

THE INTERNATIONAL YEAR OF THE CHILD

1979

UNITED NATIONS DECLARATION OF THE RIGHTS OF THE CHILD

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The right to affection, love and understanding. The right to adequate nutrition and medical care. The right to free education. The right to full opportunity for play and recreation. The right to a name and nationality. The right to special care, if handicapped. The right to be among the first to receive relief in times of disaster the right to learn to be a useful



member of society and to develop individual abilities. The right to be brought up in a spirit of peace and universal brotherhood.

The right to enjoy these rights, regardless of race, colour, sex, religion, national or social origin.

IYC 1979 - INDIA

India has selected a special symbol for the International Year of the Child. The symbol depicts a male and female child, with Sun and a Slate. The Sun signifies health and strength. The slate stands for the imports of education for the future of children.

The Indian symbol is distinct from that adopted by UNICEF as the lead agency for IYC as it was felt that the Indian symbol should be related to the country's socio-economic life.

SLOGAN

A slogan has been selected by India for IYC,

Which is

“HAPPY CHILD NATION’S PRIDE”

THEME

The general theme in India for IYC—1979

“REACHING THE DEPRIVED CHILD”





I AM A CHILD

I am a Child
All the World waited for my coming
All the World watches with interest
To see what I shall become
The future hangs in the balance
For what I am.

I am a Child
I have come into your World
About which I know nothing
Why I came I know not
I am curious
I am interested.

I am a Child
You hold in your hand my destiny
You determine largely
Whether I shall succeed or fail
Give me, I pray you
Train me, I beg you
That I may be a blessing to the World.

(ANONYMOUS)

BABY NEEDS A LOT OF LOOKING AFTER

How much do you know about baby care ?
Our quiz will tell you.

1. If he cried when teething, would you :
 - a) think it natural.
 - b) let him suck your finger for comfort; or
 - c) give him sips of boiled water to soothe his gums !
2. If he had ear-ache, would you :
 - a) give him a sedative ;
 - b) put cotton wool in his ear ; or
 - c) see a doctor in case its anything serious ?
3. If he was scalded, would you :
 - a) prick the blisters right away ;
 - b) take him straight to the doctor ; or
 - c) cover the scalds with dry dressings or lint, then take to a doctor ?
4. If something stuck in his throat, would you :
 - a) give him a drink ;
 - b) phone a doctor ; or
 - c) try to pull out whatever it is ?
5. If he sniffed something up his nose, would you :
 - a) try to pull it out ;
 - b) try to get him to blow it down ; or
 - c) press downwards gently above the obstruction ?



6. If he had scurf in his hair, would you :
- a) brush it more frequently ;
 - b) wash his hair more often or
 - c) gently rub in coconut oil to soften the scurf and then wash ?
7. If you had to change his napkin, would you :
- a) Use three pins for fastening ;
 - b) two pins ; or
 - c) do it as given below
- (Lay the napkin out under the baby.
Place "flap" in between baby's legs.
Wrap side pieces over and secure three points with one pin.)
8. If your Child threw a tantrum, would you
- a) Smack him
 - b) Ignore him
 - c) Calm the Child down first and then explain your point

HOW TO SCORE

Count two marks for every "C" you've ticked: one for every "B", no marks for "A". If you score the full 16 marks you are a fully-fledged baby-sitter or a good mother. Down to seven, and you ought to get better instructions from the mother before you baby-sit. Seven and under, you shouldn't baby-sit. You need to learn a lot more to be a good mother.

MARASMUS :-

This child does not get enough of any kind of food, especially energy foods.

He is starved, his body is small, very thin, wasted. He is just skin and bone. Has a face of an old man, always hungry, potbelly, very under weight.

He needs lots of small, frequent feeds and correct the underlying pathology.

KWASHIORKOR :-

This child is not getting enough food or proteins. The condition is aggravated by Measles, Whooping cough, Chronic diarrhoea, Tuberculosis. This is called wet Malnutrition because his feet, hands and face are swollen. Although he looks fat, he has very little muscle left. He is little more than skin, bones and water.

This child needs more foods, rich in protein. Treat the underlying illness.

Malnutrition may cause many different problems in children:-

In mild cases

slower growth.
swollen belly.
thin body
Loss of appetite
Loss of energy
Paleness (Anaemia)
Desire to eat dirt
Sores in corners of mouth.
Frequent colds and
Other infections.
Night blindness.

