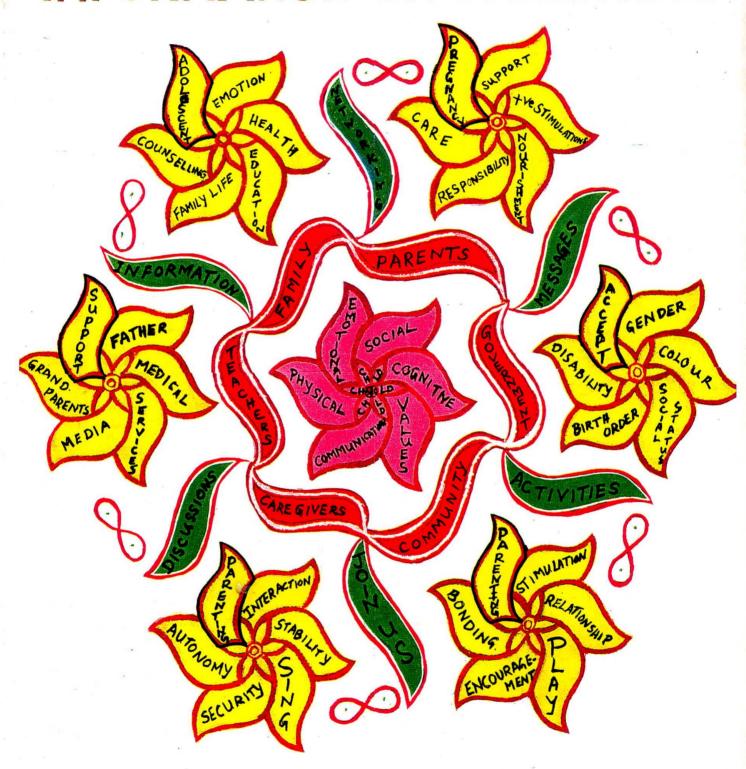
NETWORK FOR INFORMATION ON PARENTING



A Tamilnadu Initiative

NETWORK FOR INFORMATION ON PARENTING

(A Tamilnadu Initiative)

Network for Information on Parenting form on 16 th July 1999 at a meeting sponsored to UNICEF. The TOR was endorsed by the first group of invitees many of whom became members of NIP	py '	Page	3 - 6
Very soon for a better understanding of the processes, strengths and weaknesses of networking, Dr. Abel Rajarathnam sent in "So you want to Network"		Page	7 - 12
NIP's plan of action as envisaged was elaborated in a strategy paper by Tara Srinivas 'The Emergence of Network for Information' on Parenting		Page	13 - 16
In December 99 NIP brainstormed and identified the Critical Minimum Components of parenting		Page	17 - 18
The following inputs from members to specifically important components in Parenting brought in clarity and focus in NIP's work.			
Trauma of Rejection	Saulina Arnold	Page	19 - 21
Parenting - CRC/ Constitution of India /National Policies Right to Information - Reaching out to	Aloka Guha	Page	23 - 24
Parenting – Its scope and dimension	Anjana Mangalagiri Maya Galtonde	Page Page	25 - 28 29 - 35
What sparked off the need for a systematic organised, cohesive Network for Information on Parenting was an International tool—			
which after indigenisation was accepted as the first tool of the NIP		Page	37 - 43
This Networking process expanded into Various activities based on a planned strat July 99 to March 2001	egy	Page	45 - 48

The Cover design – a Rangoli Network was designed by Hema Srinivas

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Preamble

Tamil Nadu's pioneering contribution in reaching out to the rights and needs of children below 6 years has been significant in the country, both in terms of the state governments efforts and the many innovative approaches brought in through the concerted efforts of non-While these have resulted in near governmental organisations and individuals. universalisation of child care services for the 3-6 years olds, with substantial inputs in training and resource development, the challenge to bring in a holistic approach to child care and development within the framework of the Convention on Child Rights, for children below 3 years, still remains unfulfilled. India's Ninth plan reinforces the priority to promoting the young child's right to achieve full developmental potential.

It has now been adequately shown through research that the ways children respond to their environment and develop their learning capacities are a consequence of the nurture, nourishment and stimulation received from the foetal state through the early years. A large part of the brain development of the child occurs during the first 3 years. The need for children to receive appropriate stimulation and emotional security besides fulfilment of their basic physical needs, cannot be underestimated. New insights into early development have now shown that the impact of the environment on the brain in the very early years of the child's life is dramatic and specific, not merely influencing the general direction of development but also affecting how the brain is 'wired'. There is empirical evidence that brain development is highly vulnerable to various environmental influences than we believed earlier.

Early care, thus, has a decisive and long-lasting impact on how people develop their ability to learn and their capacity to regulate emotions. The role of the parents, family and children's immediate community, which is primary to the care and development of children, becomes critical in the very early years of the child. While child rearing practices have traditionally been deeply embedded in cultural patterns, beliefs norms and practices, there are basic needs that all children have and a predictable pattern of development during early years that are universal. However the broader context which surrounds families and communities such as changes in social and economic climate due to rapid industrialisation, urbanisation etc with consequences on family security levels, have a bearing on the nature of these childcare practices. The significance of information on parenting not only to emphasise the criticality of the development process in the life of the child below 3 years but also to equip parents with information on appropriate coping mechanisms in the light of rapid social changes, gains tremendous importance.

The Parenting Information Network will be committed to supporting efforts to strengthen capacities of parents and communities to create a positive, nurturing environment for all children and especially those from the deprived and un-reached communities in rural and urban areas. The main objective of this support in Tamil Nadu will be to promote child rearing practices for children below 5 years which

guarantees the child's physical well being.

promotes the child's psycho-social development – emotional security, socialisation and affection

promote the child's mental development – interaction, stimulation and play

The main elements of the strategy for achieving this would be the life cycle approach which focuses on interventions at each stage of a child's development, accelerating and building on earlier positive action; improving active learning capacity of young children through building capacity of community and parents in interactive stimulation processes; promoting intra and inter-sectoral dimensions for the child (we know that developmental needs of the child are a necessary function of the child's health and nutritional status) and advocating family as the first "learning site " of the child through networking and building community contact for propagating appropriate parenting practices.

It is considered that a network on Parenting Information will be an appropriate channel for the propagation of developmental interventions for children below three years through these strategies.

Objectives

The broad objectives of a Parenting Information Network would be to:

- 1. Provide a platform for sharing views, initiating discussion and stimulating debate on issues revolving around the young child.
- 2. Take a proactive role in advocating respect, dignity and realisation of the

Rights of the young children as per the Constitution of India and UN convention on the Rights of the Child.

- 3. Propagate culture-specific and holistic child rearing practices that should also include preparation for parenthood, pregnancy and early phases and disseminate at the same time, changes in practices emanating from the latest research world wide in the area of parenting information.
- 4. Create awareness of the impact of negative parenting practices and inculcate
 Positive attitudinal changes in parenting role; generate messages on effective child
 rearing practices through varied communication channels to diverse groups of parents
 and for all those who interact with children below five years.
- 5. Network and develop multi-sectoral linkages with Government, NGO sectors and other inter-sectoral groups (e.g. Nutrition Network, Urban Task Force etc.) to converge, consolidate and strengthen existing efforts and draw up common strategies within the broader framework (as outlined in the Preamble) to meet the developmental and learning needs of young children.
- Advocate policy issues related to the care and development of the young child.

Operational Framework

 Formalisation and Formation of the Network. Apart from those present at the first meeting To invite other bilateral agencies such as CRY, DANIDA, SIDA and educational institutions/ organisations such as Directorate of Public Health, Gandhigram, India Academy of Paediatrics, Tamil Nadu Slum Clearance Board, Avinashilingam Home Science College, Women's Christian College, Children's Garden School, Voluntary Co-ordinating Agency, SIET, Madras School of Social Work, Mother Teresa University, RUHSA and VHAI, to join the network.

 Formation of core group to oversee network activities, provide leadership and guidance in planning and implementing all activities for achievement of Network objectives and co-opting members. Core group members must be willing to participate

actively and on a continuous basis.

 Finalisation and formation of Sub-groups as proposed or expanded into more if required, with members of each sub-group identified.

I. Communication

Convenor: Maya Gaitonde (Bala Mandir Research Foundation)

II. Early Intervention

Convenor: S. Jayam (Vijaya Hospital)

III. Training

Convenor: Jaya Krishnasamy (Madhuram Narayan Centre)

IV. Research

Convenor: Yashoda Shanmugasundaram (MotherTeresa Women's Univer.)

4. Identification of Secretariat -- on rotation basis? First secretariat group

Proposed: Bala Mandir. The Secretariat will function in close co-ordination with UNICEF. It will be responsible for convening meetings of the Network and sub-groups, carrying out responsibilities for facilitating Network functioning and its logistics.

Financial Support

UNICEF to provide initial funding to facilitate the convening and operation of the Network. UNICEF funding may be made available for specific activities of the Network, subject to approval and within the agreed framework of co-operation in Tamil Nadu.

Membership:

The Network is proposed to be open to representatives of government and non-government organisations, bilateral agencies, professionals and experts working in the area of early childhood care and development in Tamil Nadu.

List of likely members of the Network i.e. those who participated in the meeting is shown below. This list will be extended further. Organisations/individuals could also be co-opted directly into sub-groups for their specialised contributions in specific activities.

List of Participants

18.794	
NGOs	, and the second
1. Ms. Vidya Shankar - Adopti	ve Parents Association, Tamilnadu
2 Ms. Andal Damodaran - Indian	Council for Child Welfare, Tamilhadu
3 Ms Aloka Guha - Spastic	c Society of Tamilnadu
4. Dr. Rajarathnam Abel - Rural I	Unit for Health and Social Action
5. Mr. Ramdas - ACCO	RD
6. Ms. Maya Gaitonde - Bala M	landir Kamaraj Trust
7. Ms. Hema Srinivasan - Bala M	landir Vidyalaya
8. Ms. Jaya Krishnaswamy – Mac	thuram Narayanan Centre
9. Mr. K. Shanmugavelayudhan	- TN Forces
10. Ms. Saulina Arnold - TNVH	A
EDUCATIONAL INSTITUTIONS	The second secon
Ms. Yashoda Shanmughasund	laram - Mother Theresa Women's University
2. Ms. Sakunthala Sharma	- Children Garden School
3. Ms. Saraswathy	- Children Garden School
	- Bhavan's Vidyashram
	- Bala Mandir Research Foundation
	- Avinashilangam University
 Ms. N . Jaya Ms. Mina Swaminathan 	- Project ACCESS
	- Madras School of Social Work
	- Madras School of Social Work
8. Ms. S. Tamil Selvi	- Indian Association of Paediatrics
9. Dr. R. Virudagiri	Append marketing and the second stronger of
ECCD Professionals	e a neg
1. Dr. Suma Balagopal	and the second of the second o
2. Dr. N. Lalitha	the size of the second of the
J. Dr. J. Andrida distribution	of the propries of the control of the control of the control of
4. Ms. Padma Srinath	
Dr. Jayam Subramaniam	the second secon
6. Dr. V. Vidya	
GOVERNMENT REPRESENTAT	IVES
1. Ms. N. Kanmani	- Directorate of Social Welfare, Tamilnadu
2. Ms. P. Mylammal	- Directorate of Social Welfare, Tamilnadu
3 Dr. Jagadeesh Ramasamy	- Department of Health
4. Dr. K. Meer Mustafa Hussain	- Department of Health
Mr. Sounderarajan	- DPEP
6. Ms. Suguna	- DPEP
7. Ms. Lakshmi	- DPEP
8. Ms. G. Chitra	- WBS – ICDS III
9. Mr. Kannan	
10. Mr. Vasudevan	the state of the s
11. Mr. R. K. Kannan	the state of the s
FACILITATING AGENCY	- UNICEF PROJECT OFFICER - Child Dev . & Edu
Ms. Anjana Mangalagiri	- UNICEE PROJECT OFFICER - Cling Dev : & Edd
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SO YOU WANT TO NETWORK?

