

## University of Makeni – Primary Health Care Materials – A new approach

The launching of the new **Sustainable Development Goals** offers us another opportunity to ask how we can assist young people to avoid disease and illness?

We are familiar with such terms with many of the causes of morbidity and mortality amongst children and women – the most vulnerable groups.

If we wait for central authorities to pass laws, invest in systems etc. , then many more young people will endure the pain and misery of preventable diseases and possible premature death.

So, how can ordinary people attempt to do something positive to improve their quality of life and that of their families and communities?

Let's look at two simple statements.

- **there are more teachers than doctors**
- **there are more pupils than patients**

Simple statements yes but they offer a base from which to build programmes that allow those most at risk from serious and life threatening disease to begin to do something positive to help themselves.

Put in simple development terms we are looking at those directly affected by a problem and suggesting ways in which they and their communities can use their skills, time and limited financial resources to reduce disease and illness

In modern political terms people need to be 'empowered' or offered the knowledge to 'enable' them to begin an active campaign to improve living conditions for the most vulnerable members of society.

Teachers meet with the young and build a trusting relationship through which knowledge and its application are passed.

Why not incorporate in normal timetables/curriculum's simple advice on the major diseases that cause so many of the problems faced by those growing up in the developing world.

This can be done in interesting ways that encourage participation and a desire to spread the information. Lessons can centre on outward signs of possible illness, ways of reducing the risk of catching such diseases and effective proposals for helping those who already have an illness. We can also engage all members of the community in combating the collective problems that affect them all.

Greater awareness may also reduce prejudice and misunderstanding.

Access to life saving information need not be the privilege of those fortunate to live near to better-stocked medical centres.

The second statement notes that more pupils exist than patients - once again here is a perfect opportunity to allow the young to be pioneers within their own communities in the spreading of health messages that offer a positive input to communal life.

None of this needs be sophisticated. The more basic the message the greater the chance of its acceptance.

Young people can be 'peer educators' to their own age group and 'information providers' to their wider community. Such programmes do not require vast sums of money and individuals feel involved and valued.

Evidence of the impact on both individual and community health standards can be gathered from many different locations. Young people is known to have a positive influence on the levels of malnutrition and infant mortality within their communities, in India the 'bottom upwards' approach adopted in Vellore, South India has paid visible dividends in

increased child welfare and better treatment for women.

By using simple, yet effective ways of combating illness, we are also reducing the 'dependency' factor that leads to communities assuming that eventually someone else will give them a miracle cure – those affected can for little costs actually help themselves.

Let's take a simple example.

Malaria is a major killer across the continent of Africa. The use of bed nets is known to reduce the incidence of the disease. These cost money and too many communities wait to be given them by well-meaning outside parties.

Why not begin to reduce the use of plastic bags, which allow standing water to form and this in turn affords the mosquito somewhere to lay its larvae. Encourage the use of natural forms of carrying goods, which in turn may offer some members of the community an income earning opportunity.

The community can pool resources and invest in building simple but effective toilets, that improve hygiene and also reduce standing water.

Pooling resources to buy nets means that members of the community have played their part in improving the health risk for all.

Simple but effective ways of combating a killer and allowing a community to know that acting together affects all.

School attendance, pregnancy problems, low birth weight infants might also be a direct spin-off of thinking simply, listening to the ways that communities want to help themselves and not waiting for a donor or central government to provide a solution. Cheap, effective and a community bonding way forward.

Any other suggestions?