In more serious cases

Little or no weight gain
Swelling of feet and or face.
Dark spots, bruises or open
Peeling sores.
Thinness or loss of hair
Lack of desire to laugh or play.
Sores inside mouth.
Failure to develop normal intelligence.
Dry eyes (Xerosis)
Blindness

ANAEMIA :-

Common in childhood. Pale Child. Failure to thrive is present. Hookworm common cause of anaemia in barefoot going people.

For severe cases, plain ferrous sulphate tablets can be used. Treat for hookworm, if positive.

Foods rich in iron are :-

Green leafy vegetables, green beans, peas.

Ragi

Jaggery

Egg, Liver, Meat.

VITAMIN 'A' DEFICIENCY :-

Common cause of blindness in children. Condition precipitated after severe dehydration. Eyes become dry. Prevent it by giving foods like milk, green leafy vegetables Carrot, Papaya. Prophylaxis 2 lac units of Vitamin A every 4 months.

DIARRHOEA AND DEHYDRATION

Loose motions, watery, with or without blood or mucus. Child can pass loose stools few times or 20-30 times. Vomiting can be associated.

Small child very soon gets dehydrated. Most children who die from diarrhoea die because they do not have enough water left in their bodies. This lack of water is called dehydration. Dehydration results when the body loses more liquid than it takes in. Dehydration develops more quickly and is most dangerous in small children. It is important that everyone especially mothers - know the signs of dehydration and how to prevent and treat it.

Sign of Dehydration :-

Little or no urine, the urine is dark yellow.

Sudden weight loss.

Dry mouth.

Sunken tearless eyes.

Loss of elasticity or stretchiness of the skin.

Very severe dehydration can cause rapid, weak pulse, fast breathing or fits.

Prevention - A dehydrated person should drink large amounts of liquids, water, tea.

Dehydration can be prevented if a person with diarrhoea with or without vomiting is given plenty of liquids,

Rehydration Drink - To prevent and treat Dehydration

1 litre of boiled water + 2 level tablespoons of Sugar or Honey + 1 teaspoon of common salt + $\frac{1}{4}$ teaspoon of Bicarbonate of Soda. If you do not have soda, use another $\frac{1}{2}$ teaspoon of Common salt.

If available, add half a cup of orange juice or a little lemon juice to the Drink.

Dehydration can be prevented if a person with diarrhoea without vomiting, is given plenty of fluids, **Small frequent feeds are important.**

If vomiting or diarrhoea persists refer to the nearest hospital for further management

Dysentery (stools with blood and mucus) is likely to be amoebiasis.

Dysentery with fever, or toxicity, is likely to be bacillary dysentery.

Child passing stools soon after feeds, bulky, frothy, pale and foul smelling is likely to be giardiasis. Sometimes watery stools are passed.

FEVER :-

Fever itself is not a sickness, but is a sign of different sickness. High fever can be dangerous, especially in a small child and can produce a fit. Never wrap the child in clothing or blankets. Fresh air or breeze will not harm a person with fever. Cover the Child with a wet cloth and expose to breeze or under the fan. Fever comes down quickly. Take aspirin to lower the fever,

Sponging with lukewarm water and ice or cold application to the forehead will bring down the fever.

The Person must drink lots of water, juices or other liquids.

Fits - When a person has fit, he suddenly loses consciousness and has jerking movements (convulsions). In small children high fever can cause fits. Severe dehydration, meningitis, brain fever, malaria of the brain or poisoning can cause convulsion.

In India, 42% of the total population are below 15 years of age; the stages of development of children are, therefore, largely dependant on the chronological age as follows :

- I. **Pre-Natal Development or Cellular Birth** (from Conception to Birth)
a Biological growth ;
- II. **Neo-Natal** (New Born) or **Physical Birth**; a Biopsychological growth ;
- III. **Infancy Birth to 2 years or Emotional Birth**; an Emotional growth ;
- IV. **Early Childhood—2 years to 5 years Social Birth**; the Pre-school age of Social adjustments with persons in the home and environment.
- V. **Late Childhood—5 years to 12 years, the School Age** ;
- VI. **Adolescence—12 to 18 years** ; a period of Identity crisis and recognition.

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" If you want to love your Child, father, love his mother first "

"The home is the first laboratory of love"

WHO IS THE CHILD ?

THE CHILD is builder of the human personality.

THE CHILD has within himself the ground-plan for his construction.

THE CHILD has within himself a most detailed timetable for its execution.

THE CHILD has within himself the capacity to follow the ground - plan and time table to accomplish the unique task of building man-the-adult.

THE CHILD has within himself the capacity to choose from his environment what he needs for his creative work of self - construction, as and when he needs it.

What does the Child need ?