- Dr. Rajarathnam Abel RUHSA

Both as a tool and as a process, Networking is being increasingly used through out the world. Its value in pooling together human and material resources for achieving of common objectives is being clearly recognised. However, as a concept, only now it is being defined and developed. This paper attempts to bring together such available information on networking.

DEFINING NETWORKING

Networking is a social technology, built on trust, bringing people and organisations together to either share information in common fields of interest or in achieving a common agreed task or purpose

Alternately a Network "is any group of individuals or organisations who, on a voluntary basis exchange information or undertake joint activities and who organise themselves in

such a way that their individual autonomy remains intact."

The key elements that constitute a Network 'coming together', 'sharing experiences', 'common goal and objective', free flow of information' and 'individual' autonomy'. It makes a world of difference if the word Network is used as a verb or as a noun. Network, as a verb is more important and powerful than as a noun.

It must be clear that the activities of Networking when carried out individually do not contribute to networking. For example, dissemination of information by radio, television or newspaper or coming together in a trade union or professional association, do not constitute networking.

WHY NETWORK?

Sharing information among members seems to be the primary purpose of most Networks. However, increasingly such information sharing is focussed on specific themes for lobby and advocacy. Depending on the level of its effectiveness, a Network could provide any or all of the following possible outcomes.

Provides technical and general support leading to solidarity among its members.

Provides education, knowledge, skill, new ideas, sharing experiences and exchanges.

Prompted by larger organisations to carry out its agenda and purpose.

 Provides opportunity for general co-operation and helps to expand one's resource base to take up new activities.

Provides a platform where alternate solutions and strategies are discussed and identified from which one can chooses.

Help people move out of their own disciplines or limited geographical areas.

Immediate benefits of a Network may be seen in the improved working of members. In a long-term perspective, a network may contribute to development of human resources resulting in overall competence as well as organisational or institutional capacity. Other benefits include decreased duplication of work, wider overall impact of inputs, provide critical mass needed for advocacy and address complex problems and issues. It can create an awareness among members that there are others with similar concerns and problems and provide peer support, encouragement and motivation.

However, the most important benefit of a Network is the cumulative or additive effect. This is more than the sum of the action of the individual members of the Network.

This is a qualitative effect on collective action. Further, it also contributes to a spread effect both among the members as well as among beneficiaries.

HOW THEY STARTED

A group of interested individuals were brought together for a 3-day consultation on community bases health care. At the end of the consultation, the need for a Network emerged. Based on the discussions the name 'Africa Community Action Network' in, in short, AfriCAN evolved. So an advisory board was established which met soon after and thus Afri-CAN was confirmed. Core groups were identified with coordinators, indicators were chosen

and a plan for the next three years was made.

For three years RUHSA Department of CMC&H, Vellore had promoted human resource development among NGOs in Orissa State. As the initial objectives were met and long-term relations were being discussed, the participants in a final leadership workshop felt he need for a Network. They came up with the idea of an Orissa RUHSA Resource unit. Since only a small group was present a small ad hoc committee was organised. They went back to Orissa and organised a convention where over 60 persons participated. To avoid any misunderstanding the ad hoc committee members stepped down and the entire group was given the freedom to choose a more representative team. To keep costs low, there is no formal Secretariat, it being co-ordinated by one of the members. However the Network has been decentralised by dividing the state into five zones, so that members can participate more easily. This Network identified malaria as a major problem and has carried out a wellplanned anti-malaria campaign throughout the state, providing knowledge and skills to over 600 NGO personnel in Orissa.

TN FORCES, a Network from India has members take initiative on outlining goals, priorities, concerns and possible activities. Subsequently smaller informal groups work out strategies and activities,. The Secretariat with the convenor implements the network activities like Planning, Logistics, Reporting and Communication in addition to strong support and planning. This Network is moving to a point where the Secretariat will become rotational

to keep costs low and shared.

Tamilnadu Voluntary Health Association (TNVHA) is a 26-year-old Network working in the Southern part of India. It was started by committed leaders. It has clear objectives right from the beginning and subsequently modified by the members. Ar ministrative and structural changes have been made periodically to meet member's needs. The Communication to the members are regular. It has an enthusiastic strong board and an effective staff team and CEO. However, there is some weakness in its membership. While the regularly participating members are active, they constitute only about a fifth of the membership. The rest play a very positive role, hardly taking part in the meetings.

Network of Community oriented Health Institutions has been a very effective international Network gradually bringing about changes in medical education throughout the world. Their leadership is strong and farsighted. They have been successful in steadily

developing and transferring leadership to newer and younger members.

CMAI, CHAI, VHAI in India and CHAL in Liberia are Networks that were formed in response to the needs at that time. They are more formal, well structured and to an extent institutionalised. War in Liberia appears to have badly affected the CHAL Network.

However, the above are different type of Network when compared to Networks such as Medico Friends Circle, All India Drug Action Networks, Medical Education Network. In the same category of Networks, the role and work of IBAFAN has been outstanding.

FACTORS CONTRIBUTING TO SUCCESS

The following are some of the factors that contribute to the effective functioning of a Network.

Clear goals and purpose

Most successful Networks appear to focus heavily on clearly defined or shared goals and purposes or objectives. This is considered the essential first step in starting a Network.

The key questions to be considered are:

a. Are the goals and purposes worthwhile and beneficial?

b. Is there a clear understanding of the goals and purpose among the members?

2. Leadership

As in any other venture leadership is vital to the success of any Network. Effective, committed and unbiased leadership is essential. The leadership should have a clear vision of the future backed by strategic planning; Leadership suitable for a Network are participatory and democratic styles with collective decision making.

Concern, commitment, dedication of the initial leadership to the cause of the Network is essential. Leaders will have to sustain their efforts and put in hard work in building up the Network. Transparency of action of the leaders is also another essential facet of leadership, along with a proper and unbiased management of human and material resources.

Sometimes the leadership role is at the broad level and purely honorary. Usually this can take place in the early stages of a Network. However, when a Network becomes more formal and structured then a full time and paid chief executive officer (CEO) becomes necessary. Even is such situations it is the board which ensures that the Network moves in the right direction.

The relationship between a CEO and the board is very crucial to a Network. When both are effective and enthusiastic then a Network is strong. Whenever there is an imbalance in this relationship then one might become 'strong' and it damages the commitment to working together collectively, resulting in both working in apparently different direction.

3. Regular Communication

Maintaining regular communication is another important factor. Probably keeping in personal touch is the best although it demands time and effort. Alternately newsletters and periodic meetings contribute to effective communication.

4. Funding

This appears to be another crucial aspect of a member. Most Networks seem to be heavily dependent on external sources of funds and can continue to function only as long as there is continued external funding. Few others have started generating local income through variety of services rendered. Transparency of financial procedures including stable

funding is other major positive factor.

It has been stated that a truly effective Network does not need too much funding. MFC is one good example of this. Members have pooled their resources, worked outside office times, rotated Network meetings in different member institutions, kept the newsletter simple, covering select issues etc. Too much money is a sigh of institutionalisation and tends to move away from the Networking character.

5. Size of Network

There is some concern relating to a large Network. Small Networks are preferred to a large one and are considered more effective. Large Network is considered unwieldy, that people come with expectations greater than what can be provided by a small Network. A large Network usually ends up with an organised structure and bureaucracy tending to restrict the free exchange of information witnessed in a small Network. A small Network of common interest and commitment is likely to be more successful than a large one with members pulling in different directions. As a Network becomes large it may gradually move away from a Network to a professional association which becomes very formal and governed be conventions and norms which are different. There are Networks where conscious decisions are made to keep the membership small. When Networks are large, conscious efforts must be made to keep the principles of Networking operational by creating decentralised decisions and making sub-units of the Network.

6. Availability of infrastructure

Big well-funded institutionalised Networks have large infrastructural support facilities. While it is good to have such infrastructure in the long run, they tend to be costly. If a Network secretariat could be situated in an existing organisation, it tends to keep costs low and a deceased dependence on too much external funding. Alternately it could be kept moving from one organisation to the next as TN-FORCES has started recently.

7. Nature of activities

Networking is easier among action groups involved in lobbying and advocacy. On the other hand, Networks involved in programme implementation on education, skill development, and empowerment and in social transformation find it more difficult.

8. Type of Network

Broadly Networks can be divided into formal and informal types. In a formal Network, generally, there is a structure, with a memorandum of association and elected office bearers. At one extreme this can be functional or at the other end it could be highly structured. Networks may also be either permanent or temporary. A Network which forms spontaneously is generally more sustainable than others which are induced or prompted by outsiders, most often by funding agencies. Some Networks bring people together at the geographical area of operation or based on their objectives. Depending on how effective the strengths of each type are deployed, each type contributes to effective Networking.

9. WHAT CAN RUIN A NETWORK?

On the negative side large number of inactive members in a Network can lead to inefficiency. Lack of clear understanding of the goal, limitations, strengths and functioning of the Network can also lead to failure. However, the most damaging factors of a Network are mixing up institutional or personal goals with the Network goals and domination by individuals or personality cults. However, danger signals arise when one individual or institution takes a lead and promotes its own interests above that of the Network.

- Membership disparity Disparity based on resources and use of technology can be very difficult to handle in a Network. Network members having more resources tend to overshadow the role played by those with lesser resources. However for effective Networking those who have more resources should be willing to share without expecting any reciprocal returns by way of power or rewards.
- Domination When a few members or one organisation dominates in a Network desiring to have like-minded people, jealousies and rivalries are created leading sometimes to the establishment of 'rival' Networks.
- 3. **Centralisation and Bureaucracy** When centralisation in a Network takes place bureaucracy creeps in. Decision-making gets centralised by a few. This ends up in maintaining the Network office, its mailing lists and despatch of newsletters. Inter member Networking decreases.
- 4. Misinformation in Networks Sharing experiences is a common feature in a Network. However these experiences are not peer reviewed. Sometimes such unproved or wrong information shared in a Network may be treated as correct even when they may be incorrect.
- 5. **Manipulation of resources** This is very clear. It is not always restricted to monetary resources. It could be opportunities for intellectual participation, travel and opportunities for interactions with administrative and professional bodies. When only a few privileged individuals share these resources Network suffers.
- 6. Separate realities Availability of modern facilities especially for modern communication may remove some members from the reality of a large proportion of its Network members. Organisations in a Network with such communication facilities tend to live in an entirely different plane. This may lead to some doing only globe trotting, attending from one meeting to another losing ground realities.
- 7. **Donor interference** It was observed earlier that donor promoted Network is less sustainable. So also when a doctor interferes in the functioning of a Network more than what is absolutely necessary, it can ruin a Network.
- 8. **Political interference** Not all countries have the same level of personal freedom. Some need government's clearance for forming the Network and for holding meetings and sometimes even for participation by individual members.
- 9. Monitoring and Evaluation Most Networks emphasise future progress and are not interested in measuring past experiences. Such Networks do not consider evaluation as important and therefore are not able to make necessary corrections and changes. As in any programme, monitoring and evaluation are important.

