

MALAYSIA is racing to produce a generation of scientists, engineers, and technology innovators. Amid this technological enthusiasm, though, an uncomfortable question deserves attention: What is the point of producing technologically brilliant children who cannot make informed decisions about their own health?

A student may understand algorithms but struggle to interpret nutritional labels. Another may design a sophisticated robot yet remain unaware of the consequences of prolonged inactivity or excessive sugar consumption.

Perhaps it is time to stop treating science, technology, engineering, and mathematics (STEM) education separate from health education. Health should become the laboratory in which STEM comes alive.

Imagine a mathematics lesson where students calculate their weekly sugar consumption rather than solve another disconnected textbook problem. Imagine sci-

ence lessons where pupils investigate how sleep influences concentration, or technology classes where they design applications to monitor hydration and physical activity. Engineering challenges could involve developing affordable solutions to improve school canteen hygiene or reduce food waste.

These are not extracurricular distractions. They are opportunities to transform abstract knowledge into meaningful problem-solving. However, integration must extend beyond attractive classroom projects. We need immediate structural changes.

First, every school should introduce a STEM-for-health challenge, requiring students to identify one

genuine health concern within their school community, investigate its causes using evidence, and develop a practical intervention. Success should be measured through demonstrated learning and realistic improvements, not merely colourful posters or impressive presentations.

Second, school canteens must become living laboratories. Pupils could investigate nutritional content, analyse purchasing patterns, evaluate food affordability, and propose healthier alternatives.

Third, teachers need interdisciplinary collaboration rather than another compulsory workshop. Science, mathematics, physical education, and health education teachers should jointly design

learning experiences. Existing curriculum time can be reorganised around shared problems without introducing another examinable subject.

Fourth, partnerships with universities, healthcare professionals, and local communities should translate student discoveries into action. A school project identifying excessive sugar consumption, for example, should lead to discussions with canteen operators, families, and health practitioners, not disappear after assessment.

Science helps pupils understand their bodies, mathematics enables them to evaluate nutritional choices, while technology and engineering empower them

to solve everyday health problems. STEM provides the knowledge and tools; health education gives them a meaningful purpose.

Ultimately, educational excellence should produce not only innovative minds but also healthier, well-rounded Malaysians.

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