Agents of change in the restoration of their own rights, including health
INTRODUCTION

Health is to see heaven, to have friends, to live and learn from our friends. To live with people more experienced in life. . . Bad is to live abandoned in the world, without a father, without a mother, without a place to stay. Health is a wonderful thing.

These words of a child, forced to take to the streets of Sao Paulo, Brazil in order to survive, challenge us to listen, to learn, and to act to construct a society where health for all remains not a far-off dream but the fruit of justice and solidarity.

In this issue of Contact, Reinaldo and Margaret from Brazil tell their stories, drawing us into a reality unknown to most of us but of concern to all. We meet the children in the streets of Brazil who are no longer waiting passively for help from others. They call upon us to share in their struggle and their victories and to accompany them in the recognition and defense of their rights, including health.

Just as the street children turn to each other for mutual support, the children of the Child-to-Child movement have for years been concerned with promoting the health and development of their younger brothers and sisters. We hope that the presentation of the Child-to-Child approach and the example from Colombia of how the creativity and participation of children has led to the improvement of urban neighbourhoods will inspire readers to recognize the potential of children and to include them actively in community work.

And let us do so with the same conviction and faith that Judah had when he said to his father, Israel, "...we will arise and go; that we may live and not die, both we and thou and also our little ones" (Genesis 43:8).

Margareta Skold
THE FIGHT FOR CHILDHOOD IN THE CITY

The following material, including Reinaldo and Margaret’s stories, appeared in the publication The Fight for Childhood in the City by Anthony Swift, one of a series of books published by UNICEF and designed to highlight for the non-specialist some aspects of the data and conclusions of technical case studies on The Urban Child and Family in Especially Difficult Circumstances undertaken in Brazil, India, Kenya, Italy, and Philippines under the auspices of the UNICEF International Child Development Centre, Florence, Italy.

The crisis of unprotected children and adolescents in Brazil has developed together with rapid industrialization and, in the past decade, great economic instability.

Brazil is the world’s eighth economic power in terms of gross national product (GNP). But wealth remains largely in the hands of a powerful minority, leaving half of the population with only 14% of total income. The country’s economic crisis, which particularly affects the poor, is aggravated by a foreign debt of US$115 billion and inflation. The current inflation level is 18% per month.

In 1987, 41% of families, including 30 million children, were living below the poverty line, and the situation has not improved since. In the northeast of the country, the percentage of families living in poverty rises to 63. Though poverty in rural areas is acute, the greatest concentrations of poor children are in the cities.

A problem defined as urban has roots in rural poverty, neglect, and the enforced, even violent, displacement of large numbers of families from the land. Between 1960 and 1980, 40 million rural families either abandoned or were thrown off their land. These families migrated to urban centres. Thirty years ago, 75% of Brazilians lived in the rural areas. The same percentage now live in the cities.

Most of the rural migrants have joined the ranks of the urban poor, producing a rapid growth of squatter and slum communities, the more settled of which are known as favelas. They are still growing, but now more slowly. Valdemar de Oliveira Neto of the Luís Frere Centre describes life in the urban slums as being for many “…the final stage in a process of destruction of the very important ties in an individual’s life—cultural, social, and psychological. Often the family is destroyed, the community is destroyed, the relationship with the land in the interior has been destroyed. The whole process is very destructive.”

The impact of this process on children first came under systematic study only at the end of the 1970s. During the 1980s, an increasing preoccupation with street children has produced more academic research into their predicament. Children in the rural context may be impoverished, but they are not a problem to society. They work alongside their parents, even though with no salary or education. In the cities, children are most often deprived of family. They become violent. Many become criminals. Some are killed.

Reinaldo, whose story is given on the following pages, was not killed. For a time, however, he was a criminal. The fact that he has survived the streets and has even been helped to turn his life around offers the hope that it can be done for other children, both in Brazil and elsewhere.
Reinaldo’s story

“I have been on the streets since I was 10. We were seven children, and my father died when I was four. My mother wasn’t interested in me. I lived with my grandmother in Goiania. I liked her but I was too much of a responsibility for her. She would send me to my mother, who would send me to my aunts. They would beat me and I would run away to my grandmother. And so it went on.

“I was nine when I ran away for the first time. I had already been hanging around on the street, and I found the street children were not as violent as people said. They treated me well.

I thought, ‘They treat me much better than my aunts.’ So I decided to stay, but I was hit by a car and the judge gave me back to my aunts. For three months I was well treated. But then everything began again. It was easy to go back to the streets—I already knew the way.’

Why did Reinaldo go on the streets when his brothers didn’t?

“We are not different. A child mistreated at home only stays at home because he doesn’t know the street children, he is afraid of them because of what people will say. If he gets to know them he will feel much better staying on the streets than at home. When I went there, at the age I was

A climate of change

Reinaldo Moreira is 18. His experience of street life covers much of the decade when “street children” became the centre of a remarkable social movement in Brazil. The initial reaction of Brazilian authorities to the presence of poor children on city streets was to hold them in repressive boarding institutions. Only recently have innovative non-governmental programmes arisen and united into a national political force, in which children themselves play a key role.

With the country’s shift towards democracy and the election of a President declaring support for children’s rights, the social movement has helped produce unprecedented legislative and constitutional change. The Child and Adolescent Statute redefines the status and rights of the child, overturns established public policy, and provides a framework in which government and the private sector can work together to respond to the needs of the country’s children.

In 1986, a small number of experts working within the government’s child care programme in Goiania, state capital of Goias, began to cohere into a multidisciplinary team. They identified strongly with the programmes of the popular movement and were dissatisfied with major failings in the government system, which they felt was working in a fragmented way, with a high degree of duplication. It was clear that the problems of disadvantaged children and youth were not being met.

The population of the state at the time was 4.6 million people, a third of whom were between the ages of five and 17. Half a million of these, the majority in urban areas, were from very poor families. So a large number of youngsters were at risk of abandonment, denial of education, or early entry into the labour market. Child labour had been increasing steadily since the beginning of the decade, with over 90% of working children in unregistered employment.

The team seeking changes produced an analysis of the situation which was taken up by a candidate for state governorship. He called for a review of the state’s social policy and the elaboration of a new programme in which social assistance would be provided as a citizenship right. On coming to power he gave the team support. Policy guidelines adopted included the integration of government programmes through institutional reform and a move away from institutionalizing children toward the provision of alternatives; support for vulnerable families; decentralization of services; comprehensive educational provision allowing for community participation and involvement of the family.