SUSTAINABILITY

All Networks need not be sustainable; if it were a temporary Network, started with a limited purpose then such Networks may be discontinued when the purpose is achieved. However, others with long term goals will need to take steps to ensure sustainability. Money and external support while useful and necessary are not by themselves sufficient to ensure sustainability. Ultimately it is the sustained interest, commitment and hard work of the members along with sense of achievement clearly defined objectives that contribute to the streamlining the objectives to a level that current funding available can match activities especially by cutting down on essential activities.

Sustainability also requires constant and regular dissemination of information to members. Exchange visits among members and sharing of human resources strengthens the Network. If Network members can work together in a wider geographical area of operation,

it becomes another strengthening exercise.

The strengths of a Network are based on the amount contributed by the member as membership fees. It may be collected as regular, lifetime, patron etc. However, most Networks will definitely benefit from external funding support from partners' agencies. Increasingly Networks are depending on sale of material produced and charging service fees for training, consultancy, evaluation, publication etc. At times for short periods or even permanently the co-ordinating secretariat may be situated in one of the members institution which can cover overheads, however, taking steps to ensure that such an institution does not exert too much control on the Network.

One model suggested for sustainability is to keep the actual Network small and functional with hardly any infrastructure. Based on agreement in the Network, individual members are assigned specific tasks, which are organised and funded by a selected member

on behalf of the Network, all such costs outside the Network.

Networking is here to stay. Sustainability was not an issue when many Networks started. It is likely that strategies for sustainability will increasingly put pressure on Networks and force them to constantly and critically review and modify their goals, functions, structure and membership and take creative, courageous and concerned action resulting in increased effectiveness and efficiency.

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THE EMERGENCE OF A NETWORK ON INFORMATION FOR PARENTING (NIP)

- Tara Srinivas

The need for a NETWORK on Parenting emerged at a meeting on 2nd March 1999, during a peer group review of a New Parent Education Tool – (Birth to 3 years) – a FLIPCHART in Tamil, which came out as a result of indigenisation of the Hincks Dellcrest, (Toronto, Canada) "Learning through Play" Calendar. This work undertaken by Bala Mandir Research Foundation had been sponsored by UNICEF and the tool was for dissemination of *Parenting Messages* for larger audiences in Tamil Nadu. The participants at this meeting (NGOs, ECCD professionals, Education & Research Institutions & Govt. Dept of Social Welfare and Education) and the subsequent ones facilitated by UNICEF discussed at lengthy questions and issues of *Parenting* in the current Indian socio-economic scenario and *these concerns* formed the background and rationale for the need for a network which would focus on ECC - SGD through *Parenting* in Tamil Nadu initially.

BACKGROUND AND RATIONALE FOR NIP

The over-arching question posed was **Why focus on Parenting?** - which is believed to be a natural process for all human beings, especially for women-folk, and all of us having experienced childhood would have no problem rearing children through another childhood. This group rejected this argument, and clearly identified that the task and skill of *Parenting* today in times of socio-economic – cultural change is more complex and different from its past moorings and concerns. Old values and traditional practices so straightforward once, have drastically changed, and as a society we either follow them blindly or reject them altogether. Further the deteriorating quality of *Parental Care* has reached such a point that most parents feel that the entire responsibility of child rearing which traditionally belonged to the family and parents, seems to be swept clean underfoot by so called stress of materialism.

Family and community life structures are changing rapidly, into new arrangements, both in the rural and urban areas and the *Parenting* ROLE needs now to be defined and in many cases, with the *parenting* role being delegated, it needs to be clarified.

There was thus a felt need for a competent body to address aspects of care and development and rights of children below 6 years, with **special focus** on children **below 3 yrs.**

Particularly because

1. There are very few Institutions and programmes that focus on children below 3 yrs

2. The significance of the **dimension of Parenting in ECCD** has not had the emphasis it needs and a **new initiative** to address it in an organised way was needed.

3. A need to converge, consolidate and strengthen existing efforts and expertise in ECCD,

to promote the best interests of the child, exists.

4. There was also a need to **create a platform** to facilitate exchange of ideas and experiences, discussions and debate on issues regarding child development.

THE NETWORK TODAY

The Network is a loosely federated democratic body with a membership which has built itself around the first group of discussants of the March 1999, UNICEF Workshop.

The spirit of the Network is to enhance work being done by individuals and organisations, and while consolidating their own strengths, at the same time provide a platform for sharing information with each other. This dynamics of exchange and consolidation includes working actively with and supporting GOVT programmes with quality inputs and expertise on Parenting issues in ECCD. This is an attempt by the Network to converge resources and vast experience within this sector to give a thrust to the developmental needs and rights of the young child.

The NETWORK today brings together all the participating institutions/members as well as the concerned stakeholders on the issue of Good Parenting Practices and clearly addresses Parents and those in a Parenting Role and seeks to connect through the Network and its mandate the following persons:-

- 1. Parents as primary stakeholders
 - base light a whole a 2. NGOS involved with ECCD and Community Development
- 3. Professionals concerned with ECCD
- 4. Education & Research Institutions
- 5. Government Depts
- 6. Corporate houses and Facilitating Agencies
- 7. Concerned agencies & CAREGIVERS
 - 8. Lateral linkage with task force groups set up by government.

WHAT IS THE NETWORK'S MANDATE AND COMMITTMENT

The Network's basic mandate is to work in the area of EARLY CHILDHOOD INTERVENTION.

- to Increase knowledge based on holistic child development
- to Define the Parenting Role
- to Identify gaps in Parenting concerns & structures
- to Disseminate awareness of positive and negative parenting and to support efforts of the
- to Promote good parenting practices
- to Propagate gender equality
- to Emphasise family setting as the first learning site in psycho-social development
- to Recognise the responsibility of community and other care-givers
- to Encourage Good Traditional Child rearing Practices
- to Encourage Scientific Temper
- to Advocate Child Rights
- to Lobby for Policy issues on ECCD.

THE PROCESSES OF THE NETWORK

 to serve as catalyst to increase awareness, develop material and identify strategies on issues affecting children

• to build bridges and foster networking, working across sectoral divisions putting

people in touch and serving as a Communication point.-

 to serve as sounding board and dialogue with funders and decision makers for policy formulation programming and implementation.

to propagate and support efforts for

- strengthening capacities and coping abilities of child rearing by parents and communities,
- creating a positive nurturing environment for all children and especially from those of deprived and unreached communities.

culture specific, developmentally appropriate child rearing practices.

♦ to focus co stages of Parenting — Critical Minimum Components of Parenting

Parental Readiness – for adolescent years.

Planning for Parenthood – positive emotionality, family responsibility, celebrating pregnancy.

Preparing for Safe Motherhood – Health and Hygiene issues.

Welcoming the baby –accepting the child totally including gender, colour, disability.

 Nurturing the infant – Mother and Child care and nutrition, role of father and family members

- Early childhood care – Infant, toddler, child and children with special needs.

STRUCTURE AND STATUS OF ACTIVITIES OF NIP

The NIP as a parent body of networking institutions consists of sub –groups - co-ordinated by a Secretariat - advised by a Core Group whose activities focus on the various issues and current concerns of Parenting on ECC -SGD.

The initial Sub-groups formed

- a. Communication & Networking
- b. Research and Documentation
- c. Early Intervention in ECCD/Parenting
- d. Training.

What are the activities of NIP?

- Parenting Information
- Parenting Programmes.
- Bringing together existing ECCD strengths
- Creating platform for sharing.
- Pooling of information and resources.
- Facilitating exchange of ideas and experiences.
- Developing and disseminating messages.
- Developing linkages

The list of activities undertaken by NIP within the time-frame of March/June 99 - Mar 2001

Broad basing and sourcing other like minded organisations and individuals and

identifying the strengths existing in Tamil Nadu.

identification of priorities for the Sub-groups/Activities which include broadly documentation collating and compiling information and identifying messages and programmes with special emphasis on the psycho social relationship of the parent and the child - below 6 years

Intervention into Kindergarten Teacher Training Programmes at different Socio-

economic levels with Parenting messages.

Finalising the UNICEF sponsored Parent Education Flipchart, which is also a tool inclusive for parents handling children with disability.

Expansion of Networking activities into Kerala State.

Conducting Workshops for various target groups based on the CMC & their parenting role with reference to which they have contributed themselves into the main areas of Parenting

Participation in the DD Phone-in Programme in Child Development in Podhigai

Channel on Mondays

Active participation at Conferences and Workshops at State Government & National Level of Parenting

FUTURE PERSPECTIVES AND STRATEGIES OF NIP

Broad basing communication of messages on parenting to include the Mass Media, Child care institutions, Educational Training institutions, universities and research faculties.

Expansion of Networking Activities within Tamilnadu

Expansion of Networking Activities in Karnataka & Andhra Pradesh and developing linkages in other parts of India

Bringing toge her existing ECCD strengths and creating a platform for sharing on

Parenting issues

Facilitating exchange of ideas and experiences through Workshops and Seminars.

- To bring out a booklet, posters, handouts and Information kits on the identified critical minimum components of parenting messages for various segments stakeholders -
 - Parents and Family

Medical Personnel

Child Care Agencies /Institutions.

ECCD Training Institutions

Advertising agencies and Media

Critical Minimum Components

Under each 'Stage of Parenting', NIP identified, some topics on which information should be given in order to enhance 'Parenting Capabilities'.

I. Parental Readiness:

- a. Age of mother and father (age of first pregnancy)
- b. Spacing of children
- c. Health of mother and father.
- d. Psycho-emotional status of adolescent/adult-male/female.
- e. Rubella immunisation.
- f. Protection from both physical and emotional, abuse and violence.
- g. Educational status and Government programmes.
- h. Family Life Education-Sex education/information/counselling/interaction with parents.
- i. Hygiene
- j. Peer interaction emphasise healthy social interaction.

II. Planning for Parenthood:

- a. Health status of the couple
- b. Prevention/Protection/Avoid Exposure to infectious diseases.
- c. Nutritional status
- d. Positive emotionality/Positive attitude/stress reduction
- e. Protection from trauma, Management of trauma.
- f. Health Care during pregnancy. Ante Natal & Post natal Care
- g. Personal and household hygiene
- h. Gender acceptance of the baby.
- i. Shared workload Role of the Father & other members of the Family

III. Preparing for safe motherhood

- a. Celebrating pregnancy
- b. Preparing for emergencies
- c. Organising support systems for the birth events.
- d. Organising safe and hygienic delivery.

