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Parwarish Markaz: Integrated Services for the Optimal **Development of Children Ages 0-3**

By Shelina Bhamani, Aga Khan Foundation

orldwide, there is support for ensuring and policy, so that they are supportive Early Childhood Development (ECD) programmes for family and communities. The significance of family care is of vital importance in the development of very young children. Children learn who they are and what life is all about from the people they are with. For the vast majority of children it is the family, in its many and varied forms, which is the most important influence on the child's perception of self and others. (Arnold, 1998)

Hence, working with families of young children who are their primary caretakers is crucial. Development agencies around the world are emphasising that it is crucial to initiate and expand community-based interventions for young children and their families. These interventions can help in meeting the needs of the communities and developing quality programmes that not only attract the donor agencies to invest, but can also provide sustainable alternatives for the communities. ECD practitioners need to constantly update themselves with new information about interventions around the world and develop their personal capacity to develop strategies for low cost ECD initiatives for marginalised communities.

The Health and Nutrition Development (HANDS) Community Society Development is an example of such an intervention. **HANDS** for Community Development is a registered non-profit organisation working since 1979 towards human development and committed to serving the community in all aspects of improving life standards.

HANDS started the Releasing Confidence and Creativity Programme (RCCP) for ECD with the Aga Khan Foundation (Pakistan) to serve children 0-8 years old in the underprivileged communities of rural Sindh are: province of Pakistan.

The RCCP works to ensure that young children's rights are honoured and met. It works to influence the environments . affecting the child, family, community, school

of young children's overall development. The programme aims to ensure that • children are ready for school and schools are ready for children. The RCCP do this through formal and informal programmes Programmes at Parwarish Markaz involving partnerships between families, communities, civil society and government. All the programmes are conducted by There is particular emphasis on ensuring programmes reach disadvantaged children - whether disadvantaged through poverty. gender, remoteness, disability, etc. (AKF Pakistan, 2006).

The HANDS-RCCP 0-3 pilot project aims to provide a holistic approach to ECD in order to increase parents and caregivers knowledge. skills and confidence in their abilities to support their children's development in the critical early years from preconception to three years. To cater to this need, HANDS established Parwarish Markaz, or 0-3 centres, in various communities in Sindh.

Parwarish Markaz

The early intervention and development centre. Parwarish Marzak. is beina implemented in 29 marginalised communities in the Matyari and Hyderabad districts of Sindh with approximately 800 children. 30 trained ECD workers. 30 child care assistants and more than 15 support staff including Lady Health Workers (LHWs). In Matyari, there are 26 Parwarish Markaz focusing on areas in the Sayeeadabad, Hala and Matyari clusters. In Hyderabad, there are three Parwarish Markaz in the Latifabad cluster. The clusters are chosen with the rationale of serving the poor, neglected, and marginalised communities across the two districts.

The core objectives of the Parwarish Markaz

- Training of key stakeholders in the community who are catering to the needs of children ages 0-3 years old
- Capacity development of the parents and community in regards to ECD

- Growth monitoring of children ages 2-4 in Parwarish Markaz
- School readiness and preparation of young children ages 0-4 years old

trained ECD practitioners to ensure quality in the programmes and effective utilisation by the community. Furthermore, the pilot intervention of Parwarish Markaz is supported and integrated with HANDS other core organisational programmes health, poverty alleviation and education, and is provided technical assistance. human resource and thematic guidance as requested. For example, if they have to conduct a health seminar, then a health team from HANDS is consulted and extends their support.

Some core programmes of the pilot intervention are as follows:

(a) Programmes for 0-2 years old:

Parental Seminars

The programme starts by registering the parents of the intervention areas in HANDS programmes. After registration, parental seminars are announced for the community in form of workshops, katcheris (local group discourse), and individual focus session during the home visits. It focuses on the capacity development of the parents on the topic of child development, child rearing practices, growth monitoring, breastfeeding and health and hygiene of young toddlers in the home setting.

LHWs Training

Training of Lady Health Workers (LHWs) is an integral part of the programme. LHWs are trained to provide optimal health services to the mothers of young children in the intervention areas. These LHWs are wellequipped with the basic health care facility kit and are empowered to share what they

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learned and skills to the community in need. The need for LHWs emerged because local, untrained, and sometimes unequipped women (Dai, as called in the local language) used to deliver babies and provided advice on child rearing to mothers (the trend of . Dai is still very much in practice). However, from past observations, there were many instances of mother mortality rate and unhealthy child rearing practices in the community.

Local Health Camps

Local Health Camps are arranged quarterly where facilities of immunisation for women and children, oral re-hydration therapy and control of diarrheal diseases, nutrition . counselling, growth monitoring, treatment of minor illness, ante-natal, post-natal, delivery services, treatment of acute respiratory infection and referral services to secondary care facility are given to the mothers of young children.