It could be said that Reinaldo was lucky to arrive at a turning point in his personal life that coincided with this climate of political change. In his case, assistance came from a state programme that anticipated the new legislation, threw out the old practices, and adapted approaches pioneered by non-governmental organizations.
then, it was a paradise compared to being with the family.

"The strongest thing was the friendship, the group. Nobody mistreated you, nobody beat you up, except the police when they arrested you. It was nice there. If I thought of going home it had to be to my grandmother's house. I could never think of going back to my mother's or aunts. When I was 11 my mother married a military policeman, and this guy would scowl at me and threaten me, so I moved further away from my mother.

"I also like the drugs. We had to rob to get them. We did pickpocketing and breaking into stores at night—sometimes even into drug stores. To me it was paradise. I didn't know the world.

"When I was 12, I met an 18-year-old prostitute in Goiania and I liked her. I broke into a house with her. She said the police were after me so she took me to Sao Paulo, hitching rides. Near Sao Paulo, she went off with some other guy and I was left alone. I stopped ripping off and got work in a five-star hotel, the St Raphael. But after nine months I started feeling very lonely. So I got a ride to Brasilia. There I had no place to go. So the only people I made friends with were street children.

"At that time I was already very experienced so it was easy to be in this group. So I started all over again, sniffing glue, cocaine, shooting drugs, and taking pills, all kinds. Robbery. I did this for three years. I was arrested many times. The police would beat me. Every time I would feel so much hate and anger in my heart that I wanted to do worse things. My fantasy was to have very strong weapons to destroy the police. I didn't think. I was very much addicted, and every time I was beaten up I became more angry at my life.

"At some point I moved into a friend's house—he had been a real bandit but he was a nice person. He had stopped robbing. His mother treated me very well—she had eight kids, though. But I got some experience in my life of not using drugs.

"When I was 15, I started feeling very lonely again and decided I had to come back to Goiania. My grandmother had moved away from her house. Again the only friends I could find were street thieves. So I moved back into the life of drugs and robbery. Some of the drugs were killing me but I really wanted them. I had stopped injecting—it was marijuana and pills and herbal mixtures. The next morning I remembered nothing. The pills make you speed—very nervous and fast.

"I was arrested several times. In the cell I would sing. I started to think about my life. I hadn't done that before. I had been in several government boarding homes. I was very difficult to help me there. I would fall into the drug thing, and they would think I had no possible salvation. Then I would run away."

The turning point for Reinaldo came when the authorities in Goiania turned the old institution into an open access centre for street children.

"When this centre was opened up I started coming here. I got my ideas better organized. I was either going to drop out of the kind of life I was leading, or I was going to start it all over again. I had to make a choice.

"I was still doing robberies when I came here. The first director was a real good friend. I used to do a lot of robbing, but she was very nice to me. They understood that I was under drug
effects and really helped me to gain strength, and I stopped sniffing glue and using drugs and just kept to cigarettes and marijuana. As time went by I said, 'I am going to study now. I asked for school.' They gave me school. I even stopped going to the street. Then they trusted me and got me a job in the bakery. I stayed there for a while—they liked me a lot there.

"Well, it's no use working and studying and still using drugs. It would be very easy for me to go back to my old life—so I decided to stop taking marijuana. It was very difficult—it was so available. I also stopped smoking and even drinking beer for a while. That was difficult for my friends to accept. In the beginning they would fight me. But today they accept and respect me. Two or three try to follow me. I can now say that I won't go back into drugs."

One of the great advantages of the centre for Reinaldo is that it has helped him to make progress while staying close to the people he most values: the other adolescents—his "colleagues."

"We discuss everything together. I lived on the street for so long that these people are my brothers and family." Reinaldo also values the change in attitude of the staff. "Everyone here treats me so well today."

Another important advantage is the openness of the centre. "Being able to go to school outside of here is very good. I go at night regularly, just like anybody else, and I am now at the end of the first grade."

Reinaldo is now one of a five-member representative council elected by the adolescents at the centre to represent their views to the administration. "Before any decision is made affecting us, the director of this place meets with us to decide what to do. In the past, for instance, the staff of other programmes would use the soccer pitch when they wanted. Now we manage its use."

Reinaldo has moved on from the bakery to a job as a general office assistant for an independent street children's movement. "They trust me. I open the office and am responsible for it for much of the day."

"Right now we are working on the new Child an Adolescent Statute. We are getting all the children on the streets—working and street children—and those in private and state schools to come to the stadium for a special celebration. We are going to disseminate the statute to all the children."

What did he think of the statute?

"I think it will be very difficult for the rights in the statute to be complied with. If there is a change in government, it may not happen. But there is a lot of strength in demonstrations. If we make it, it will be great."

Looking back, Reinaldo sees the street "paradise" in a different light.

My experience on the street was one I don't wish for any child. I didn't know that before, but now I know. I don't know anyone has hasn't been arrested. Many of my friends have died—been shot, or run over by cars. Others caught diseases on the streets. One is disabled, some are in detention, others are totally useless for life."

And what about his own future?

"Now I want to rent a room for myself and be independent. Many people say I am going to suffer. But I want to be a person who lives by himself, supports himself—I want to have food, clothes, buy my own things. It's an experience I must face—other people do, I can do it. I want to finish my studies. I want to get to know other places. It's not that I dislike Goiania—I like it. But I want to grow, improve. There will always be a little discrimination here so I want to start in a different place."
Margaret’s story

Margaret’s family took to the streets of Rio de Janeiro 10 years ago after her father left home. “My mother had no way to support us. We were four girls. We sold sweets on the streets.

One day we didn’t have enough money to get home and my mother decided we should sleep where we were. We stayed for a while to make more money, and when we did go home we found the house broken into. We stayed on the streets after that.

“Then my mother gave birth on the streets to another girl. She didn’t take care of herself after the birth and got a problem in her head. She went away with the baby for three years, leaving me to look after my younger sisters. Then she came back to us.”

Margaret experienced many of the hazards of street life, including the insults of passers-by, arrest, violence, and extortion at the hands of the police. She describes street life as an environment of violence. “Being hungry is violent, sleeping on the cold ground, prejudice from society — there are many ways a child can be subjected to violence. On the street I would approach a person to sell sweets and they would spit at me. Not being able to fight back on the street, that is violence. The fact that I’m black made it worse.” She resorted to prostitution: “I had to fight to support my younger sisters and there is always a man offering money for sex.”

Despite her mother’s prolonged absence, Margaret ascribes having been spared some of the worst experiences of street life to her mother’s presence. “Some colleagues of mine were raped by the police. It never happened to me because I am not a street girl. The best thing is to be next to your mother. We can be hungry or cold but if we’re near our mother we are protected.

