



How to live longer: The non-medical intervention to improving health

RESEARCHERS have called for an "evidence-based approach" to healthcare spending that would cut down on direct healthcare spending and shifting funding to education that prevents poor health in the first place.

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The COVID-19 pandemic has caused a massive disruption to education, and this is liable to have long lasting impacts on health for everybody involved.

The National Audit Office has reported that only one percent of Covid support funding has gone into the education sector.

Investment into education, researchers have suggested, will do more to improve healthcare than the same investment into healthcare.

Writing in the Journal of the Royal Society of Medicine, researchers have investigated the way that education and health interact. Issues in either can result in long lasting detriments to the other.

This can be as varied as childhood malnutrition leading to poorer quality of life 40 years later, or sleeping disorders being tied to doing worse in school. Investments in one, such as improving physical health have additional positive effects by improving grades.

Dr Anant Jani, of the Oxford Martin School at the University of Oxford said:

"The COVID-19 pandemic has led to the largest ever disruption to education systems globally. Simulations suggest that around 0.6 years of schooling will be lost globally due to school closures, with higher levels for children from lower socio-economic groups, who have been historically disadvantaged because of less access to high quality education."

They cite research showing that each year of additional schooling a person receives is linked to a 6.85 percent reduction in poor health. The solution suggested by Jani and the other authors is to invest more heavily into school infrastructure, teacher training and improving curriculums.

They point to current gaps in schooling for how children are taught subjects such as emotional health. Poor mental health is linked to higher rates of physical illness and lower performance in schools.

Dr Jani said:

“These approaches are supported by several studies which demonstrate that intergenerational perpetuation of inequalities is lower in countries with greater educational public support programmes for low-income families, with health and wellbeing benefits lasting into adulthood.”

Another issue that is raised is the rates of overprescribing and overdiagnosis in our healthcare sector. This refers to giving people medications they do not need or desire, with minimal or negative health benefits alongside the diagnosis and treatment of conditions that do not cause symptoms or harm to a person.

The researchers say that spending in these areas would have better returns on health if invested into areas of education that would improve the prevention of many diseases that are tied to poor understanding of health.

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