The CHILD'S happiness and normality of his development depend on his finding the FREEDOM to work at his self-construction in OBEDIENCE to the laws that govern human development, in an ENVIRONMENT PREPARED for this purpose and containing the Guidance and MEANS OF DEVELOPMENT that enable him to utilize fully all the Creative Powers that are his, during the period of fundamental development.

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If there is anything that will endure the eye of God, because it still is pure — It is the spirit of a little Child, fresh from his hand, and therefore undefiled.

—R. H. STODDARD

The basic needs of all children for happiness are fundamentally the same as for adults, though the emphasis varies according to age.

Briefly, these needs might be said to be :

1. **To be loved and wanted, and to love other people.**
2. **To have work to do and enjoy doing it and to be able to do it reasonably well.**
3. **To live amicably in a community**
4. **To find out his role in life.**
5. **Eventually to adjust himself to the Infinite.**

x

x

x

x

"Youth, as we know it today is a new phenomenon.

Youth is the period between adolescence and adult status. It is a stage not an age, when the personality is crystallized.

"All over India we have Centres of Human activity which are like lamps spreading their light more and more in the surrounding darkness. This light has to grow till it covers the land."

—J. NEHRU

TIPS FOR MODERN PARENTS

"And What Are We To Do?" ask, bewildered parents of the modern. Here are some do's and don'ts compiled by experts.

- ✖ 1. Be Appreciative of Each other.
- ✖ 2. Recognise the Value of the Teamwork.
- ✖ 3. Encourage - Don't Discourage.
- ✖ 4. Set the Right Example.
- ✖ 5. Gear Them to Live in a Changing World.
 - ✖ 6. Promote Respect for Authority.
 - ✖ 7. Stimulate Them to be Creative.
 - ✖ 8. Prepare Them for Worthwhile Careers.
 - ✖ 9. Don't Overlook the Need, for Perseverance.
 - ✖ 10. Keep Communication Lines open.
- ✖ 11. Take Time to Listen.
- ✖ 12. Answer Their Questions.
- ✖ 13. Develop a Family Sense of Humour.
- ✖ 14. Point out Their Civic Responsibilities.
- ✖ 15. Give Them a Zest for Learning.
- ✖ 16. Let Them Share in Family Duties.
- ✖ 17. Form Sensible Attitudes Toward Money.
- ✖ 18. Assist Them To Make The Most of Free Time.
- ✖ 19. Be a Friend To Their Friends.
- ✖ 20. Provide Wholesome Sex Instruction.
 - ✖ 21. Nourish Their Spiritual Life.
 - ✖ 22. Help Them Acquire a Sense of Mission.
 - ✖ 23. Guide Them Towards Maturity.
 - ✖ 24. Give Them a Big Vision.
 - ✖ 25. Teach Them to Get Ready for Their Own Homes.

26. Reach Out to the World from Your Home

VALUES OF A YOUTH

1. Justice.
2. Reward and Punishment, Praise and Discipline.
3. Responsibility—Raise Level Gradually.
4. Satisfy their Curiosity.
5. Recreation.
6. Good Sex Education.

SHOCKING STATISTICS

Know your India. Here are some shocking statistics to jolt you:

- ❖ *More than 6 out of every 10 youth in India are below the poverty line.*
- ❖ *Two out of every three of them go to bed hungry.*
- ❖ *There are 19,000,000 unemployed registered youth in the country. This, of course, does not include the greater part who are unqualified*
- ❖ *There are 110,000 villages that have no drinking water*
- ❖ *Seven out of every ten youth are illiterate*
- ❖ *Twenty per cent of the population are landless and 50% own only 4% of the land*
- ❖ *60 million of our youth suffer from malnutrition and of them, 400,000 may die in the next three months.*
- ❖ *25 million are blind because of the lack of vitamin A.*

—FROM FRIENDS MAGAZINE

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"The Family is the natural environment of the Child"

—CHARLES VELLA

PROTECTION AGAINST DISEASES

(From Centre Calling January 1979).

RIGHT from birth, children are exposed to various health hazards including communicable diseases. The natural resistance of the body to fight disease is of low order with the result that children fall an easy prey to diseases.

Immunisation builds up the resistance or defence mechanism in the children and this enables the body to fight and overcome infections.

A child needs to be protected against infections through immunisation. Immunisation should be done early in life and repeated periodically.