“The worst things happen to children whose mothers are far away or who have no mother. Many children on the street don’t even have mothers — their mothers have died. They leave home to find a way to help a hungry brother or sister — they try to get money in the street, and then they become street kids.”

Margaret was six when her family took to the streets. At 12 she learned about a street programme, the Associacao Beneficente Sao Martinho, part of the Catholic Church’s Pastoral Care Service for Children in Brazil. “I discovered there was a group which gave lunch at the cathedral. Then I started to get along with the people from the Pastoral. They decided to put me in the course of preparation for the working world. I wanted to be helped. I struggled to win their attention and assistance. On the streets there was nothing nice. I only got to know what nice was when I got to know Sao Martinho.”

Margaret prospered in the programme. Now at 16 she is training to work with street children and has been helped to acquire a slum house, where she lives with her mother and sisters.
CHILDREN CHALLENGE CHURCHES

During 1989, it evolved that the National Council of the Churches of Christ in the USA, the World Council of Churches, and the Latin American Council of Churches each became concerned with exploring the difficulties facing children in Latin America and the Caribbean. Upon the realization that this concern was mutual, it was decided to hold a conference under the auspices of the three councils.

The conference was held in Sao Paulo, Brazil in May 1990. The 35 conference participants—all engaged in work among children—represented churches in 12 Latin American countries and the Caribbean, one European country, and the USA.

Four areas were chosen for analysis: the consequences of the economic crisis on childhood and adolescence, the consequences of war and repression, violence in culture and its effects on children, and adolescent and child abuse and trade.

Conference participants discovered together the extent of the hidden tragedy taking place within the most fragile sector of society. Three young people representing street children's movements in Brazil and Peru joined the group and shared their experiences.

The conference resulted in reports on each of the four subject areas, giving priority tasks to be undertaken to address the problems identified and suggestions for implementation. The conclusions of the conference remain a direct challenge to the three councils involved. New roads for ministry must be created urgently to accomplish the task of caring for our children.

The conference proceedings make important reading for those involved in work with children, church-related or otherwise. Copies of the report, entitled Boys and Girls: Victims of the Madness of an Adult Society, may be obtained upon request from the World Council of Churches, at the following address:

CICARWS-Latin American Desk
World Council of Churches
B.P. 2100
1211 Geneva 2
Switzerland

THE NATIONAL STREET CHILDREN'S MOVEMENT

Rodrigo de Souza Filho, a leader in the National Street Children's Movement in Brazil, participated in the National Council of the Churches of Christ in the USA, the World Council of Churches, and the Latin American Council of Churches conference on the difficulties facing children in Latin America and the Caribbean, held May 1990, where he explained the National Street Children's Movement to conference participants. Excerpts from his presentation are given below.

I would like to give you an idea of the National Street Children's Movement. Yesterday the economic crisis was described; Brazil is also involved in it. Beginning with the 1970s it started to become much worse. It has caused a proliferation of children coming to live in the streets in order to survive, which is increasing a great deal in this country.

It was important to search for some way of organizing and coordinating care and education for these children in a way that would bring them into the discussion of their life's situation as subjects, not objects. Such projects, involving communication of their experiences, were begun in diverse parts of the country by concerned people and educators with the support of alternative community projects supported by UNICEF, FUNABEM [the National Foundation for Children's Welfare], and the Secretary for Social Aid in the Ministry of Social Welfare here in the country.

Leaders began to get together and, in 1975, saw that the struggle needed to have a much broader scope. We needed to advance the issue of defending the rights of children and adolescents in Brazil. It was decided to create an autonomous movement without ties to official institutions, political parties, or religious purposes. This was how in 1975 the National Street Children's Movement began in our country, Brazil.

Today the movement is organized in 22 out of Brazil's 27 states. We have approximately 3000 volunteers who dedicate their free time to this struggle, collaborating with NGOs, church groups, and movements engaged in the
struggle to defend children and adolescents' rights. Our mandate is to alter the country's legal outlook regarding children and adolescents and to react to the emergent violence, be it through denouncing or further researching killings, mistreatment, and irregular detentions of children.

One of our basic activities, which is entirely new, is the experience of organizing boys and girls. The movement believed that it should enlist the boys and girls in the struggle for rights. Thus the movement also works to gather the children and young people together to hear from them what their situation is and to involve them in the struggle to defend their rights.

Recently I was taking a group of children for a walk. Everything was going well until at the end a girl fell down and cut her eyebrow. I had to wait to take the girl to the hospital until I had taken all the group to their houses. I went to the girl's house to tell her mother and was very worried about how I would relay the information so took all the care I could. To my surprise, the mother had no reaction at all. I asked her husband to go with me to the hospital, and he simply said to me, "Look, I can't go because I have two little children that I have to take care of." It gave me a shock. Then I asked a neighbour to accompany me. I left in the car thinking about it.

After some thought I realized that I felt a great violence had been done to this girl. But as far as the family's feelings went, where eight people lived in a room measuring two meters by three meters, where they all slept on the floor, where they had a stove with only one burner and one pan, for this family a cut eyebrow was no more serious than life that this girl and this family lived through daily. We the educators have values that are not the same as the values of those with whom we are working.

I have been speaking primarily about street children, but I would also like to describe some of the work we are doing, a work devoted specifically to these children. Our project has four basic activities: literature, music, literacy, and the use of the body [which for street children is often their only possession].

The methodology we use in our work is the children and young people themselves; their dynamic goes on determining the methodology, determining the road down which they will go.
WHERE DOES THE CURE BEGIN?

Zeni de Lima Soares is a Methodist pastor and coordinator of the São Bernardo do Campo Street Children Project, São Paulo, Brazil, described below. She was also co-coordinator of the inter-church agency conference described on page 6. The following excerpts from her article "Urban Health and Human Participation" and the activities report of the São Bernardo Project speak of the phenomenon of street children as a symptom of a sick society. And she explains, from the perspective of one involved in a local NGO, how the National Street Children’s Movement works to bring healing to the ailing nation of Brazil.

In the face of the dramatic situations that millions of Brazilian children and adolescents are forced to endure, concerned individuals and leaders have risen up in indignation. They approach the street children and, with them, begin the process to recover their social status, their rights, their voice, their dignity. Many of those working with the children find enlightenment in their work in the Bible.

In São Bernado de Campo, a group of educators, committed to the cause of street children and linked to the Methodist Church, the Ministry of Minors, the National Street Children’s Movement, and local community associations work together with the children, who participate on all levels of the project.