Welcoming the baby (the first 40 days) IV.

Ensure that there is no Trauma of Rejection based on gender, colour, impairment - and assure acceptance.

Essential care of new born. b.

- Promoting breast feeding/colostrum-Counselling for feeding children in special circumstances.
- Maternal rest, nutrition, physical and emotional support, counselling for children in their special circumstances.

Use of clean water.

Ensuring participatory role of father. f.

- Protection against exposure to infectious diseases, screening for high risk factor.
- Physical, mental and sensory stimulation for high risk babies.

Sanctity of the first 40 days.

- Joyful stimulation during feeding, Encouraging communication
- Carrying the baby and significance of touch, emotional bonding.

Ensuring immunisation.

Precious first year ٧.

- Continuing breast -feeding, introduction of complementary foods.
- b. Immunisation.

c. Hygiene.

- d. Nutrition, Monitoring growth-weight.
- e. Protect against physical and mental abuse.

f. Emotional bonding.

g. Child-led play and parental interaction.

h. Activities for the first year.

Active toddler VI.

- a. Identification of developmental stages.
- b. Identification of domains of developmental domains.

c. Stimulation activities.

d. Parental interaction-relationship, communication-language development.

e. Linkages and holistic approach to development.

f. Respect uniqueness of the child.

g. Emphasise child's rights in the home/outside-

TRAUMA OF REJECTION

Saulina Arnold – TNVHA

Human beings are social beings and needing social recognition, acceptance and support for their development. They are not isolated and so social acceptance is as basic a need as food and shelter. It is a natural expectation that family accepts all its offspring in whatever state they are - boy, girl, able or disabled, retarded, dark or fair. But the evolution or progression of human civilisation has brought different values and ratings on children (babies), influencing even the natural parents to accept or reject their own offspring. This is the curse of the modern age. These have put a value on the child and in the mind of the parents. The value is not human life, but the condition of the child boy or girl, white or black, able or disabled, planned or not planned.

If the child is born not out of wedlock the fate or acceptance of the child is even worse. The industrial and economic development also has not enhanced the status of the girl. She is burdened with "dowry"- thus devaluing her. Parents are also becoming more conscious of their status if a child is born disabled or mentally retarded. knowing the cause for this they feel people (community) will fault them and often ignore these children, neglect them and treat them as unwanted in a comer of their house.

While we could find reasons for why parents and community do not want to accept/acknowledge these children, we must also know how rejection makes children feel about the treatment they get. What happens to them - the self-image, self esteem

in the long run, even to the life they lead?

Developmental psychology and transactional analysis point out that the first two years of life is the foundation for the rest of the child's life. The trust in the world, in people and in their self is experienced and internalised. The positive outlook I am OK. You are OK and so the world is OK is to be experienced in this period. But if for some reason this is not so - if the first two years, even from the time of foetal stage the child experiences rejection the life of the child is built on quick sand or clay - no firm foundation is there. Insecurity, Mistrust and low self Image develops

Culturally this is named according to physical appearance—an unwanted girl is named "Venda pen" – not wanted, a dark boy is called blackee – karuppaiyya or short child is called shortee – kulla. The nomendature in the description is derogatory and each time the child is called by that name it reinforces the low status, making the child feel inferior.

In the same way the parents and others can show their rejection in many ways

not attending to the child when it cries - "let the girl cry it is going to learn it"

not giving milk when needed - do not pamper the girl/boy - he will, be spoilt (but the attitude of rejection will be felt by the child.)

Difference in treatment of sibling - more attention to the first born, or child, which is beautiful, fair can create havoc in the feelings of the child.

Gender discrimination in the homes, educational institutions, etc

Often parents subtly make comments or talk to others (ignoring the child) about the child- this hurts and affects the growth of the child.

Comparison because of physical appearances

AGE

EXPERIENCE

Period: Prenatal to birth (up to Adulthood)

The rejection of the child starts from the time even before conception and affects the child throughout life.

- 1. Before Conception If parents aren't prepared for the birth of the child and are not joyfully looking forward to it. For example if it is a pre marital conception (out of wedlock) leading to abandoning the infant at birth or an unexpected Pre mancy could be first baby or next. This adversely effects the psychosocial development of the child.
- 2. During Pregnancy The feelings of the mother greatly effect the child. The attitude of the family and in particular the husband (the father of the child) greatly effects the emotionality of the mother which in turn can have a negative impact on the child and therefore importance of care of the mother during pregnancy can never be undermined. Rejection expresses itself in any one of the following ways

Preference for a Son (boy child) by in-laws often the couple themselves

2nd or 3rd pregnancy after having had girls

 Mother's own fear negative feelings affect her eating and health and thus retards the baby's growth.

Attempts or abortion, which misfire affects the child.

3. At Birth - The following situations can create a traumatic effect on the attitude and behaviour of the mother and often the rejection, if focussed on the mother for no fault of hers in turn makes her reject the infant, and she is unable to show love and affection and often even breastfeed the child.

The pain at delivery could be added mental rejection of unwanted child

News of birth of unwanted girl child

Deformity/Disability of the child

Disfiguration during delivery including birth mark

Unfortunate occurrence in the family at the time of birth is blamed on the child If the child undergoes trauma at this stage it will be insecure and mistrustful of parents, family and the world

After birth in the early formative years upto two the child requires acceptance, ready response of voice tone, sense of security, parents readiness to weicome, breast milk fed upto 1 year parental involvement in all its developmental activities and abundant amount of love by family and community for the birth. Psychologists opine that if the mother rejects the baby not only can her milk can go sour, but the amount will reduce drastically. The child thus rejected develops as an adult with fewer skills, is confused, has low self esteem, feels inferior, is aggressive, hates himself/herself and the world.

2-4 years Freedom As the child grows up and is able to walk and talk, the child needs to be given encouragement to use its body - to walk and play then it will get confidence in its own body and self esteem will grow.

But if the child is kept in a room, tied or not allowed to go out or when going out is carried and restrained from walking, the child will be unsure of using its legs and walking without fear. Slowly it fears the outside world and meeting people. The personality will be timid and dependent. If the rejection is also shown by the parents, the parent child relationship will be marred. This will affect the future relationship of the child with adults.

4-7 years — initiation to learning. This is the age when the child is to be sent to preschool or school. The preparedness of the child to leave home and the family and meet new situations depends upon the parents. The rejected child may not be well prepared by parents and just left for the school to take over thus affecting the life of the child in school. In the same way, the child also observes the parents, their relationship with each and with itself. If the parents have a positive relationship and also treat the child well the child has good opinion/experience about husband —wife, male — female relationship. The parent of opposite sex (for boy — mother, for girl — father) has an important role in this. If this relationship is affected in future the child develops a negative attitude towards that parent and sex life and future relationship are marred.

7-11 years- industrious

This is an age when the child has to be in school and get involved in many activities and learn many skills – communication, writing, playing, co-ordinating with others etc. The child needs attention, support, and encouragement. This will help the child to develop self-esteem and be able to work better.

But if the child is criticised made fun of, not allow participating in different activities, the growth will be stunted. Especially in rural areas girl children are stopped from school at this age for various socio-economic reasons and that affects the self-esteem of the girl. An already rejected girl, with no education after 10 years will make her feel further inferior. The same with the rejected boy child, who therefore enters into adolescence with a feeling of inferiority.

12-18 years - Adolescent

In this Period the young person needs to know who he or she is and identify the following, whether

- accepted or not
- respected or not
- loved or not
- needed or not

For this, their understanding of their relationship with parents, friends and family is important and if they are unable to have this knowledge, they will feel rejected.

Rejection results in

- Isolation, running away from home, psycho social problem, Suicide, drug addiction seeking help from anti-social elements.
- Confused out look on life and self.



PARENTING – CRC/CONSTITUTION OF INDIA/NATIONAL POLICIES Aloka Guha – Spastic Society of Tamilnadu

	ISSUES/ CONCERNS	RIGHTS AS PER CRO
1.	Non Discrimination	Article 2
2.	Best Interest	Article 3
3.	Parental Guidance	Article 5
4.	Right to Life, Survival and Development	Article 6
5.	Right to Information	Article 17
6.	Parental Responsibilities	Artic'e 18
7.	Protection from Abuse	Article 19
8.	Protection of Children without families	Article 20
9.	Adoption	Article 21
10.	Handicapped Children	Article 23
11.	Health	Article 24
12.	Standard of Living	Article 27
13.	Education	Article 25

RIGHTS

GUARANTEED BY

1.	Non Discrimination, Equality & Protection against Protection	Article 14 – Constitution of India Article 15 [3] Article 2 – Conventions of the Rights of the Child
2.	Best Interests of the Child	Article 3 – Conventions of Rights of the children
3.	Preventive Measures	National Policy on Management of Vitamin A Deficiency Persons with Disabilities Act National Health Policy
4.	Survival Care Protection & Development	National Policy on Children Article – CRC
5.	Health	Article 24 – CRC Health for All National Health Policy
6.	Information Early Detection	Article 17 – CRC Chapter IV – Persons with Disabilities Act
7.	Affirmative Action	State Policies Persons with Disabilities Act National Policy on Children
8.	Education	National Policy on Children Persons with Disabilities Act National Policy on Health Education for All
9.	Impairment & Assistive Technology	National Policy on Education National Policy for Children Persons with Disabilities Act Article 23 – CRC

Reaching out to Parents and primary Caregivers on ECCD for Children below Three Years

- Anjana Mangalagiri

The Rationale

Traditionally, celebration of fertility, motherhood and childbirth has been an integral part of Indian ethos and culture. Before the nuclearisation process of families set in, child rearing, nurturing and caring was a part of an extended family set-up. Knowledge on the child's needs for growth and development were part of a repository of inherited practices transmitted through an oral culture within this extended family system marked by rituals that announced major growth stages in the development of the child. The volte-face however, of childhood in India is a culturally determined attitude to child development wherein every stage of the 'present' of the child is considered 'nothing more than a stepping stone to the future. The focus is not on suitable, age-specific activities for children but on activities that will have an effect in the future... Playfulness and lightheartedness are, in this perspective, the excess baggage of childhood'.

Added to this are the prevailing economic and social inequities due to which no guarantee is offered to parents of the wellbeing of their child when born and gender discrimination takes its own toll on the girl child unborn or born. Increasingly pauperisation and marginalisation of communities, the accompanying instabilities in family and household structures, increased burdens of women's work as a result of their participation in the labour market along with growth in domestic violence etc. – all of which have a direct bearing on the development pattern of the young child – have accorded more than ever, the need for prioritising early childhood care and development.

