# Promoting health through education in the context of climate change

## Strengthening community resilience in coastal Bangladesh

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## Context

Climate change is exacerbating health inequities in coastal Bangladesh, where salinity intrusion, extreme heat, cyclones and water scarcity disproportionately affect pregnant and postpartum women, children and adolescent girls.

Following a participatory community assessment, the REACH project was launched by the Eco-Social Development Organization (ESDO) with support from Enfants du Monde (EdM), to strengthen community capacity and promote climate-resilient health through health promotion.

The objective here is to explore findings and lessons from REACH's participatory health education approach in coastal Bangladesh, focusing on women's and adolescent girls' health knowledge and the conditions that enable or constrain its application.

## Methodology

To improve families' empowerment, our health promotion intervention includes a participatory health education component. Unlike traditional one-way, lecture-based methods, our approach uses contextualised content, active learning, community engagement and formative assessment within a five-step educational process. The sessions, delivered by trained public health professionals to pregnant women, mothers and adolescent girls, are structured as follows:

1. Recognise the health problem
2. Share your perspective
3. Explore health knowledge
4. Create your own health message
5. Check learning

The sessions aim to improve knowledge of climate-related health risks and practical adaptation measures, in addition to topics on maternal health, using health education materials covering 11 topics, including:

- Dengue fever
- Water safety
- Heat strokes
- Drowning
- Mental health

## Results

### Developed capacity to act

Qualitative interviews suggested that some participants felt better able to recognize warning signs of concerning situations and more confident seeking care even when facing family resistance.

### Three barriers to implementing recommendations

- Access to safe water;
- Financial and livelihood constraints;
- Household norms and gendered responsibilities.

### Measured changes in participants' knowledge

Adolescent girls and adult women, health providers as well as community stakeholders, describe REACH as addressing problems they recognise as real and, in several cases, as previously unaddressed by any other actor.

Participants gained knowledge in health aspects linked to climate change:

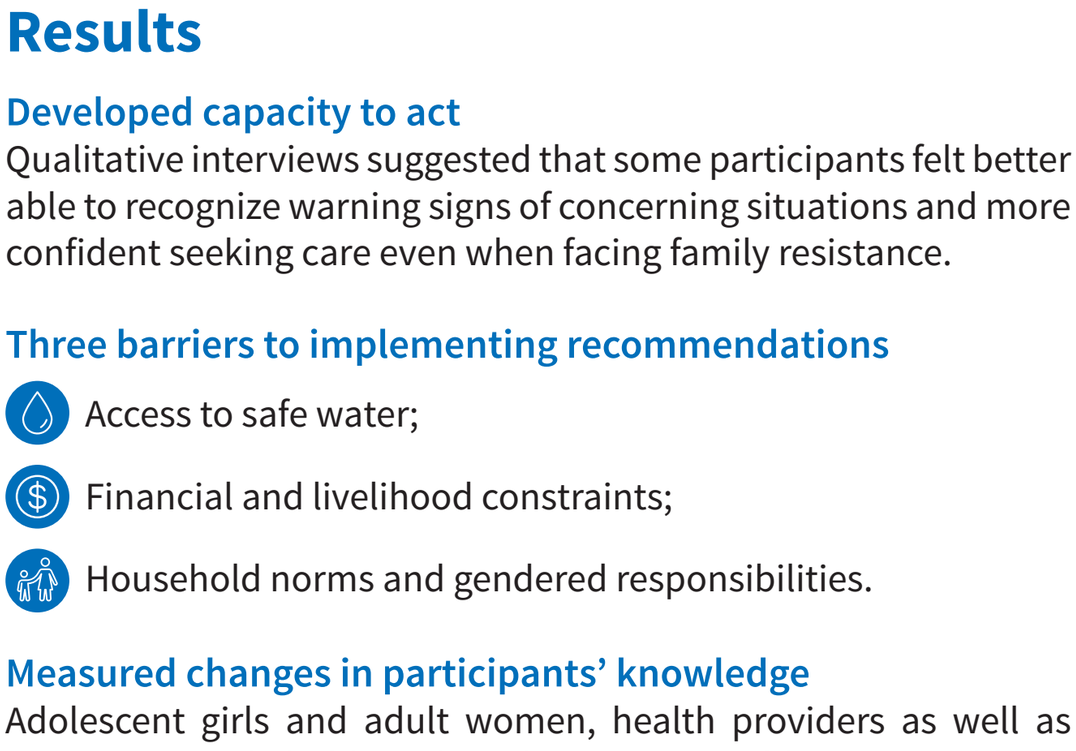




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> *Before these sessions, we did not realize that salty water could affect pregnancy in so many ways. Now we make sure pregnant women in our family also drink safe water.*
>
> — Community participant from Assassuni

## Conclusion

The REACH experience highlights the importance of combining contextualised, participatory health education with the resources and support needed to put learning into practice. Alongside education, the project supports health facilities, community-managed services (solar ambulances, water sources) and affordable adaptation solutions (drying sleeves for menstrual health). Sustaining these efforts requires family and community involvement, integration into routine public health services and ongoing support for health professionals. This combined approach may support protective practices; its contribution to community resilience remains to be assessed.

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