Based on principles and objectives similar to those of the National Street Children’s Movement, described in the previous article, the Street Children Project aims at creating an atmosphere of friendship and trust between educators and children. Much time, therefore, is spent on just being together in the places where the children gather, such as the city squares.

Activities such as football, painting, Brazilian dance (capoeira), outings, and parties help develop ties of friendship and facilitate the development of other activities intended to meet the needs and interests of the children. These include income-generating activities, a shoe shiners cooperative, a street restaurant, and a personal assistance programme. Training courses, covering areas such as the Bible, politics, literacy, and learning through working, have helped to raise awareness among the educators and children, which in turn has led to their active participation in local and national meetings and demonstrations.

Children associated with the project may also receive individual help, such as scholarships for studies, school materials, or assistance in especially difficult situations such as teenage pregnancies.

The project offers a technical training course, which provides skills training but also an understanding of the socio-political, economic, and cultural context of the production process.

The group sums up their work in these words:

To work together with street children in the São Bernardo do Campo project is more than just offering a social service. It is to be a light showing up social contradictions, a place to learn about a world well outside the doors of most churches. It is to be a school of life, a movement for human rights, involving churches, secular schools, and popular and community movements. Finally, it involves all those who are are touched by this concern and who rise up in indignation to confront this situation of injustice which causes the suffering of so many children and adolescents.

Our project exists to denounce irresponsibility in society in whatever context, including ecclesiastical, and also to announce a New Society in which the young possess their own rights, that is, in which the young are true citizens.

Boys and girls: agents of change

The São Bernardo do Campo Project has participated in several national demonstrations as well as encounters of the National Street Children’s Movement.
The Movement’s first national encounter was organized in May 1986, when boys and girls met, with educators as a support group, to decide what they wanted of their government. Five hundred children, representing their local groups, went to Brasilia to discuss issues such as education, health, work, family, violence, and organization. The outcome of these discussions was a document sent to the National Constituent Assembly, the body entrusted with drawing up a new Constitution. In interviews given at the time, the boys and girls described the country they wanted—a country without violence, with fair wages enabling a family to live in dignity, with schools, food, festivities, organization, and participation. Theirs was a vision of a healthy society!

Progress, however slight, was made in the revised constitution. To secure the ground gained in the revision of the Constitution and to push ahead, a law supplementing the constitution was then drawn up to more fully embody the newly recognized rights of children and adolescents.

To press for the adoption of this law, entitled “Statute on Children and Adolescents,” a second meeting of street children was organized in Brasilia in 1989. At the meeting, one thousand boys and girls denounced the murder rate of one child and adolescent a day in Brazil. Names of children who had been murdered were written on a banner and carried through the streets of Brasilia to the National Congress, where a file on the murder of children by the police and death squads, compiled by the Brazilian Socio-Economic Analysis Institute, was presented to members of the Senate. Boys and girls then chaired a symbolic parliamentary session in which they unanimously voted to approve the new code of rights.

The way opens up before you

The way for our sick society to recover its health entails this kind of political action. The boys and girls involved in the programmes that are part of the National Movement (which is based on participatory methodology) have organized cooperatives, food programmes, alternative schools, vocational training programmes, and health programmes. These health programmes, for example, call upon professionals to leave their offices and go down to the streets to provide health care. There they talk with the children about how to care for their bodies.

Of course, much remains to be done. The Statute on Children and Adolescents was approved in July 1990 and entered into effect in October of that year. The Statute calls for new efforts in the struggle, so that the rights that are written on a piece of paper become rights that are lived in the streets.

So that this might happen, there is educational work that must be done in the communities, churches, schools, universities, and, above all, in the streets. A way of creating awareness of these rights must be established without delay. With the participation of boys and girls and the communities in which they live, with their strength, their voices, the hope of curing a sick society are increasing. The possibilities now opening up for the future of all children and adolescents are a herald of salvation.

Children and adolescents are a solution and not a problem for our sick society.

The UNICEF booklet The Fight for Childhood in the City describes the day the children marched on the national congress.

In Brasilia more than 5000 children met and some invaded the congress and presented their demands. João de Deus was one of the organizers of the meeting. “The day the children occupied the Senate was the most important day of my life,” he recalls. “They ducked under the arms and between the legs of policemen who tried to stop them. The Senate security tried to keep them out, but they got in every way they could. There was a session going on. The children made a statement denouncing the attitude of a judge who had tried to stop them meeting in Brasilia and denouncing the killings of children by justice committees in Recife. It was very strong. There were congressmen crying who gave up their seats to the children.” The children held hands around the Senate in a huge circle and hugged the building.”
WE KNOW A HEALTH WORKER . . .


We know someone who is a teacher and a health worker. She looks after two children. One is four and one is two. She keeps them safe. She carries the little one and picks him up when he cries. She protects the bigger one from accidents. Yesterday, when the little girl went too near the stove, she scolded her. Today she helped her to cross the road and taught her how to watch for the cars.

She helps them when they are sick. She makes them comfortable, brings them food, and keeps the flies away. Last month she saved the life of the little boy. He had diarrhoea and was very weak but she sat near him and gave him water through the day and long into the night. The little boy lived. Early in the year before the rains she noticed that the bigger girl had a sore on her leg. She took the girl to the medical post and the sore was cured.

She helps them to grow healthy. She feeds the little boy when he is hungry; she helps the little girl find sticks to clean her teeth. She teaches her songs to help her remember good health habits. She plays with the boy and she plays with the girl. As they play they learn to use their hands and bodies to try out things, to think of things, to imagine things. This teacher makes toys for them, invents games for them, and tells stories to them. She teaches them words and how to sew words together.

Who is this teacher who does so much for her pupils and does it so well? She is their elder sister—and she is eleven years old.

We know a group of community workers who know every inch of the village in which they work, who are accepted by everyone, who want to help their community, who will work hard (for short periods of time) and cheerfully (all the time). Last month the village health worker used them to collect information about which children had been vaccinated in the village. Next Tuesday some of them will help to remind the villagers that the baby clinic is coming and they will be at hand to play with the older children when mothers take their babies to see the nurse. Next month they plan to help the school teacher in a village clean-up campaign. These health workers are the boys and girls of the village.