Early childhood care and development aims at giving a child the best possible preconditions for developing a maximum of its potential as a human being, and is therefore about integrating health, nutrition and cognitive stimuli. It is in fact a powerful weapon in the struggle for child survival. Cognitive impairments and disabilities caused by malnutrition, neglect and disease may kill more slowly. Infant and child survival is crucial to provide not only life, but also life quality, and sustainable survival. Significant results are achieved on child mortality, child morbidity, school readiness, school achievement and nutritional state through the adoption of basic child care practices at home and in child care centres. Neglecting the ante-natal care and of children in their first years does not only decrease the likelihood for healthy child development and reduced life opportunities for the individual, but also lead to economic and social penalties for the society as a whole.

^{1.} S. Anandhalakshmy, "The Cultural Context", In The First Five Years by Mina Swaminathan (ed.), Sage, 1998

Research shows better child development scores for children who have received out of home care, and for children of parents who have received parental guidance compared to those who have not. While poverty, domestic problems, migration and disease may reduce parents ability and knowledge that would have enabled them to apply healthy child rearing practices, many practices traditional of contemporary, are far from healthy regardless many times even of social status of parents. The present day belief amongst parents that formal learning must begin at the earliest possible and hence the mushrooming of pre-schools for children above two years that put children through a grind of reading, writing and rote learning is a classic example of distorted perceptions of child development amongst parents.

As the importance of early childhood to overall human capacity development is being realised globally, the need for giving child development a central place in human development programming is becoming a part of the global agenda. The ratification of the convention on Child Rights, the Declaration of the World Conference of Education for All and the Convention on the Elimination of the Discrimination against Women have also been catalysts in the process. As we stand on the threshold of the 21st century, reaching all children and women especially from the most difficult to reach groups is the major challenge.

India's Ninth Plan places young children first on the agenda of development and calls for the Convention on the Rights of the Child to be framework for further strengthening existing policies and programmes for children. Noteworthy is that it recommends a shift in emphasis from promoting child survival and growth to child development and protection: 'Child development not only as a desirable societal investment for the nation's future, but also as the right of every child to achieve full potential, where combating mortality and morbidity is not enough'. It proposes a holistic approach to early childhood care for survival, growth and development, highlighting the need to focus on the younger child (prenatal to under two years of age) and the girl child.

Currently, ECD interventions do not reach the entire estimated young population of 160 million (under 6 years of age) in India. This includes children who, while belonging to better socio-economic categories, may also undergo deprivation amidst plenty (i.e. lack of appropriate early stimulation and care). Reaching out to the younger children under three years – the most crucial and vulnerable years of childhood – is a major challenge. This implies reaching out to women/expectant and nursing mothers/alternate caregivers in the family and community for propagating appropriate child rearing practices. This paper proposes a strategy to work towards meeting this goal.

Calls upon all state parties to fulfil their duties and obligations in achieving the rights of children for survival, development, Protection and Participation.

^{3.} Article 5 of The Declaration of the WCEFA states, 'Learning begins at birth. This calls for early childhood care and initial education. These can be provided through arrangements involving families, communities or institutional programmes, as appropriate.

^{4.} CEDAW sets out rights pertaining to care for women during pregnancy and lactation, attention to reproductive health to work and workloads and remuneration. It recognises the common responsibility of women and then in the upbringing and development of their children.

While parents and families form the centre – stage for information on parenting, the responsibility of child care providers in institutional and non-institutional settings cannot be overlooked. This strategy paper, while highlighting the critical minimum components of parenting and child development interventions for children below three years (i.e. including the pre-natal period), seeks also forge new partnerships that would bring together different sectors and partners at all levels – parents, families, communities, child care functionaries and service providers of all sectors, elected people's representatives, local self governments, NGOs, professional bodies, media, training/resource institutions and policy makers. In keeping with the spirit of the ninth plan, advocacy forms a strong element of the strategy. The objective is to ensure that obligations towards the young children are on the agenda of the state parties in designing suitable and effective interventions through multi-sectoral approaches involving the communities and at the same time promoting community initiatives or participation related to parenting practices for child development.

The Objective

The objective of this strategy, as pronounced in the vision of young children in India in the 21st century, are to reach out to parents, families, care-providers of the children, voluntary and government bodies to:

> Be family focussed enabling families to care for children

Focus on crucial and vulnerable age group – pre-natal to under three years

Promote an enabling environment for young children for physical, cognitive, language, social and emotional development of the child.

> Be gender sensitive to ensure realisation of the rights of the girls and women

Respect cultural diversities for encouraging locally based and relevant child rearing practices

Promote a child centred approach driven by 'the best interests of the child'

Be community based in managing and sustaining ECD interventions

Have a rights perspective through new partnerships of parents, communities, civil societies and governments to meet their obligations to children

Have ECCD as an entry point for India's human development strategies

5. Adarsh Sharma, 'Opportunities, Challenges and Vision', In Mina Swaminathan, op.cit.

^{5.} Early child development: A vision for Young children in India in 21st century, Meeting of Key Partners, comprising the departments of Women and Child Development and Education – MHRD, NIPCCD, NCERT, ICCW, BPNI, World Bank, UNESCO, WFP, CARE and UNICEF, held on June 10th 1999 at New Delhi.

PARENTING

- Maya Gaitonde, Bala Mandir

Need for Parenting in the contemporary scenario:

Why focus on 'Parenting? After all, each one of us was a child once and from our experience must know what we do not want to do.

- However the job of parenting today is more complicated than it was in the past. Most do
 not live in extended families and so provide very scant opportunity for parents, grand
 parents, aunts, uncles or older generation to give advice and/or emotional support.
- Old Values & traditional practices so straightforward once, have drastically changed.
 We don't understand them and either blindly follow or altogether reject them.
- Eco. & Soc. conditions encourage/force mothers to have jobs outside the home. This greater economic burden being placed on women is deflecting/diluting her role as "mother" and Primary care giver to the child.
- The pace & pressure of life in urban cities is faster & stronger than before.
- Conflicting influences are entering our life through mass media.
- Rural scenario is changing poverty and alienation from the land are breaking down, old traditional practices of family life.

Today, not only do you have to play the role of a parent, you have to define it. Learning to be a parent - means to look ahead and anticipate the baby / toddler/child's needs. Learning to balance various issues like less time and more work pressure, entertainment & handling adult marital relationships, academic demands from schools versus real life education seem to leave the parent with less time to attend to the child's needs.

The Deteriorating Quality of Parental Care has reached such a point that most parents feel that the entire responsibility of child rearing which traditionally belonged to the Family and parents, seems to be swept clean underfoot by so called stress of materialism.

Breaking down of Human relationships all over the world and in essence family life is causing concern to Sociologists, Psychologists and Spiritualists. Without a sense of bonding, social confidence is deteriorating and mutual sensitivity is absent. While there is overwhelming need to provide basic rights to the child like health and education, without focussing on strengthening the quality of life through "family", child development is a far-fetched goal.

Scriptural Dictums:

Initiative on family life and parenting must focus by and large, on duties and responsibility of the parents to the child, they bring into this world, to provide for it a quality of life based on their own emotional and social interaction with the child. In our Indian Spiritual tradition the enrichment process of the mind of the child grows in the following order.

Attitude:

Matru	 Mother as Primary care giver 	 Devo Bhava
Pitru	- Father as Supporter	 Devo Bhava
Acharya	- Teacher as Enhancer	 Devo Bhava
Athithi	 Outsider as influencer 	- Devo Bhava

Therefore, surely it must convey something vital in the adult - child - relationship. The mother/father/Teacher/Others are all given the status of Devah - Gods and must therefore be ready to play that role- which means that the child can give –

- D- Devotion to Dutiful Parent.
- E- Emulate an Ethical Parent
- V- Venerate a virtuous Parent
- O- Obedient to an Honourable Parent

Relationship:

Sending children to School before 5 years of age has not been a cultural tradition in our country. This practice has come into existence only in the past few decades. Our Scriptures recommend the following relationship between adult and child.

Pancha Varshadi	Lalawath	(loving care)
Pancha-dashavarshadhi	Thatawath	(discipline)
Pancha-dashavarshadhi	Mithrawath	(as a friend)
Parivantham		

Our ancients had a great deal of wisdom and we know from our understanding of the scriptures that their understanding of psycho-social development of the human being was for beyond even the present day scientific research.

The above vedic dictum puts clearly into focus the ideal parenting response to the age appropriate child's needs in their relationship, and that which is most conducive to build up a strong bonding and sustain happiness in family life.

Gender:

Says the Svatasvatara Upanishad – The individual soul is as subtle as a **hairpoint** divided and sub-divided hundreds of times. Yet the soul is potentially infinite and is to be known.

The soul is not female, not male, not neuter. Whatever body the soul assumes becomes identified with that.

Scriptural Teachings:

In the ancient Indian Scripture the – Chandogya **Upanishad** there is a statement Even as a **seed** has within it the **potential** to grow into a **Tree**So also "**Man is potentially Divine"** = **Excellence**.
Does every child reach its potential? **If not, Why not?**

It is here that one's role as a parent/teacher becomes of vital importance. For a seed to grow and develop and reach its natural potential, the proper inputs and the proper environment must be provided. Especially in the early tender years when the infant as a tiny seed grows into a child - young plant needs caring/fencing, to ensure its growth and development.

Our role as parents/teachers in providing the proper environment is beautifully explained in the **Bible** through the **parable of the seeds**.

Said Jesus "If you were to take a bag of seeds and scatter the seeds thus

a. Throw some upon hard rock.

b. Throw some among the bushes.

c. Throw some upon the open roads where the birds fly.

d. Throw some upon molst ground.

Which seeds would grow into golden com?"

The answer in front of all of us, as must have been to His disciples is obvious.

It is only in the **moist ground (loving/encouraging/happy environment)** that the seeds will not only sprout, but grow into golden sheaves of corn.

Upon hard rock (harsh/demanding/critical etc.) the seeds will not get any opportunity to grow.

Upon the **open road** where the birds fly and swoop down to eat them up **(used/put down)** they will be of use to others but not to themselves.

Among the bushes, the seeds which sprout will grow only in a stunted manner - the (over protection/lack of freedom) will emasculate them.

Our endeavour in these tender years is only to provide the loving, caring and stimulating atmosphere for the child. As an extension of the home. Teachers have therefore a similar role to play as parents at this stage in the child's life.

How we interact with children will have an important effect on the connections that develop in the child's brain. The brain is responsive and in the absence of experiences and stimulus does not develop fully

Our task as care-givers is to provide an environment, which allows experimentation and provides limits without choking opportunities, Guldance discipline and safety for our children to explore and build their competencies.



The problems of children

and in the cold morthly proposed and an

Are today created by all of us.
THE PROBLEM IS 'AN ADULT' NEVER THE CHILD ITSELF.

In the short term many schemes of alleviating the condition of children enhancing and enriching the physical quality of their life can be suggested and worked out - BUT in the long run what will truly help the child is only

- . Educating the adult about the needs and problems of the child.
- Sensitising them to their responsibility towards children.
- strengthening the fabric of family life.

 Let us understand that
- Behind ill-health of the child is Ignorance, apathy or Indifference of the Adult-Mother Father, Care-giver, Doctor.
- Behind poor education of the child is lethargy, Non-commitment of the Adultteacher, educational Authority.
- Behind child labour is an insensitive exploitative Adult and the poverty situation of the parents.
- Behind child exploitation battering sexual abuse drugs, alcoholism etc. there is an adult perpetuating it on the child.
- Behind desertion and deprivation of the child is an irresponsible parent. In whichever direction of children's problems one turns There is an adult.

