are only a preliminary step of identifying zoonotic viruses that can potentially infect humans. These models predict that viruses might infect humans; the ability to infect is just one part of the broader zoonotic risk, ability to transmit between humans, and the ecological conditions at the time of human exposure.



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- Pap Smear
- Stool Occult Blood
- X-Ray Chest P/A View
- Ultrasonogram of Whole Abdomen
- Mammogram (X-Ray Breast)* or Ultrasonogram Breast
- Diet Counseling
- Consultation with Physician