WCC Photo: Peter Williams
Children in the village of Chocola, Guatemala.
Child-to-Child was launched in 1978 in preparation for the International Year of the Child in 1979. It is jointly sponsored by the Institutes of Child Health and Education of the University of London and based on the deep commitment of individuals within those institutes to three principles:

- the concept of primary health care; developing the power of individuals and communities to take responsibility for the betterment of their own health;
- faith in the power of children, as members of communities, to spread health messages to younger children, peers, families, and communities;
- a conviction of the need for joint action between education and health workers at every level to combine to promote such health education.

Thirteen years later, Child-to-Child has become a worldwide movement of individuals—from teachers and village health workers to presidents—who have faith in the power of children to be active partners in promoting health and who are committed to helping and encouraging them to do so.

Child-to-Child ideas and activities are now found in over 65 countries. They are used

- in formal schools and the communities they serve;
- in programmes for pre-school children—sometimes linked with primary schools;
- in teachers' colleges and the schools around them;
- with non-formal groups such as scouts, guides, and youth groups;
- with refugees and with street children;
- in medical and paramedical training programmes;
- in hospital and health centre programmes.

In fact, Child-to-Child ideas can be used wherever children gather together.

**Child-to-Child learning material**

A network of health and education workers worldwide are involved in spreading the ideas and producing Child-to-Child materials. New materials are generated in specific countries and then fed out through the network with London and Paris acting as clearinghouses for information (see addresses on page 13).

Child-to-Child materials are targeted mainly towards education and health personnel working with children of primary school age. Activities suggested aim to represent real health priorities in a community; to be those to which children can genuinely contribute; and to be interesting and enjoyable.

Health education materials are in the form of activity sheets, books and booklets, and videos, some of which have been translated into over 17 languages. In keeping with its desire to encourage more countries and agencies to
translate and adapt material for local use, Child-to-Child maintains most of its materials copyright-free.

The concept widens
As the ideas of Child-to-Child have been taken up and adapted by different projects around the world, they have changed and developed. The original idea was that older children could be encouraged to concern themselves with the health and development of their younger brothers and sisters and other young children. From the experience of the many different projects around the world, it is now clear that children can influence their friends and family, and, when they work as a group, the community. Child-to-Child, London has established a database on the experiences of projects using Child-to-Child materials around the world. The database is a growing pool of information on how ideas have been used and adapted, the languages into which they have been translated, the details of projects, what works, and what problems have been encountered in their use. A periodic newsletter keeps Child-to-Child network members informed of developments within the programme and the availability of new materials.

Recognition widens, too
Most recently, the Child-to-Child Trust was honoured with the UNICEF Maurice Pate Award for 1991, in “recognition of extraordinary and exemplary leadership in and contribution to the advancement of the survival, protection, and development of children.” As gratifying as such recognition may be, even more rewarding must be the evidence that Child-to-Child is helping to reduce illness and death among children. In accomplishing this, Child-to-Child learning materials remain straightforward and practical. And they touch something deep inside us in the way they value the care that human beings—however small—can provide to one another.

CARING FOR CHILDREN WITH DIARRHOEA

[This and the facing page contain extracts from two Child-to-Child activity sheets.]

The most important thing is to be sure that the child drinks as much liquid as he loses, from the time the diarrhoea starts. Rehydration is putting back into the child’s body the water that it has lost because of the diarrhoea and vomiting.

The best liquid is a Special Drink, called Oral Rehydration Solution. This drink can be made from packets of oral rehydration salts available from health centres and sometimes shops. But children can easily make the Special Drink themselves using salt, sugar and clean water, and so help to treat diarrhoea in younger children and babies.

How to Give the Special Drink. The Special Drink must be given as soon as the diarrhoea begins, that is as soon as the stools are watery and smell bad. Give a little at a time in sips from the glass or a spoon. Even if the child doesn’t want it, or spits or vomits, gently insist, and persuade him to drink it all a little at a time. The amount he vomits will be less than you have given him. Let the child rest after every five sips if he wants to. This may take some time, day and night, and older children can help their mother by taking turns during the night.

The Special Drink
Making the Special Drink. The Special Drink is very easy to make. For one glass at a time:

MIX: SUGAR + SALT + WATER

For larger quantities, mix EIGHT level teaspoonfuls of sugar, plus ONE level teaspoonful of salt, with ONE LITRE of clean water.

REMEMBER: BEFORE GIVING THE DRINK TASTE IT. IT SHOULD BE NO MORE SALTY THAN TEARS

If it is too salty, then throw it away, and make the drink again, using less salt. Make just enough for 24 hours. Next day, throw away any that is left over and make some more if necessary.

Ways of measuring the Special Drink may be a bit different from place to place. Find out from the health worker how mothers are taught to make the Special Drink. How do they measure the water, sugar and salt?
A PLACE TO PLAY

THE IDEA

Play helps children to grow and learn. When they play, they learn to use different parts of their body. They exercise their mind. They learn to share and cooperate with each other, and to use language. Many children need better places to play, especially in crowded towns, but also in country areas. Older children can help to make play places for younger children. They can find new places, or improve the place where children play already by making it safer and more interesting.

Older children can help organise play areas in different places:

- **at home** they can talk to mother and father about setting aside a special place for children’s play materials and equipment.
- **at school** they can discuss with the teacher or head teacher how to set up play areas. They can organise and help care for materials and equipment. They may be able to persuade the head teacher that the school grounds can be used as a neighbourhood play centre after school hours.
- **at clinics** and other meeting places, children can organise and care for equipment and materials for children attending the clinic.
- **In the neighbourhood**, they can look for sites which are safe, and which are suitable for children's play.

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Our school is in a crowded city area. It has three shifts, and there are always children in the playground behind the school waiting to go in, or waiting for brothers and sisters to come out. Last year, students in the Youth Service came and built a swing and a bridge, and some stepping stones. We liked them, but they got broken.

My friend Bambany and I went to see our head teacher. "Why don't we build a playground outside the school?" we asked. "It could have swings and poles and a play place for the little ones." The head teacher helped us and so did Bambany's father. They showed us how to build the equipment, and how to make it safe.

We built the play area for the younger children, and collected some things for them to play with. We take turns to look after the little ones after school. We organised a special play time for them on Saturday when school ends early. We have taught the younger ones to clear up and put things away in a box. Many children use our playground now.