The word "child" itself raises in our mind ideas of freshness, innocence, hope - Children like little sponges have the tremendous capacity to absorb the entire gamut of their environment and the values that they grow up with. And as they grow into adults they express what they have sponged in negative or positive.

Children exist in large numbers in our country.

Some say this over-population is a burden.

We must realise it is a reality and that we will have to convert this vast human resource into a strength.

If the process does not start now - we will have on hand, large numbers of children growing up as frustrated youth, lacking vitality and strength of purpose, with untapped potential, expressing aggressiveness in every sphere of their life and action, steeped in uncertainty doubt, hesitation, restlessness.

CHILDREN-their childhood

Children are more than the object of their parent's attention and love,

They are also a biological and social necessity.

The human species perpetuates itself through children.

Cultural, religious and national groups transmit their values and traditions through children.

Families maintain their lineage through children and

Individuals pass on their genetic and social heritage through children.

The ultimate value of children is the continuity of humanity.

Early childhood is the foundation on which children build their lives. It is not just a preparation for adolescence and adulthood. **It is important** in **itself**. Children develop at different rates and in different ways emotionally, intellectually, morally, socially, physically and spiritually. All are important and each is interwoven with others.

All children have abilities which can (and should) be identified and promoted.

What children can do (rather than what they cannot do) is the starting point of their learning.

Young children learn from everything that happens to them and around them; they do not separate their learning into different subjects or disciplines for children, their experience is their learning.

Play and conversation are the main ways by which young children learn about themselves, other people and the world around them.

Children who are encouraged to think for themselves are more likely to act independently. The relationships which children make with other children and with adults are of central importance in their development.

BONDING WITH PARENTS

Right from day one, a bond is being formed between parent and child.

Every contact/or loss of contact leaves an unbelievably deep impact on the relationship.

Few parents seem to know or appreciate just how important they are in the lives of children. How much more a child wants from them emotionally and spiritually rather than the materialism - which the parents are so busy supplying in increasing

abundance.
The parents must realise

- They are the go between for their baby/toddler/child and his environment.
- They are providers of stimulation to catch his interest;

of responses to his attempts to communicate; and of physical care, so that his skill of attention and concentration develops.

• They are protectors—who keep him safe and limit his environment so he can feel in control of himself.

 They help him achieve what he sets out to do. In all, they are his, first significant persons. It's from them he learns to trust, to get comfort, to communicate and to respond to the world around him.

Children have 3 vital needs.

1. Love/Care

- Loving and caring relationships can relieve even the most extreme levels of stress

(or) Relationship

- without it, the child's growth cannot be stimulated both physically and mentally

- a stable relationship gives emotional security.

2. Self-esteem

They must learn to trust themselves and develop a feeling (or)

of competence and a desire to try.

Sense of Self

- Learn to accept their failures and shortcomings and yet

have an expectation of success.

Communication - Children communicate well before they talk.

 We need to listen and watch and demonstrate our interest in their words and messages.

Encourage language development and expression

Children need to talk- therefore, we need to give them the

- Children learn to speak by listening to people around.

PARENTING PROGRAMMES

Family structures all over the world continues to change in response to industrialisation, urbanisation, population growth, increasing longevity, and migration. While these changes have created new opportunities, they have also disrupted familiar cultural practices and survival patterns that families have developed over the years to cope with their multiple responsibilities. One aspect of life affected by these trends is the inability of the family to provide optimal child rearing environments in the context of widespread changes in the social fabric of families, neighbourhoods, and communities.

Adding to this concern is increased recognition of families' major influence on young children's social, emotional and cognitive development.

As a consequence of these changes, among all those concerned with the development of

As a consequence of these changes, among all those concerned with the development of children and families, there is an increased demand for high quality, community-based childcare services, as a complimentary rather than alternate strategy to the direct provision of high quality child care programmes.

Educators have long acknowledged the significant influence of the family on the care and development of the child and the tremendous cultural and familial differences in parent-child patterns of into action. A major new objective for professional educators would be that they involve themselves in training parents and future parents in family care and child development skills.

Recognition of the family as the child's primary socialising agent has been accompanied by periodic calls for monitoring parental performance and for recommendations for providing parents with child rearing information and guidance.

ANY PARENTING PROGRAMME MUST THEREFORE UNDERSTAND THAT

1. All parents want the best for their children.

2. Parents are in a position to be the best observer of their children and, consequently, are best able to provide for the physical and psychological needs of their children.

3. Children need to be exposed to certain environmental experiences/interactions for optimal development to take place and an understanding of the principles of child development will help parents to provide these experiences, find methods to enhance learning if they know how to and why they are important.

4. There is no one way to rear children, each culture has developed their own methods of parenting. We can enrich our knowledge and expand the life experiences of children by

combining the strengths of differing cultures.

5. Childrearing practices are embedded in the culture and grounded in cultural patterns and believes and determine/effect style and quality of caregiving and to a large extent, the behaviours and expectations surroundings a child's birth and infancy. influence childhood, adolescence and the way these children parent as adults.

6. The importance of community involvement is vital in all steps of the process building on what exists already within a community and creating partnerships to help sustain efforts.

PARENT EDUCATION IS A WOMAN'S EMPOWERMENT PROGRAMME

Mother is the vital baton in passing on the link of family dignity and culture from one generation to the next.

Educating the parents in their irreplaceable role as "mother" and "father" and educating the rest of the family to recognise, appreciate and support them in that role - has become a

crying need. All issues of women's upliftment, be they in the direction of social freedom, economic opportunity, political awareness and/or spiritual awakening, at this point in civilisation, need to stress her non-duplicable, non-transferable role as Mother.

Women's issues that focus on the inferior/oppressed role in society that the women have

today must include motherhood education and counselling initiatives.

Society and family must -

Appreciate her significant role in the continuance and enhancement of family life and perpetuation of the future generation as also respect her individual needs as a Human Being. Help her through the frustrations of the loss of her freedom and the physical and mental

strain of being "on demand" 24 hours.

Educate her, in pre-natal and post - natal, in childcare so that she as the primary care giver can provide the much-needed stimulation so vital for the healthy growth and development of the child.

Support her in her endeavours to care for her child and spend as much time with her

child if she is employed.

Stress the vital role and responsibility of the Father in the social and emotional development of the child rather than his largely prevalent role as economic caregiver.

TRUE PARENTING = MOTHERING + FATHERING.

THE EVOLUTION OF A "PARENTING PROGRAMME/TOOL/NETWORK

Bala Mandir Kamaraj Trust

STAGE I: ADAPTATION OF THE LEARNING THROUGH PLAY CALENDAR FOR INDIA Bala Mandir, Chennai, India - a Social Welfare Organisation organised around care, protection and rehabilitation of orphan and destitute children with no distinction with caste, gender and religion was approached in October '97 by Hincks Dellcrest Centre, Toronto, Canada working with issues of mother child care and development with Canadian Nationals and ethno - specific groups

to tie-up programmatically, as their inter-national partner

with a Parent Education Programme

Based on the "Learning through Play" Calendar: a Parent Education Tool.

(0-3 years) 9 stages and (3-6 years) 6 stages.

Containing well researched, critical inputs, universal in nature in different stages of Early Childhood Care and Development.

Hincks Delicrest requested Bala Mandir to Field Test the Calendar in India and suggest changes culturally and ethnically appropriate to India - and test it with

traditionally honoured child-rearing techniques.

The Calendar is based on work with ethno specific (language) community studies as well as important research undertaken by Dr.Bea Ashem in Nigeria, Africa Her work with very poor and deprived communities, confirmed via Research Documentation that psycho social stimulus is as vital an input to help the healthy growth and development of the child as nutritional inputs.

The contents of the Calendar include

a. resource material for parents.

- b. range of age appropriate activities for the parent to interact with the child.
- Points stressing importance of positive parent child relationship.
- d. culturally sensitive concepts.

e. mainly pictorial representation.

messages addressed to parents by the child.

The format of the Calendar shows

a. 5 areas of stimulation - SPRUC

Sense of self – personality development and how the child feels about itself. Physical Development – gross motor – what children do at certain times? Relationship - development of social skills - how they interact with people? **Understanding the World** – cognitive development of vital intelligence Communication – language development and expression of thoughts and feelings

b. 5 Parenting skills.

- Love; unconditional love and caregiver Passion

- endless amount needed **Patience**

- allow infant to repeat activities over and over again **Practice** - Parent/Child interaction: "I do something; you do something"

Ping - Pong Setting The Stage- Providing a safe learning environment Objective Of The Partnership:

To review the Hincks Dellcrest, Canada, "Learning through Play" Calendar (Birth – 3 yrs.) to make it ethnically and culturally suitable to India.

RATIONALE

To develop a Parent Education Programme with a tool

a. which will focus on along with health and nutrition, the psycho-social component of parent-child relationship leading to an integrated and holistic perspective so crucial for developing the social, cognitive and emotional dimensions in children -0-3 years and 3-6 years.

b. In so doing create an Awareness Among Parents and all engaged in the "Parenting Process", grandparents, elder siblings, child care workers, primary teachers etc. regarding their significant role in the socialisation of the child and in reducing risks of subsequent adverse developmental outcomes through certain activities and interaction.

c. Emphasise **Duties and Responsibilities** of the parent to provide quality of life despite parenting today being more complicated than in the past.

d. Use it as a **Tool to Empower Women** - not only in their role as mothers – but educate the Family/Society to appreciate and support them in that role.

e. The Need in contemporary India. To raise these issues is vital because the initiative and responsibility of child rearing which traditionally belonged to the Family and Parents, seems to be slowly disappearing due to the stress of materialism and globalisation.

f. Through a Direct Contact Person_like a Anganwadi/Crèche Worker/Home Visitor or one who can freely communicate with the families because they share common life experiences, language and culture (grass root worker) focussing on a non-threatening informal interventional approach that allows for messages to reach family directly.

Initial Work undertaken - Oct. '97 to Sep.'98:

Initially Training on the Calendar was extended within Bala Mandir to the

- to professionally qualified staff members social worker, psychologists, nurse and administrator.
- qualified Kindergarten teachers in its Schools and caregivers in its Day Care Centres to create joyful learning environment.

 parents (lettered and unlettered) of the children in its Day Care Centres from nearby slums, to understand child development and enjoy parenting.

• Staff of Bala Mandir — Caregivers taking care of orphan and destitute children, particularly concerned with the developmental problems of and 'Parenting" such children in order to reduce the negative effect of institutionalisation.

This Training programme was then extended to various levels of personnel of WBS-ICDS-III. (with support from UNICEF) over 2 phases with a 6 week period, field test in between

- a. District communication Officers.
- d. Training Instructors.
- b. Zonal project Nutrition Officers.
- e. Anganwadi workers.
- c. Community Nutrition Instructors.