House Visits

House visits are key component of this programme. Approximately 500 families are part of the programme where LHWs pay visits to support mothers. In many instances, children are gathered at a village camp (local place or park) where health check-ups are held for them.

(b) Programmes for 2-4 years old:

Sughar (Earning programmes mothers of the young children)

This programme aims to empower mothers of young children who are below the poverty line. The overall aim of this intervention is to improve socio-economic condition of underprivileged communities especially mothers/caretakers with the provision of income generating opportunities through skill enhancement trainings and establishment of enterprises.

Training of Teachers and Caregivers

A major focus of the programme is on the training of key stakeholders. Hence, the staff are sent to leading ECD training organisations to enable them to get equipped with the latest teaching and learning methodologies, awareness of recent trends in the field of

child development, acquisition of skills for Accomplishments of Parwarish Markaz making learning environments conducive for the young children and enhancing their skills HANDS initiated the Parwarish Markaz for monitoring children's holistic progress.

Growth Monitoring

At Parwarish Markaz, a monthly growth monitoring of the enrolled children is conducted. Moreover, children are also given basic health awareness through interactive activities. These efforts result in preparing the children not only psychosocially for the wider world but are also effective for raising awareness of basic health, hygiene and nutrition facts.

School Readiness

The scope of the RCCP is to expand access and improve the quality of teaching/learning in katchi (preschool) classes and classes 1 and 2 (with an emphasis on reaching girls and poor communities). The aim of Parwarish Markaz is to provide learning opportunities for children ages 2-4 years old so that they are retained in the ECD programme and continue their schooling in Grade 1 and onwards. Parwarish Markaz provides opportunities to young learners to away from their homes and learn some basic skills and content knowledge of the and fine and gross motor skills.

on a small scale as its pilot intervention. which ended in September 2011. Hence, the success and impact of the programme is yet to be evaluated at a larger scale. However, the intervention has touched the lives of many caretakers, parents and the young children from the marginalised communities. It has given opportunities of employment to many trained mothers from the community, catered to the basic health needs of the young children and mothers from the target population, advocated policy for 0-3 years old children rights, initiated programmes and well-being practices at the local and government level, and had made a significant impact on the communities to cater to the needs of young children.

Fatima (changed name), a lead teacher at Parwarish Markaz shared her experiences, "I had never imagined that in our remote village there could be a centre for children who are 2-4 years old. In the past, young children of these ages used to wander outside their house and their mothers used to neglect their basic learning and health needs and they never used to send their kids adjust themselves in a social environment to school even when they turn 5-6 years old. I am fascinated to now see children coming to the centres at the age of two and seeing world and enhance their body coordination that their families are now planning their future education as well."



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Saeeda, a mother enrolled in the Sughar programme, a farmer's wife and mother of five children, shared that her monthly income was 2,500 Rupee and her three children were very young (ages 2-4) due to which she was unable to support her husband financially and had to focus on the needs of their children. Since she enrolled herself in Sughar programme, she now not only earns her living, but also sends her three young children to Parwarish Markaz where they are given opportunities for learning and play. Nathsha, mother of two children shared her experiences, "My elder son used to be unwell for years. I had applied all those local methods but later they diagnosed him with polio disease. Since Lady Health Workers started visiting our homes in the village, now we are well aware that we need to give proper vaccination to our young ones. I now feel myself a good mother, as my younger daughter is very healthy and I have given her all the necessary vaccinations."

There are many other numerous examples of experiences that clearly showed the impact of RCCP and Parwarish Markaz in the communities.

Challenges and Steps Forward

The programme has faced numerous challenges with regards to the lack of trained caregivers in the targeted areas, catering to cultural differences and trends in programme advocacy and execution, record keeping of the children and tracking their progress, lack of research studies focusing on programmes for 0-4 years old children, lack of skilled and well trained programme staff, convincing parents and community to participate in the interventions and programmes, sustainability of the programme on the community grounds, and striving to demand continuation of the programme after September 2011 from the Maqbool Rahu contributed to this article. government and internal agencies.

Regardless of all the challenges faced, HANDS aspires to work and advocate for Early Childhood Development with the same vision and believes that the change is a process and not an event, keeping in Arnold, C. (1998) "Early childhood... Building our mind the inspiration from the quote of one of HANDS program manager, "The ECD journey has not ended but just begun."





References

AKF Pakistan. (2006) Releasing Confidence and Creativity Programme 2006-2011: Proposal

Understanding and Moving Towards the Best of Both Worlds." Paper presented at International Seminar, Ensuring a Strong Foundation: An Integrated Approach to ECCD, 23-27 March,

Above: Children at the Parwarish Markaz

Photo courtesy of Health and Nutrition Development Society (HANDS)

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