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For more information on Child-to-Child or health learning materials available in **English and Spanish**, write to

**Child-to-Child**
University of London Institute of Education
20 Bedford Way
London WC1H 0AL
United Kingdom

For information on Child-to-Child or health learning materials in **French**, write to

Dr Elisabeth Dumurgier
L'enfant pour l'enfant
Institut Santé et Développement
15, rue de l'Ecole de Médecins
75270 Paris
France
RECLAIMING OUR RECREATION AREAS

The CREARQ Foundation, Colombia is an interdisciplinary group working for community development in the urban environment. CREARQ Foundation members promote, organize, or assist in the organization of initiatives to improve the quality of life in urban areas through the improvement of housing; the provision of technical assistance, training, and workshops; and the promotion of creative expression through cultural activities such as dance, music, and drawing. The CREARQ Foundation aims to promote self-management by stimulating an interest in psychosocial questions and by supporting activities that empower the community.

In his introduction to the article below, architect Hernando Carvajalino Bayona explains how he and his CREARQ Foundation colleagues—fellow architects and professionals from other sectors, including the medical—receive professional training that alienates them from the reality of the life in the poorer urban areas. Consequently, mistakes are the rule rather than the exception in the planning of urban housing, with the final result that housing does not correspond to the needs of the urban population.

The CREARQ Foundation offers alternatives to current architectural practices in the urban setting, but also works to promote a rebirth of creativity among the people themselves. One aspect of their work—which brings together both creativity and planning—is the development of recreation areas for children. CREARQ Foundation members Martha Isabel Guerrero Gonzalez, Jaidive Cardozo Buitrago, and Hernando Carvajalino Bayona explain below how CREARQ works.

If you walk through the big housing schemes in our cities it’s obvious that whoever planned them forgot that the children living there also have the right to play and in their games to dream of a pleasanter world. There are roads and buildings but no room for children to play. There are open spaces, but only because these are where it has been impossible to build.

The streets are one place where children can play. And there are still a few open spaces in the schools and public gardens that could be used as playgrounds. Valuable as the remaining free spaces are, they are often neglected and underused. They are even uninviting—dusty in the summer and muddy in the winter, just somewhere to go for want of a better alternative.

This is why in some places programmes like ours are working with the community to rehabilitate these recreation areas. We work together with the people, especially parents, children, and school teachers. Working together is very important, not only in building the play areas, which they do themselves, but also in the planning. The community has its own ideas to make its project better.

Community participation in the planning involves the parents, teachers, and children in workshops, facilitated by the advisory team. The participation process starts with a workshop for the sharing of ideas. Together we talk about what the children do at home, in the streets, or at school, so that we can begin to see what games might be best suited to their development. At this time, the facilitators also try to create awareness of the importance of play and creative activity in the development of the child—fundamental aspects of the child’s development that are often disregarded.

After that we go to the piece of ground where the playground is to be built and study all its features and details, to see what catches our attention. For example, we see that here we would like some slides, and there we could put a place for the children to sit and rest.

Next, at a second workshop, we look at slides or photos, or, if possible, we visit other children’s
parks to give us ideas. Then we start to imagine games that are different from the usual ones, to make our playground different from all the others. This is so that we can really feel that it is our own and that we have actually created it with our own imagination and work.

At a third workshop we continue working on the games and activities we devised during the second workshop, ironing out the details. We turn to practical considerations but without losing our imagination and creativity. At this time, we decide where we are going to place the different games in the playground. Eventually, we produce one or two project models.

Now it is time to put our words into action and move from the drawing board to the real thing. Our success will be a measure of our commitment to our children. Through our collective efforts, we are transforming neglected areas into places where our children can play creatively. So, too, our ideas could transform other parts of our city and improve our lives.
THE WORLD SUMMIT FOR CHILDREN—A GLOBAL EVENT


In September 1990 in New York, 71 world leaders gathered together with 80 representatives of the United Nations and major non-governmental organizations at the World Summit for Children. The event focused unprecedented public attention on the needs of children everywhere and reinforced the objectives of the Convention on the Rights of the Child (see page 14). It was the largest gathering of world leaders in history to address the death and suffering that affect infants and young children daily.

The Summit resulted in unanimous endorsement of a plan to address children’s needs. The major goals of the Plan of Action for Implementing the World Declaration on the Survival, Protection and Development of Children in the 1990s are:

- reduction of under-five child mortality rates existing in 1990 by one third or to a level of 70 per 1000 live births, whichever is the greater reduction;
- reduction of maternal mortality rates by half of 1990 levels;
- universal access to safe drinking water and to sanitary means of excreta disposal;
- universal access to basic education and completion of primary education by at least 80% of primary-school-age children;
- reduction of the adult illiteracy rate to at least half of its 1990 level (the appropriate age-group to be determined in each country), with emphasis on female literacy;
- protection of children in especially difficult circumstances, particularly in situations of armed conflict.

In relation to the World Summit in New York, mini-summits and events were held around the world. National and community meetings, seminars, workshops, parliamentary debates, and legislative action for children were brought to a close one week prior to the Summit with candlelight vigils around the world. An estimated 1 million people lit candles in a symbolic circling of the globe which started at dusk in Antarctica and New Zealand, followed by Australia and the countries of Asia, the Middle East, Africa, Europe, and the Americas. The vigils included music, dance, and prayer.

The message of the vigils was a challenge to the international community to act urgently to save the lives of an estimated 40,000 young children who continue to die needlessly every day from preventable causes. 

Photo: International Labour Office by J.P. Laffont/Sygma
World leaders at the summit promised to work for the special protection of the working child and for the abolition of illegal child labour (see facing page). Colombia, where these children live and work, was represented at the Summit.
THE WORLD SUMMIT FOR CHILDREN: THE COMMITMENT

A ten-point programme was adopted by the Summit participants. The ten points, enumerated in the World Declaration on the Survival, Protection and Development of Children, are given below.

1. We will work to promote earliest possible ratification and implementation of the Convention on the Rights of the Child. Programmes to encourage information about children's rights should be launched worldwide, taking into account the distinct cultural and social values in different countries.

2. We will work for a solid effort of national and international action to enhance children's health, to promote pre-natal care and to lower infant and child mortality in all countries and among all peoples. We will promote the provision of clean water in all communities for all their children, as well as universal access to sanitation.

3. We will work for optimal growth and development in childhood, through measures to eradicate hunger, malnutrition, and famine, and thus to relieve the suffering of millions of children in a world that has the means to feed all its citizens.

4. We will work to strengthen the role and status of women. We will promote responsible planning of family size, child-spacing, breast-feeding, and safe motherhood.

5. We will work for the respect for the role of the family in providing for children and will support the efforts of parents, other care-givers and communities to nurture and care for children, from the earliest stages of childhood through adolescence. We also recognize the special needs of children who are separated from their families.

6. We will work for programmes that reduce illiteracy and provide educational opportunities for all children, irrespective of their background and gender; that prepare children for productive employment and lifelong learning opportunities, i.e. through vocational training; and that enable children to grow to adulthood within a supportive and nurturing cultural and social context.