Critical feedback available from the above categories of trainees both in Bala Mandir and ICDS-III was made available in verbal and written form based on special formats prepared for the purpose of eliciting their views on

- a. suitability of the Calendar being used in its present form in urban slums and rural areas.
- **b.** evaluation of the training/teaching module relevant to Indian conditions.

The main recommendations were that the Calendar in its original format

- was suitable mainly for socio economically upper class parents as a person to person communication tool.
- was extremely useful as a teaching tool for teachers and care workers.
- BUT for wider dissemination in Tamil Nadu it would be necessary to evolve a tool suitable for larger audiences.

STAGE II: POFESSIONAL REVIEW:

A Panel of Experts consisting of a Paediatrician, Consultants in Child Development, Consultants in Pre Primary Education, Social Worker, Child Psychologists and ECCD trainers were called in to analyse the quality and validity of the Calendar as a tool for India and review the Critical Feedback available.

They began by looking at the title, the guidelines, developmentally appropriate messages and then the SPRUC domains. They considered the style, content, picture/message compatibility, picture appropriateness to the age of child, and cogency of content from stages 1 to 9 in a given SPRUC domain.

The outcome of these highly interactive sessions highlighted the following:

The Calendar in its present form with changes suggested by Bala Mandir should remain **International tool**. Towards that objective it was suggested that an Indian character should be introduced as one of eight pictures in each one of the pages of the 9 stages of the Calendar.

ii. It was strongly felt that the primary message of the Calendar was to enhance qualitative relationship, between Parent and Child. Therefore all references to (Maths, Science etc.) academic outputs, should be deleted and underplayed with a view to reduce this "Academic-anxiety-ridden-relationship" between Parent and Child.

iii. The original Calendar under the 5 domains SPRUC had child statements that were dramatic and showed the child stating its needs, as also the developmental outcome thereof. Apart from rewriting some of the phrases based on changes suggested by the Panel, a suggestion was given to convert the phrases as A message to the parents – explaining the child's need and developmental outcome of the particular activity,

iv. Necessity to introduce a column titled "Points to Attend", which would emphasise some aspects of child development, health and nutrition and Early Intervention on disability.

v. Bring out a new tool in the form of a Flipchart, which would include Practices, and

 Guarantee the child's physical well being - keeping the child safe and free from harm, providing shelter and clothing, preventing and attending to illness.

Promote the child's psychosocial well being - providing emotional security, socialisation, nurturing and giving affection.

 Support the child's physical development - feeding, bathing, providing safe places to play and explore.

Promote the child's mental development - interaction, stimulation and play.

 Facilitate the child's interaction with others outside the home - within the community, at health clinics, at school etc. Working along with the panelists were

a. a professional artist and experienced Anganwadi workers who recommended appropriate language changes in words and phrases of the Tamil version of the Hincks Dellcrest Calendar and gave many suggestion for pictures enhancement.

b. Followed by a testing of the changes with personnel who are working directly in the field. Directorate of social Welfare was pleased to send their Programme Officers, A.N.Ms, Project Co-ordinators for a workshop. The feedback was frank and encouraging in terms of the appropriateness of converting the Calendar into a flipchart tool In the hands of the Anganwadi Worker.

c. An added input was feedback from an interesting creative workshop for mothers and relder siblings of children - (birth to 3 years) from the nearby slum area. They were taught how to make simple toys; paper cut out puzzles, mobiles, and blocks - with papier-mâché - which they could easily duplicate in their homes. The mothers enjoyed the sessions and expressed a sense of fulfilment in being able to learn to make simple things that would give joy to their child.

STAGE III - EVOLVING A NEW TOOL FROM THE CALENDAR.

Detailed discussions were held by the Panelists on

1. Reasons for all changes suggested for both word and pictures in the Calendar, and a clear evaluation of all the pictures and messages that could be incorporated into the new tool Flip Chart.

2. Recognising that the 3 pictures on the facing page give the broad developmental directions spanning the number of months that the stage covers and some of the five stages in the second half of the Sheet fell within the framework of the top page messages and as such there were some overlaps.

The outcome of Stage II re-evaluation was the idea to represent the Calendar in the form of a flip chart which could be of use for larger audiences and be more widely used through Balwadis, Anganwadis and other child care centres. The decisions taken for the Flip Chart were

a. The pictures would be culturally relevant to semi urban/rural India.

b. The flip chart would be a series of single sheets each covering a whole stage presenting a holistic picture and should therefore cover all the state areas graphically and with clear messages.

c. The centre of the sheet could be a graphic depiction of the typicality of the stage. Then the four quadrants would contain suggested highlights and stimulus ideas. It would be the responsibility of the trainer to explain the domains that govern the totality of child development. Therefore the explanations under each domain would be printed on the reverse of the flip-chart sheet to facilitate the trainer.

d. The idea of SPRUC would be used by the Anganwadi worker through instruction material provided at the reverse side of the Flipchart pages and the target group who had on instinctive sense of holistic development would view the illustrations with simple captions.

e. The Flipchart would have clear-cut guidelines on how to use the tool as well as an understanding of child development and stimulation of the 5 domains for all round development of the child.

f. The guidelines would further carry a strong message of effective communication and a non-threatening approach towards the taught group.

STAGE IV -

UNICEF SPONSORED WORKSHOP - MAR '99 - PEER GROUP REVIEW:

Ive and a first sector of the

Intensive work in January, February '99 by Bala Mandir in consultation with a field communication artist and personnel from ICDS to work on a draft format of a new tool led to the emergence of a draft copy of a Flipchart adapted from the Bala Mandir - Delicrest Calendar which was put through a Peer-group review of the tool.

The invitee participants of the Workshop were from among NGOs working for ECCD, Government Representatives of Directorate of Social Welfare, ICDS, DPEP, Pre primary teachers, Educational and Research Organisations, ECCD Professionals and UNICEF.

Highlights of the Workshop:

- a. Detailed discussion on Concerns regarding ECCD with special focus on "Parenting" emerged from exposure to the Flipchart tool.
- b. Need for enhanced "stimulus" opportunities in the home for children below 3 years, was endorsed and need to support it programmatically, emphasised.
 - c. Need for a Parent Education Programme focussing among other areas on the Rights of Child (CRC).
- d. Endorsement and finalisation of the Flip Chart with technical suggestions changes made and its effectiveness as a tool for ECCD awareness on *Parenting* Education for larger audience.
- e. The Workshop was to be followed up by initiating the process of Networking on initiating with focus on Child Rights, Parent Responsibilities and the psycho-social development of the child.

From June '99 to December '99, the Flipchart Project went through the following stages:

- · Review and inputs from various ECCD experts.
- Field test undertaken by UNICEF.

From January 2000 to August 2000.

and report from the state of the second part has

- Review of the Flipchart as an "inclusive tool" by SPASTN and MNC for Exceptional Children.
- Series of Workshops co-ordinated by members of Network for Information on Parenting, for various levels of functionaries of ICDS and WBS-ICDS-III and in particular Anganwadi workers (direct users).
- Finalisation of the Flipchart after review by UNICEF and ECCD experts.

to the filphart tool as a Parent education resource is now ready.

Keys to the Flipchart Project

- 1. Bellef in the Importance of and a profound faith in and respect for the uniqueness of Indian child rearing practices and working towards a goal to reinforce and nurture, rather than supplant.
- 2. Involvement of the Community in all phases of the project.

The clear match between needs and programme objectives.

The use of the existing health and education infrastructures rather than creating new cadre of workers.

• Using a regional base to manage the programme with a focus on involving and

empowering communities.

Respect for Indian culture, which define the ways in which children are socialised. Indeed, the Convention on the Rights of the Child indicates that children have a right to their cultural identity. Keeping this in mind an effort was made to define, describe and understand the reasons for cultural differences in the upbringing of children. The project was further guided by a respect for Indian culture and the recognition that for the programme to be effective, it needs to proceed in harmony with Indian culture and time honoured, traditional beliefs. One of the major activities of the early phase of this project was to identify in consultation with the Anganwadi/Health Workers and parents from the underprivileged section of society their child rearing approaches.

3. The open spirit of the Programme:

• The promoters of this innovation had belief in the potential of the people being reached out to, take charge of their responsibilities.

To create a forum and a process (Network) in which the evolving needs of children

can be discussed.

To understand the needs of parents and concerned adults and to share with them perception of the needs of the child.

To listening to people who may not be considered articulate.

To respond according to the needs expressed by the community, rather than to any preconceived agenda.

To effectively establish partnership between all the key players and the major

government agencies.

4. A clearer understanding of child-rearing practices, patterns and beliefs helped us do our job better and to understand, support and improve the child-rearing process, and identify those practices which should be supported and those which ought to be discouraged.

5. Respond to diversity. Children grow up in a wide variety of different physical, social and cultural circumstances. Even within cultures there is diversity. There is no "right

way" to bring up children.

6. To provide continuity during times of rapid change as a result of economic social and political changes. Sometimes these changes are very rapid and they can have a significant impact on children's development. In the process, some practices are being lost that continue to have both cultural and scientific value. Other practices, which appear to be "deviant", represent novel adaptations to particular settings, and may be followed for good reasons and with good results.

An attempt was made to understand rather than suppress them.

7. To identity in the programme "Parent's Rights" as

- All parents must have some knowledge of the basic child rearing tools.
 Knowledge about child development. Parents need knowledge about how children develop. They need information on children's normative patterns and stages in physical, social, and language development, as well as their nutritional and health needs at various stages. Knowledge of children's emotional needs and typical early social-emotional behaviours may similarly forestall inappropriate parental responses to their emotions and behaviour.
- Observation skills and more effective parenting. A basic need of all parents, regardless of socio-economic status or educational level, is to learn how to observe a child. In essence, parents need information and observation skills to help them discover the match between a child's ability or readiness and some ways and means to help the child reach a given developmental goal. Such awareness can help a parent to handle a child's frustrations more skilfully.
- Alternate strategies for problem prevention and discipline. Parents need insights
 for managing child behaviours. Knowledge and skills regarding alternate methods of
 discipline and problem avoidance.
- Parents need language tools. The parent who has learned to give names to the things a child notices, to the actions a child carried out, and to the feelings a child expresses has a powerful tool for enhancing the child's language skills.
- Parents need support. Most of all, parents need to understand the tremendous Impact they have on their children's lives. Through their attention, expressed pleasure, listening, and interest, the child's growing sense of self is nourished.
- How to use the home for learning experiences. Another basic tool consists in knowing how to take advantage of settings, routines, and activities in the home to create learning and problem solving opportunities.

Parents of young children need to know ways of turning household objects into learning materials for children's exploration.

