



September 2001

**Review of *Children as Partners in Health: A Critical Review of the Child-to-Child Approach*. Pat Pridmore and David Stephens.**

**Review by Terri Combs-Orme**

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**Recommended Citation**

Combs-Orme, Terri (2001) "Review of *Children as Partners in Health: A Critical Review of the Child-to-Child Approach*. Pat Pridmore and David Stephens. Review by Terri Combs-Orme," *The Journal of Sociology & Social Welfare*: Vol. 28 : Iss. 3 , Article 14.

Available at: <https://scholarworks.wmich.edu/jssw/vol28/iss3/14>

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One of the book's strengths is its effective use of statistics and narrative. Landry uses each to provide a fuller portrait of Black families over time. Readers who prefer one means of presentation over the other will find this text to be uncomplicated. This book could be used in courses in social welfare policy and women's or family studies courses. It's graphics are a little dull but still the analysis is clearly written, blissfully succinct (yet inclusive) and the text contains an excellent bibliography. *Black Working Wives* should not be forgotten.

Tracey Mabrey  
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Pat Pridmore and David Stephens, *Children as Partners in Health: A Critical Review of the Child-to-Child Approach*. New York: Zed Books, 2000. \$ 59.95 hardcover, \$22.50 papercover.

This book could be placed in the context of any number of fields, including health education, international health, or public health, and maybe even child development. I hope I do it no disservice by speaking from the perspectives of child health and social work, since that is where I do my work. It is a field in which interventions on behalf of children are generally performed by professionals, with some notable (though insufficient as yet) partnerships with parents. This is the first approach I have read that targets children as the agents of change.

There is much to be said for this approach. For the field of social work, it truly starts "where the client is" and demonstrates a true appreciation for the dignity and agency of children as individual human beings. That by itself is unique. Perhaps more important, though, the Child-to-Child approach takes a long-term approach that promises to improve health not just in this generation, but in generations to come.

First developed as a response to the 1979 United Nations International Year of the Child in 1979, the Child-to-Child movement uses the school setting in under-developed counties to educate primary school children about health concerns, sending them home to their families and out to their communities to put what they learn into practice. The movement is based on a belief in

the rights and responsibilities of children, as well as a fundamental belief in bringing about good health through empowering communities rather than delivering the message of good health from "on high." Active learning principles involve the children in assessing their communities' needs and devising means of meeting those needs.

This book provides a good overview of the Child-to-Child movement, providing fascinating examples from varied locations (several African nations, India, Mexico, and the United Kingdom). The detail in the case studies would be useful for classroom study in public health, as well as community organization in social work.

This book is not simply a rhetorical apology for the movement, however. It provides a critical review of the movement, along with frank discussions of the weaknesses. For example, despite several extensive evaluations, empirical evidence of the effectiveness of Child-to-Child is thus far inadequate, and the authors place a serious call for research to address this limitation.

Perhaps even more interesting are discussions of the political implications for a movement that, though seeking to work "with" communities rather than "for" them, is essentially based on an idealized Western egalitarian view of children as partners. In many (if not most) cultures, children are low on the social hierarchy, and the engagement of their teachers, parents, and community leaders in partnerships with them is a difficult, if not explosive notion. The book provides interesting detail and discussion on this dilemma, noting that it is both the greatest strength and the biggest problem about the movement.

Social workers and others interested in child health, community organization, and children's rights will find this book to be an interesting study in methods that might have wide application, even in the United States. Can there be any doubt that public health problems like smoking, HIV, and obesity, just to name a few, have been inadequately addressed by adults alone? Perhaps the Child-to-Child movement might be a more effective model for health education in this country.

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