7. We will work to ameliorate the plight of millions of children who live under especially difficult circumstances—as victims of apartheid and foreign occupation; orphans and street children and children of migrant workers; the displaced children and victims of natural and man-made disasters; the disabled and the abused, the socially disadvantaged and the exploited. Refugee children must be helped to find new roots in life. We will work for the special protection of the working child and for the abolition of illegal child labour. We will do our best to ensure that children are not drawn into becoming victims of illicit drugs.

8. We will work carefully to protect children from war and to take measures to prevent further armed conflicts, in order to give children everywhere a peaceful and secure future. We will promote the values of peace, understanding, and dialogue in the education of children. The essential needs of children and families must be protected even in times of war and in violence-ridden areas. We ask that periods of tranquillity and special relief corridors be observed for the benefit of children, where war and violence are still taking place.

9. We will work for common measures for the protection of the environment, at all levels, so that all children can enjoy a safer and healthier future.

10. We will work for a global attack on poverty, which would have immediate benefits for children's welfare. The vulnerability and special needs of the children of the developing countries, and in particular the least developed ones, deserve priority. But growth and international cooperation need promotion in all States, through national action and international cooperation. That calls for transfers of appropriate additional resources to developing countries as well as improved terms of trade, further trade liberalization, and measures for debt relief. It also implies structural adjustments that promote world economic growth, particularly in developing countries, while ensuring the well-being of the most vulnerable sectors of the populations, in particular the children.
The Convention on the Rights of the Child—

Questions from the Street

Adapted from an article by Canon Joseph Moerman, Chairman of the Informal NGO Group on the Drafting of the UN Convention and reproduced by permission from the publication of the International Catholic Child Bureau "Children Worldwide" (3/1989).

Why a Convention when we already have a Declaration?

A Convention and a Declaration are two entirely different documents. The Convention does not replace the Declaration, which remains a moral obligation to all. The present text of the Convention is legally binding and much more extensive than that of the Declaration.

Are we creating children's rights that are opposed to, or at least distinct from, human rights?

Children's rights are none other than the human rights of children. If by children's rights we wish to establish a special corpus of law it is because, of all human beings, children are considered to be minors and are thus in the weakest position to assert their rights.

Will the Convention prejudice the authority of parents?

A line must be drawn between the extension of rights of parents and the respect for the authority of parents. The authors of the Convention have no intention of undermining the respect and recognition of parental authority. This is stated in a number of passages, such as "States Parties shall respect the responsibilities, rights and duties of the parents . . . " (Article 12.2). Article 18 quite clearly states that the upbringing of children "is the primary responsibility of the parents." If in some countries the rights of parents are expressed more formally and if this legislation is compatible with the greatest well-being of the child, this must be respected within the same spirit as the Convention, which states that for any decision affecting children "the best interests of the child shall be a primary consideration" (Article 3.1).

Is it possible to lay down an international instrument that could be applied in all countries, given differences in culture, legal traditions, and levels of development?

One could ask this question of all United Nations' directive literature. As to rights and values there are common factors affecting all adults and children, as human beings. The Convention is limited to these universal rights and takes care not to use terminology or formulations based on one form of culture to the detriment of another.

In what way does the Convention affect me?

The Convention concerns every child and therefore at least every citizen who is a parent. Practically all parents are concerned about their own children, and there are not many who are indifferent to the cause of children as a whole.

Every citizen will have an interest in working in favour of this Convention. We know that governments take right and speedy action only if they know that this is in response to the desire of the population—which is the case of the Convention.

But governments must be made aware. This is why the public must be made conscious of the stakes involved so as to make itself felt and thus put pressure on the authorities.
CHILDREN'S RIGHTS NEED INTERNATIONAL PROTECTION

Children's Rights Need International Protection. A pamphlet explaining why and how it can be done has been produced by the United Nations Centre for Human Rights and UNICEF. The pamphlet introduces the Convention on the Rights of the Child. The Convention is a set of international standards and measures that recognizes the particular vulnerability of children and brings together in one comprehensive code the benefits and protection for children that were previously imbedded in many other agreements on human rights. It also adds new rights never before recognized. The Convention covers four broad areas:

- survival rights
- development rights
- protection rights
- participation rights.

Drafting of the Convention on the Rights of the Child began in 1979, involving governments, UN agencies, and some 50 non-governmental organizations. It continued for ten years. The result is now an historic treaty with wide support. However, it remains to be ratified and implemented.

To be sure that children all over the world really are able to exercise their rights, governments and the public must be convinced that it is an important step for them to support the implementation of the Convention on all levels. Individuals and organizations can help by:

- joining local child welfare organizations; creating a coalition of such organizations to promote the Convention;
- persuading churches; civic clubs, professional associations; women's and youth groups; political parties and voters' leagues; parents and teachers associations; medical societies; charities and foundations to discuss the issues involved and demand action on Convention provisions;
- finding out what is happening in your country and keeping the media supplied with information about the Convention;
- explaining to others what the Convention can do for children and why it needs their support.

Further information and copies of the pamphlet (available in English, French, and Spanish) may be obtained by writing to UNICEF Palais des Nations 1211 Geneva 10 Switzerland or UNICEF Division of Public Affairs UNICEF House 3, UN Plaza New York, New York 10017 USA
BUSINESS COMES FIRST

A recent survey, carried out in Germany by a consumer organization, has led to the following conclusion: information on drugs and advice provided at local pharmacies are inadequate.

Patients most frequently seek advice for self-medication in the treatment of common ailments such as headache or constipation. But often, when given a drug, they are not given the necessary information to go with it, for example on side-effects, the risks involved in long-term use, or simply general counselling. "Business comes first" was the overall impression.

If such a survey had been conducted in a developing country, the findings would be, no doubt, even less favourable. Professional staff in pharmacies in developing countries are rare, regulatory authorities are understaffed and therefore weak, and a vast quantity of drugs, including those that should be given only under supervision, are freely available in shops and markets.

Nonetheless, pharmaceutical companies continue to export a wide range of questionable drugs to developing countries. A recent study of the drugs marketed in 1988 in developing countries by Swiss and German pharmaceutical companies found that a large proportion of these products (60% marketed by German companies and 48% by Swiss) are ineffective or otherwise inappropriate, and the use of some carries unacceptable risks (Hartog and Schulte-Sasse). Classification was made on the basis of the criteria used to determine rational drug therapy, which disqualifies irrational combinations of drugs and drugs of dubious efficacy and high risk for which safer alternatives exist.

