

Renewing commitment: investing in women's health for gender equality

MS SAIMA WAZED

Each year, International Women's Day calls upon us to recommit ourselves to achieving gender equality. This year's theme, "Invest in women: Accelerate progress," underscores the importance of prioritising the health and well-being of women and girls, a cause I wholeheartedly support.

Investing in women's health requires adequate overall investment in healthcare, an area where the Southeast Asia region falls short. With only 2.9% of GDP allocated to healthcare compared to the global average of 4%, out-of-pocket expenditures remain unacceptably high, often leading families to forgo necessary care. This disproportionately affects women, who already bear the burden of caring for sick or elderly family members, limiting their economic and political participation.

While progress has been made in areas such as antenatal care and family planning, inequalities persist based on factors like location, education, and income. Policies must recognise women's autonomy in sexual and reproductive health decisions, and efforts are needed to address gender disparities in noncommunicable disease risk factors. Violence against women remains pervasive, necessitating increased investment in prevention and response efforts.

Gender-responsive health policies can help bridge these gaps, but implementation capacity requires strengthening. As we design priority programmes focusing on women and children, we recognise the multigenerational impact of investing in women's health. Better informed mothers contribute to healthier communities, passing on knowledge and practices that benefit future generations.

On International Women's Day, I reaffirm my commitment to supporting countries in increasing investment in women's health and accelerating progress towards gender equality.

The write is the WHO Regional Director for South East Asia.



Improving access to hearing care in low- and middle-income settings

STAR HEALTH REPORT

For World Hearing Day, marked on March 3, the World Health Organisation (WHO) has released new technical guidance on hearing aid service delivery approaches for low- and middle-income settings. The guidance, developed with support from the ATScale Global Partnership for Assistive Technology, is based on the principle of task sharing among specialists and trained non-specialists. It includes two approaches, one targeting adults and the other for children aged 5 and over, and is accompanied by resources with tips for healthy ear care practices, the use of hearing aids, and how to support people living with hearing loss.

The release of the new guide coincides with World Hearing Day. The theme for 2024 is "Changing mindsets: Let us make ear and hearing care a reality for all," highlighting the importance of correcting misconceptions about hearing loss that are common among the general public and primary health providers.

Existing mindsets limit access to hearing care: The first of two key challenges in ear and hearing care is the lack of health system capacity for the provision of integrated ear and hearing care throughout people's lives, as evidenced by a lack of policies, human resources, and dedicated finances. The service delivery approaches detailed by WHO aim to overcome this challenge by better utilising non-specialists in providing hearing care to increase capacity.

The second key challenge relates to misperceptions and stigmatising mindsets about hearing loss and ear diseases, which are deeply ingrained within societies and often limit the success of efforts to improve hearing care. Common misperceptions include the idea that hearing loss is an inevitable part of old age and that hearing aids do not work well or are too expensive.

address stigma related to ear and hearing care."

Misperceptions are also prevalent among primary health care providers, who may consider this to be a specialised or difficult-to-provide service, resulting in failure to identify and treat even those conditions that do not need specialist care.

Changing mindsets: Changing mindsets related to ear and hearing care is crucial for improving access and mitigating the cost of unaddressed hearing loss. To address common myths and misperceptions, WHO has released several information products and resources to raise public awareness. A factsheet for health professionals provides a clear rationale and directions for the engagement of primary-level service providers in hearing care provision.

Governments should take steps to integrate ear and hearing care within primary health care, implement community-based approaches that bring services close to people, and lead initiatives to raise awareness and mitigate stigma related to hearing loss. Health care providers must also play their role by ensuring they give due attention and care to people with common ear and hearing problems. Civil society groups, parents, teachers, and physicians can use WHO's awareness materials and community resources to inform people about the importance of ear and hearing care.

Source: World Health Organisation



HAVE A NICE DAY Happiness at blue zones

DR RUBAIUL MURSHED



Blue zones are regions in the world where people are known to live longer than average. Some examples of blue zones include Okinawa, Japan; Sardinia, Italy; Nicoya, Costa Rica; Icaria, Greece; and Loma Linda, USA. These are characterised by their relatively warm year-round climate, remote locations, and proximity to the ocean.

People in these areas live a healthy lifestyle with healthy food habits that promote natural movement through activities such as gardening, walking, cooking, and farming. Faith plays a central role, entangled with stress-relief practices such as prayer, kindness, and habitual fasting. These communities have stable, extended family units where individuals of all ages coexist in lifelong monogamous relationships. In Blue Zones, the pursuit of material possessions diminishes, replaced by contentment in shared meals, conversations, and strong community bonds.

Today, this trend extends beyond these regions; for instance, the Hunza people in northern Pakistan are an example of other long-lived communities. Buettner discovered that, along with other qualities, these people thrive on nurturing social networks that foster happiness in their lives.