SCHEDULE OF IMMUNISATION FOR CHILDREN

Age	Immunisation
Before Birth Mother should receive Tetanus Toxoid	
16—20 weeks	Tetanus toxoid 1st dose
20—24 weeks	„ 2nd dose
36—38 weeks	„ 3rd dose.
AFTER BIRTH	
Within first week	B. C. G. Vaccine
2nd—3rd month	Small - pox vaccine
4—9th months	Diphtheria - Pertussis - Tetanus Triple Vaccine 3 doses at an interval of 1-2 months Polio (Trivalent oral vaccine) 3 doses at an interval of 1-2 months, Given together with Triple Vaccine
9—12 months	Measles vaccine: One dose

18—24 months

Diphtheria - Pertussis - Tetanus (Triple - Vaccine)
Polio (Trivalent oral vaccine) Booster dose one

5—6 years

Diphtheria - Tetanus (Bivalent vaccine) (Booster dose)
Typhoid (Monovalent or bivalent vaccine) one dose.
after an interval of 1-2 months the second dose of
typhoid vaccine.

10 years

Tetanus Toxoid Booster dose.
Typhoid (Monovalent or bivalent vaccine)
Booster dose.

16 years

Tetanus Toxoid Booster dose.
typhoid (Monovalent or bivalent vaccine)
Booster dose.

Coming specifically to **Health Care** we can consider this under three headings.

1. Primary Prevention
2. Secondary Prevention &
3. Tertiary Prevention.

Primary Prevention: Starts with life before birth. When in utero, the mother needs to be specifically protected with Tetanus toxoid (3 doses in the 7th, 8th & 9th months). In antenatal care, immunisation of the mother for protection of herself and her child is vital if we are to prevent neonatal Tetanus.

The Second aspect of Primary Prevention is adequate and good nutrition of the mother. The pregnant mother must have sufficient iron, calcium and proteins to give her child a future citizen—a good start in life. Nutrition in the first three years of life is essential for brain functioning and intelligence.

Primary prevention is continued at birth with BCG to prevent Tuberculosis, (which is still the No. 1 Killer disease in India). Smallpox vaccination and later Triple Vaccine and Oral Polio to prevent Diphtheria, Whooping cough, Tetanus and Poliomyelitis. At school going age Typhoid and Cholera inoculations must be administered and revaccinations against the above diseases at regular intervals.

Primary prevention against environmental pollution, smoke and infectious agents must also be mentioned

Secondary Prevention in health care must be focussed on early diagnosis and prompt treatment. Too often a child with a cough or fever or loss of appetite is neglected till too late. In the summer months diarrhoea or vomiting can lead to severe dehydration and death in a matter of hours,

With early diagnosis and prompt treatment precious lives can be saved. Hence it is imperative that a mother be taught the significance of simple signs and symptoms, so that she can start first aid and administer simple remedies like sips of water to which a little salt and sugar added for a child who is having diarrhoea.

Tertiary Prevention consists of Rehabilitation which means restoring to former capacity. Rehabilitation can be **physical** as in the case of polio when physiotherapy and aids need to be given. It can be **social rehabilitation** for cases after the so called "social diseases" like Leprosy when even after a full cure the children are not fully accepted by society.

In mental rehabilitation the family members and the community must be made aware of their part in helping the mentally ill or disturbed child. Primary Rehabilitation must start for a handicapped child at birth whenever needed.

In talking of health we must keep in mind the total picture or personality of the child in the five human aspects of growth and development - physical, mental, social, psychological or emotional and spiritual.

C H I L D

For us the word child should spell out C for continuing concern, H for health and hygienes. I for an integrated programme of education. L for love and D for a diet that is balanced.

Motivation for Youth to be a Leader and an Animator

1. A leader is one who knows,
an animator, one who knows what the people know and takes
them beyond what they know.
2. A leader is a person of calibre,
an animator raises the quality of the group
3. A leader, makes his or her voice heard in the group,
an animator gives the group a voice that can be heard.
4. A leader goes on ahead of the people,
an animator moves the people ahead of where they are.
5. A leader tells the people what to do,
an animator awakens the people's power to act.
6. A leader portrays the challenge of authority,
an animator challenges the people's own potentiality to exercise power.
7. A leader can channel the energies of a group,
an animator can create new energies within a group.
8. A leader can only function in a definite organisational set-up,
an animator must function in a dynamic movement of unstructured
developments.
9. A leader is a model for the people,
an animator takes up the image of the people, transforms it and
projects it back to the people.

*Where the mind is without fear and the head is held high ;
Where knowledge is free ;
Where the world has not been broken up into fragments
by narrow domestic walls ;
Where words come out from the depth of truth ;
Where tireless striving stretches its arms towards perfection ;
Where the clear stream of reason has not lost its way into the
dreary desert sand of dead habit ;
Where the mind is led forward by thee into ever-widening
thought and action—
Into that heaven of freedom, my father, let my country awake.*

—TAGORE

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