Another disturbing study finding was the high proportion of drugs that had been withdrawn in the country of origin for safety reasons, but which continued to be marketed in the developing world.

The study underlines the need for export controls in producing countries and serves as a reminder to health workers and prescribers to follow the principles of the WHO essential drugs concept as a basis for rational drug therapy.

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International Catholic Child Bureau

Among the organizations working in the interest of children around the world is the International Catholic Child Bureau (ICCB). Founded in 1949, ICCB provides a means whereby organizations concerned with children’s welfare can join at the international level to coordinate their efforts.

ICCB is active in more than 40 countries, and in its programmes takes into account four essential dimensions of work with children—spiritual growth, the family, intercultural understanding, and the rights of the child. Through its activities, ICCB promotes the health education programme Child-to-Child and other programmes, including those to meet the needs of children who are refugees, handicapped, on the street, sexually exploited, or suffering from drug abuse. Other programme areas are children and media, intercultural training of educators, and medico-educational and psycho-social care. Its international programme for street children was started in 1982. The International Year of the Child (1979) was an ICCB initiative.

ICCB’s international review, entitled Children Worldwide, is published three times a year in English, French, and Spanish. For further information on ICCB or on how to subscribe to Children Worldwide, please contact:

ICCB (for information in English and French)
65 Rue de Lausanne
1202 Geneva
Switzerland

or

BICE (for information in Spanish)
Av. 8 de octubre 2738
Montevideo
Uruguay
USEFUL RESOURCE MATERIALS

World Neighbors is an organization working to promote food production, community-based health, family planning, water and sanitation, environmental conservation, and small business in the developing world (see Contact No. 118). About 20 years ago, people involved in World Neighbors programmes identified the lack of relevant and low-cost teaching materials as a major hindrance to education as well as communication in development programmes. The organization responded to this need by committing resources, staff, and time to the production of teaching materials. Staff work directly with local programme personnel to develop ideas, write scripts, and produce photographs and drawings.

The result is a collection of low-cost materials—filmstrips, videos, printed materials (including case studies, booklets, flip charts, manuals, pamphlets, and posters), and viewing equipment—adapted for local use. Filmstrips, for example, are available in English, French, Spanish, Hindi, or Portuguese, depending upon the subject matter and intended audience.

If you are involved in community-based development work, you may wish to see what World Neighbors has to offer. A catalogue or further information can be obtained by writing to

World Neighbors
5116 North Portland Avenue
Oklahoma City, OK 73112
USA

A Healthy Business? World health and the pharmaceutical industry by Andrew Chetley

This book tells the story of how the pharmaceutical industry—once thought to offer easy solutions to the world’s health problems—has fallen into disrepute. The once-praised industry is now criticized for its neglect to develop the drugs most needed by the world’s poor, its willingness to rush “powerful new” products onto the market, and its use of promotional strategies that result in an irrational use of drugs worldwide.

A Healthy Business? traces the campaign for a more sensible use of drugs and analyzes the forces working for and against these efforts. The World Health Organization essential drugs concept—based on a list of some 250 drugs considered essential—was naturally strongly opposed by industry. Nonetheless, numerous developing countries are trying to make rational drug policies work. Industrialized countries, too, are moving away from drug-intensive treatment to more holistic health care.

How is the industry responding to these pressures? Is a profitable pharmaceutical industry compatible with a healthy world? In answer to these questions, A Healthy Business? draws upon thorough research and strong advocacy for justice in health.

Available in paperback (ISBN 0 86232 735 0) at £9.95 or US$15 from bookshops or direct from

Zed Books
57 Caledonian Road
London N1 9BU
United Kingdom

Confronting Ill Health—Medicines, Self-care and the Poor in Manila by Anita Hardon

The book describes the role of pharmaceuticals in self-care in two urban poor communities in Metro Manila, one with a community-based health programme and one without. The author analyzes ideas on drug use, including concepts of what causes illness, drug efficacy, and criteria for choice of therapy. Findings are then related to the pharmaceutical environment at the community and national levels. Also
discussed are drug promotion in the mass media, the implications of health care programmes that provide free drugs, and the consequences of easy availability of drugs in community stores.

The author assesses the Philippines' National Drug Policy in relation to problems in the community and evaluates attempts of NGOs to rationalize drug use. Useful warnings are provided on the limitations of "alternatives" to drugs, such as medicinal plants.

The study that resulted in the book involved participatory research, and the author gives suggestions for community-based research that can provide feedback to the community.

*Confronting Ill Health* (ISBN 971 8508 100 4) is available at US$25 in developed countries, at 150 PH pesos in the Philippines, and at US$15 in other developing countries. Please write to:

Medische Antropologie
Vakgroep CANSA
Antropologisch Sociologisch Centrum
Universiteit van Amsterdam
Oudezijds Achterburgwal 185
1012 DK Amsterdam
Netherlands

or

Health Action Information Network
P.O. Box 10340, Broadway
Quezon City
Philippines

Assessing District Health Needs, Services, and Systems—Protocols for rapid data collection and analysis by A.A. Kielmann, K. Janovsky, and H. Annert

Starting with the premise that "the health needs of the community should determine the nature of the health care system," this manual takes health professionals through an assessment of health needs, services, and systems. It will be appropriate in a variety of situations, though more particularly at district level, enabling health personnel to assess to what extent the health service is meeting the needs of the community, by a process of rapid data collection and analyses.

The main part of the manual is a well arranged series of questionnaires, designed for photocopying for field use and giving clear instructions and cross references. A guide to analyses of the data and report writing is included.

We strongly recommend this excellent manual as an important tool for health service and community leaders, consultants, and donors.

Available at £6.99 from the publisher:

Macmillan Education Ltd
Houndmills
Basingstoke
Hants RG21 2XS
Hampshire
United Kingdom

CONTACT is the periodical bulletin of the Christian Medical Commission (CMC), a sub-unit of the World Council of Churches (WCC). It is published six times a year in English, French, and Spanish. Selected issues are also published in Portuguese in Geneva, Kiswahili in Kenya and Tanzania, and Arabic in Egypt. Present circulation exceeds 35,000.

CONTACT deals with varied aspects of the community's involvement in health and seeks to report topical, innovative, and courageous approaches to the promotion of health and integrated development. A complete list of back issues is published in the first annual issue of each language version. Articles may be freely reproduced, providing that acknowledgement is made to CONTACT, the bi-monthly bulletin of the Christian Medical Commission of the World Council of Churches.

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