However, research indicates that happiness tends to follow a U-shaped curve over a lifetime. In youth, the thrill of new experiences and possibilities often leads to high levels of happiness. As individuals age, challenges and expectations can contribute to a decline in this curve.

As people grow older and prioritise what truly matters to them, happiness tends to rise again. While a long life is desirable, it cannot be the sole indicator of happiness. To create a society that genuinely cherishes the gift of longevity, it is important to cultivate environments that nurture the soul, prioritise human connections, and celebrate the beauty of a life well-lived in simplicity.

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New medication offers hope for managing food allergies

STAR HEALTH DESK

Omalizumab is a new drug that the FDA recently approved to help treat food allergies, especially peanut allergies, in the United States. This medication is given as a shot and works by targeting a specific part of the immune system involved in allergic reactions. In a study published in the *New England Journal of Medicine*, researchers found that children and adolescents with peanut allergies who took omalizumab were better able to tolerate peanuts compared to those who did not take the medication.



After 16 weeks of treatment, 67% of those on omalizumab could tolerate the equivalent of about 2 peanuts, while only 7% of those not on the medication could do the same. It is important to note that the response to this medication varies from person to person. Some patients were able to tolerate a significant amount of peanuts, while others could not tolerate even a small amount. While omalizumab can help increase the amount of food allergen tolerated, it is not a cure for food allergies. People with food allergies should still carry their epinephrine injector in case of accidental exposure.

Overall, omalizumab provides an additional option for managing food allergies, but it is essential for individuals to discuss it with their healthcare providers to see if it is the right choice for them.

Nourishing adolescents to build a smart future generation

MD SHAHID UDDIN AKBAR

The Smart Bangladesh Vision by 2041 set a new target for Bangladesh, and the Perspective Plan 2021-2041 defined the economic and social targets. Human resources will be key to achieving the vision, and adolescents are an important element in the development ecosystem to become instrumental towards leading the country in 2041.

The UN Decade of Action (2021-2030) promotes a multi-sectorial approach to fighting malnutrition in all its forms and addresses all people everywhere, particularly women and youth, as key stakeholders for success. The poor diets of the estimated 1.2 billion adolescents in the world put this critical population at risk. Adolescents in low- and middle-income countries experience the multiple effects of malnutrition, including the rising prevalence of overweight and obesity along with the persistently high rates of underweight, micronutrient deficiencies, and protein-energy malnutrition.

Bangladesh has over 32 million adolescents; of these, some 50% (16+ million) suffer from poor eating, resulting in stunting or obesity. Moreover, one-fourth of the adolescent girls aged 15-19 years are stunted. The proportion of adolescent height less than 145 cm (cut off-level for height) has remained unchanged since 2011. The percentage of women aged 20-24 who have had a live birth before age 18 was 24% (BDHS 2017-18). Key factors contributing to this situation, among others, are poverty and food insecurity, insufficient access to basic social services such as health, education, and water, sanitation, and hygiene (WASH), as well as poor dietary diversity and nutrient adequacy and a lack of nutrition knowledge.

The Bangladesh Institute of ICT in Development (BIID) Foundation, a social business initiative in Bangladesh, launched the Nutrition Clubs (NCs) initiative in 2015 to give adolescents and young people a platform to enhance their nutrition knowledge, promote healthy eating habits, and disseminate nutrition knowledge within their households,

schools, and communities, as well as engage in nutrition-related activities. BIID, in collaboration with the Department of ICT (DoICT), ICT Division, has been working to scale up the Nutrition Club initiative across the network of Sheikh Russell Digital Lab (SRDL) and introduce e-learning on nutrition, online competitions, leadership camps, etc.

In parallel, to promote youth and adolescent engagement in nutrition education and expand their network on a national level, BIID initiated the Nutrition Olympiad (NO) in 2017. Over the course of six consecutive years (2017-2022), this event garnered significant national interest and brought attention to the importance of adolescent nutrition. To elevate the Olympiad to a global platform as the International Nutrition Olympiad, the BIID Foundation is working with various stakeholders. INO has turned into a unique and inclusive platform for adolescents and youth to exchange knowledge, demonstrate, and challenge knowledge on nutrition to improve their nutritional status by engaging them to develop and execute local-level solutions. INO also fosters a voice for adolescent-friendly food security and nutrition policy at the national and global levels.

Considering the recent explosion of digital technologies and adolescents' engagement in social media, NC can explore more diverse uses of digital nutrition solutions to stimulate increased interest. Adolescents would benefit double from the hands-on learning experiences bundled with online-based services at their fingertips.

Initiatives like Nutrition Clubs and International Nutrition Olympiad (INO) can foster healthier adolescents and families by providing engaging learning experiences using proven government, research-based, and UN-approved materials and facilitating more innovative approaches to get the adolescents engaged and owned. Building smart Bangladesh can only be achieved with well-nourished adolescents with the right cognitive skills and better health.

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