Stage I

1, Shared concerns of Individuals and Institutions in ECCD

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- 2. Identification of nodal agencies | Innertonal
- 3. Broadbasing sourcing other like-minded organisations and individuals

Stage II

- and day a balancika carriete 1. Formalising Network
- a) Developing a consensus on objective and Terms of Reference b) Membership (c) Formation of 4 sub-groups

 - d) Allocation of responsibilities
 - e) Clarification of voluntary involvement in Network

 - 2. Meeting of sub-groups and a sub-group and a sub-group
 - b. Collation and review of existing data/activities
 - c. Developing of framework of action and strategy

Stage III

- 3. Identification of critical components for action
- 4. Developing procedures and strategies for information sharing and setting up channels of communication treatments and control and the communication treatments and the communication treatments and the communication treatments are communication to the communication treatments and the communication treatments are communication to the co
- 5. Developing linkages with other existing Networks
- 6. Pooling of Information on needs assessment Stage IV. adt an editore seem droups bales. ' an est for always in

- 7. Identification and formulation of messages
- 8. Compilation and editing of messages
- 9. Devising methods of dissemination
- 10. Communicating messages on parenting.

Stage V

- 11. Developing a framework for training on parenting
- 12. Integrating this module into existing and related training modules
- 13. Advocacy/lobby for policy on ECCD

ACTIVITIES BASED ON STRATEGY PLANNED

STAGE I (March - June 1999)

1. Shared concerns of individuals and institutions in ECCD

2nd March – Peer Group review of UNICEF sponsored - Bala Mandir Hocks Delicrest Parent Education flipchart. Decision taken to address ECCD through Parenting

2. Identification of nodal agencies

3. Broad-basing – sourcing other like-minded organisations and individuals
11th May '99 and 8th June '99 - Meetings facilitated by UNICEF at which the
decisions arrived at were

a. Need for Rational and Formation of Network for promoting and propagating parenting practices for children below 6 with special reference to below 3 years.

b. Identification of organisational and individual strengths existing in T.Nadu. Expanding present working forum to include and involve document department, Government Departments, NGOs and individuals.

STAGE II (July - November 1999)

1. Formalising Network

16th July '99 – At a meeting facilitated by UNICEF which included Government Departments, NGO's, Educational and Research Institutions, Associations and Individuals the following were undertaken

a) Developing a consensus on objectives and Terms of Reference of the Network

- b) Membership to be confirmed through the filling up of a format prepared at the meeting
 - c) Formation of 4 sub-groups and Identification of Convenors -

Communication and Networking - BMRF

• Research and Documentation - Mother Teresa University.

Early Intervention in ECCD/Parenting. – Dr.Jayam

- Training Avinasilingam University Later MN Centre for Excep. Children Allocation of responsibilities – BMRF was identified as the Secretariat
- 2) Meeting of sub-groups

Identification of priorities

Collation and review of existing data/activities

- 3) Developing of framework of action and strategy of NIP.
- 4) Clarification of voluntary evolvement in the Network.
- 5) Confirming the method of functioning within the Network

August '99:- Series of Sub groups were held and the major decisions were

Research and Documentation — Would undertake to document and update existing and relevant work on parenting and ECCD and suggested means for the transference of Research knowledge to other groups.

Early Intervention- Identified various tasks.

Collating Information.

Identify the how & when of intervention.

Compile the comprehensive Encyclopaedia of messages.

Organise Workshops (1) bees store

Training - Identified that since most training programmes for ECCD.

• Did not emphasis the psychosocial relationship of parent/ child.

Focussed on teachers and caregivers in the institutional set up.

A training module on Parenting would be prepared and steps taken to intervene into existing Nectings that training programmes.

Communication and Networking -

- publicating publication to a bThe name PIN Parenting Information Network was changed to NIP Network for Information on Parenting.
- Govt representation and involvement in Network Programme was morning to the stressed.

6) Identification of Critical Minimum Components for action.

The following CMC were identified and messages and programmes while targeting PARENTS would also include those in a parenting role:-

a. Parental readiness – Adolescents and newly married couples.

b. Planning for Parenthood - Family members.

- honormover back. Preparing for Safe Motherhood family. Community and medical professionals. art detablished to be t
 - d. Welcoming the baby (1st 40 days) Caregivers and helpers.

e. Precious ft year - Creche workers.

of the f. TActive Toddler. (1 yr. to 3 yrs. +) - Kindergarten/Crèche workers

STAGE III

1. Developing procedures and strategies for information sharing

2. Developing linkages with other existing Networks

3. Expanding information on the existence of NIP.

September:-

Communication and Networking - Identified the need for

a. Child Rights perspective to be included in all NIP Programmes and activities.

b. Addressing the issue of trauma of rejection of the child based on gender, colour, disability, ordinal position and social status.

c. Focussing on the multi sectoral responsibility towards ECCD.

d. Stressing Parenting responsibilities and obligations to the child's right for ECC - SGD.

e. Studying/Understanding Indian traditional methods of ECCD.

21st October '99 - 2nd meeting of NIP.

At the meeting the following major decisions were taken.

a. Membership to the Network would be free and purely on a voluntary basis.

b. Key Element of the Network to include rather than exclude - paper on Networking by Dr.Rajarathnam Abel of RUHSA was accepted as a NIP tool and circulated.

 Participation at the UNICEF sponsored sub regional seminar on "Innovations in ECCD" was confirmed.

d. A pamphlet on NIP was to be prepared.

Visual displays on *Networking, Parenting, Parenting role and CMC* were to be prepared. November '99 – Further to active participation at the UNICEF Sub regional Seminar a decision for NIP Tamil Nadu to initiate the process of Networking on Parenting in the Sub-Region was taken.

<u>December '99</u> – NIP pamphlet was circulated to participants at the AGM of TN FORCES and permission given to send pamphlets to other members. NIP's support of activity based developmentally appropriate Kindergarten/Curriculum prepared by TN FORCES was identified.

Stage IV

- 1. Setting up channels of communication and identification of tools.
- 2. Pooling of Information on needs assessment.

Jan. 2000 - At the 3rd meeting of NIP held on 13th Jan. following decisions were taken:-

- a. Translation of NIP Pamphlet into Tamil to facilitate wider circulation.
- b. Active participation in Seminars and Exhibitions to disseminate NIP messages
- c. Undertake translation into Tamil of The *Challenges of Parenting* a set of UNICEF booklets Contributions to which had come from NIP members.
- d. Accept the UNICEF sponsored Parent Education Flipchart as a Network tool and NIP members to participate in the finalisation of this tool.

<u>February/March 2000</u> – A review of the field test report of the flipchart followed by review by MN Centre and SPASTN of the flipchart as an *"inclusive tool"* relevant for parents of children with disability.

May/June/July 2000 – Finalisation of the UNICEF sponsored Bala Mandir Hincks Dellcrest (Parent Education Flipchart)

- 3. Parenting Messages:
 - 1. Identification and formulation of messages
 - 2. Compilation and editing of messages.
 - 3. Devising methods of dissemination.
- 4. Training Module for Parenting:
 - 1. Developing a framework for training on Parenting for
 - a. Parents and Caregivers
 - b. Kindergarten Teachers
 - c. Trainers
 - 2. Integrating these modules into existing and related training modules.

August to December 2000 -

These Network activities were completed by the last quarter of the year with active participation of NIP members through a series of Workshops.

Translation of Flipchart into other languages.

In the Academic year 99-2000 a & 2001 Pilot Project was undertaken by BMRF to intervene/ integrate *Parenting* into the Training programmes

- 1. Bala Sevika Course ICCW.
- 2. KG Teachers Training Children's Garden School.
- 3. ECCD Training Kothari Academy

A training module has been formulated based on the experiences and inputs of the Project

5. Media Workshop

To be held in March 2001

Stage V: In the age at all paradipoint talk. I

1. Communicating messages on Parenting.

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2. Expanding Networking Activities.

Advocacy/lobby for policy on ECCD March 2001

- For expanding awareness/info. on NIP
- To make a needs based assessment of various target groups based on the Critical Minimum Components
- Parental Readiness College students &

model to percent series

- Plan for Parenthood Parents

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- Motherhood Page 18 Paediatrician, Gynaecologist
- Welcoming the Baby Hospital Administrators, Paramedical staff, etc.
- Nurturing the children Parents, Institutional care givers, KG Teachers, family and long took to a decipe of the property etc. on the property of the second transfer of th
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Members list - Page - I - July 99 - March 2001

. '11'	NGOs with him may be a little and the	Contact Pe son
1. 2. 3. 4. 5. 6. 7. 8. 9.	Adoptive parents Association (Tamil Nadu) ACCORD — Aravind Centre for Women and Children Bala Mandir Kamaraj Trust Bala Mandir Hincks Delicrest Balar Kalvi Nilayam "Brindavanam" Family Planning Association of India Guild of Service	Ms. Vidya Shankar Mr. Ramdas Dr. Lakshmi Rahmathullah Ms. Maya Galtonde Ms. Hema Srinivas Ms. Rose Visuvasam Dr. Chandra P. Ms. Jaya Sitaram Ms. S
10. 11. 12. 13. 14.	Indian Council for Child Welfare Madhuram Narayanan Centre Rural Unit for Health & Social Action "Sevalayam" Social Development Society Spastic Society of Tamil Nadu Vidya Sagar	Ms. Andal Damodaran Ms. Jaya Krishnaswamy Dr. Rajarathnam Abel Ms. Kokila Johnson Ms. Aloka Guha Ms. Poonam Natarajan

Educational and Research Institutions

1.	Avinashlingam University	Dr. N. Jaya
2.	Rala Mandir Research Foundation	Ms. Lakshmi Gopal
3.	Bhayan's Rajaji Vidhyashram	Ms. Swathantra Shaktivel
4.	Children's Garden School Society	Ms. Shakuntala Sharma
5.	Madras School of Social Work	Ms. Nalini Rao
6.	Mother Teresa Women's University	Dr. Yashoda
7.	Project ACCESS	Ms. Mina Swaminathan
8.	SCS Kothari Academy for Women	Ms. Prema Daniel
9.	SITO Council for Educational Research	Dr. Raja Ganesan

Individuals

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1. 2.	Dr. Anandalakshmy S. – Consultant, Child I Ms. Gita Bhalla		x =
3.	Dr. Indu Balagopal – Chairperson, Child-to-	Child South India Resource Gro	up
4.	Dr. Javam S Paediatrician		
5.	Dr. Lalitha N Consultant, Child Developm	ent and Education	. i
6.	Ms. Padma Srinath - Resource Person, Chi	d Development	
7.	Dr. Sunder S Consultant, Physical Medic	ne and Rehabilitation	, Ý
8.	Ms. Tara Srinivas	rated to the feet never of the H	. 1
9.	Ms. Usha Ramakrishnan	ROCH DELEGISTS AND ADDRESS	1,
10.	Ms. Vidya V Child Development Specialis	t, Vijaya Hospital	
11.	Ms. Vijaya P Dietician, Public Health Cen	tre "	4
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		Dr. Virudagiri	í.
1.	Indian Association of Paediatrics	Dr. Virudagiri, A. Japan	6.1
2.	Tamil Nadu Voluntary Health Association	Ms. Saulina Arnold	.1.1
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	Participating Members		
1.	UNICEF	Ms.Anjana Mangalagir	
2.	Directorate of Social Welfare	at amount of the state of the	
3.	WBS ICDS III		
4.	DOED	n garage at the second	
5.	Adolescent Task Force- State Resource Ce	ntre	
6.	Nutrition Network for TN & Kerala- Dr. Raj	ammal Devadas	
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