

Acknowledgements

The Care for Development module of IMCI was first developed in the late 90s to provide families with information and recommendations for cognitive stimulation and social support to young children as part of the child health visit specified in the WHO/UNICEF strategy Integrated Management of Childhood Illness (IMCI). WHO prepared the Care for Development recommendations as part of the Counsel the Mother Card along with advocacy materials, technical seminars, and training materials with the technical expertise of Drs. Patrice Engle and Jane E. Lucas.

The project was led and managed by **Meena Cabral de Mello**, Senior Scientist, Department of Maternal, Newborn, Child and Adolescent Health in WHO, and **Nurper Ulkuer**, Chief, Child Development Unit in UNICEF.

In 2007, a group of experts in health, nutrition, and child development met at the International Child Development Centre (ICC) in Ankara. They reviewed the Care for Development training materials and shared experiences in using the guidelines in Africa, the Central Asian Republics, the Middle East, and South East Asia.

Nurper Ulkuer, Senior Advisor and Chief, Child Development Unit, UNICEF, New York, Nune Mangasaryan, Senior Advisor Nutrition, UNICEF, New York, and Meena Cabral de Mello, Senior Scientist, Department of Child and Adolescent Health and Development, World Health Organization, Geneva convened the group which included:

Patrice Engle (Professor of Child Development, Cal Poly University, United States);

Ilgi Ertem (Professor of Paediatrics, Ankara University, Turkey);

Jane E. Lucas (Consultant in child health and development, United States);

Sally McGregor-Grantham (Professor of Paediatrics, University College London, United Kingdom);

Sudhansh Mahotra (Regional Adviser, Child Health and Development, WHO SEARO);

Linda Richter (Executive Director, Child, Youth, and Family Development, Human Sciences Research Council, South Africa);

Atif Rahman (Professor of Child Psychiatry, University of Manchester, United Kingdom);

Tomris Türmen (Professor of Paediatrics, Ankara University, and President of the International Children's Centre, Turkey) with the assistance of others from the ICC.

The meeting participants concluded that the training for workers in first-level health facilities was a valuable tool to promote the healthy growth and development of young children. The available materials, however, needed updating to be consistent with new research evidence and WHO/UNICEF recommendations. Furthermore, if the training could be used beyond, as well as within, the IMCI strategy and local health facilities, the intervention had the potential to reach many more children. The training could complement other child survival and health, nutrition, and early child-care interventions in resource-poor areas, including programmes to meet the needs of children living in communities affected by HIV/AIDS. The group's valuable recommendations are incorporated in these revised materials for the course **Counsel the Family on Care for Child Development**.

We are grateful to the many international experts and WHO and UNICEF regional and country based staff who contributed over the years to the development and use of the Care for Development materials.

We are especially grateful to **Drs Jane E. Lucas and Patrice Engle** for donating much of their valuable time and technical expertise that was needed to update and revise the materials that are contained in **Care for Child Development**. They were supported by Aisha K Yousafzai, Assistant Professor, Department of Paediatrics and Child Health, Aga Khan University, Karachi, Pakistan and Oliver Petrovic, ECD Programme Specialist, Early Childhood Development Unit/PDO, UNICEF, New York, USA.

The assistance of Amy R. Borden, WHO intern, Des Moines University, USA, in the finalization process is gratefully acknowledged.

Care for Child Development



Photo J. Lucas



Photo Caitlin Chittenden / Kerala, India, 2007

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Additional materials to support the implementation of Care for Child Development will be added to this set as they are finalized.

Foreword

Early childhood development (ECD) – including the sensori-motor, social/emotional and language/cognitive capacities – is indivisible from the child survival, health and education agendas and represents one of the important stages for breaking the intergenerational cycles of poverty and for promoting sustainable development. Development during the early years lays the critical foundations for health, learning and behaviour across the life course.

Poor development during childhood, unfortunately, is widespread. Globally over 200 million children do not reach their developmental potential in the first 5 years because they live in poverty, and have poor health services, nutrition and psycho-social care. These disadvantaged children do poorly in school and subsequently have low incomes, high fertility, high criminality, and provide poor care for their own children. As a result, their countries suffer an estimated 20 per cent loss in adult productivity (McGregor et al., The Lancet Child Development Series, 2007).

Investment in early childhood programmes is essential because ECD programmes and interventions can provide a “fair start” to children and

help to modify distressing socio-economic and gender-related inequities. There is strong evidence regarding interventions that can address the causal factors and reduce the burden of poor child development.

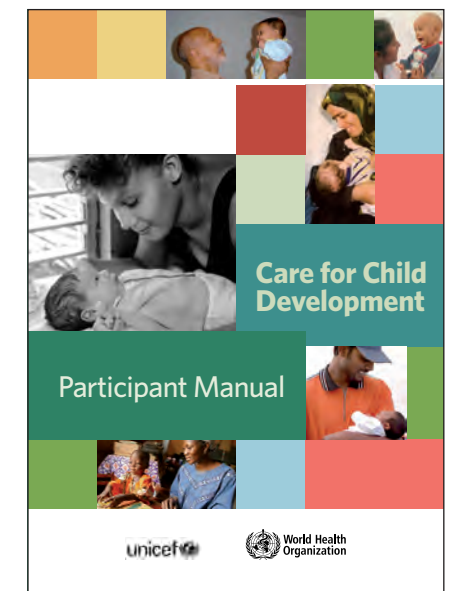
The health sector in countries has the capacity to play a unique role in the field of ECD because the most important window of opportunity for ensuring optimal development and preventing risk of long-term damage is from pregnancy through the first five years of life. Therefore health care encounters for women and young children are important opportunities to help strengthen families’ efforts to promote children’s early development and may represent the only real chance for health professionals in developing countries to positively influence parents of young children. But between birth and five years of life, there are relatively few investments made by governments for promoting the development of young children, and ECD is currently not systematically incorporated into initiatives to promote and protect maternal and child health. Moreover, families are often not prepared or aware of the critical role they can play in promoting cognitive and socio-emotional development in the early years.



To address this gap, WHO and UNICEF have collaborated closely to strengthen their technical support to regions and countries and have extended partnership to national leaders and governments, development agencies, researchers, academics, non-governmental organizations, professional associations and advocacy groups. We have also developed the present evidence-based set of materials to help international staff, national governments and their partners promote **Care for Child Development** within all relevant programme activities of the health sector.

These materials guide health workers and other counsellors as they help families build stronger relationships with their children and solve problems in caring for their children at home. **Care for Child Development** recommends play and communication activities for families to stimulate the learning of their children. Also, through play and communication, adults learn how to be sensitive to the needs of children and respond appropriately to meet them. These basic care giving skills contribute to the survival, as well as the healthy growth and development, of young children.

We hope that these materials will be widely used to optimize early psycho-social development and thereby reduce inequities and the global burden of poor development.



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