

Child Development Centers: An Emerging Need in India

PANNA CHOUDHURY

*National IAP President 2009 and Consultant Pediatrician,
Maulana Azad Medical College and Lok Nayak Hospital, New Delhi 110 002, India.
Email: pannachoudhury@gmail.com*

Acquisition of 'new skills and functions' is central to evolution of an individual as it is to the species. Extent of influence of genetic and environmental factors, especially the latter, is coming to the fore as never before. Increasing incidence of miraculous salvaging of very low birthweight babies has increased the incidence of developmental delay and deviances. Increasing awareness about biological and environmental basis of speech and language delays spans the entire gamut from elective mutism to autism to learning disabilities. Conservative estimates place incidence of school failure at 25–30%, a large proportion attributed to learning disability. Social restructuring within families and extensive and early media exposure has blown the incidence of behavioral disorders to an unappreciated extent.

EARLY INTERVENTION

Early intervention refers to a systemic and planned effort to promote development through a series of interventions aimed at modifying the interaction between children and their immediate environment, initiated during the initial years of life to have a worthwhile effect. It requires multidisciplinary services provided to developmentally disabled children and their families, and is aimed at detection of delays, minimization of potential delays, remediation of existing problems to prevent further deterioration, in addition to providing counseling and support to the child and the family. India is a thriving economy with a gargantuan population in the throes of unprecedented socioeconomic and developmental agitation. Prevalence of children

requiring attention has increased manifold. Early intervention has shown tremendous potential in decreasing the ultimate burden of affectation and reduced expenditure to the exchequer, by reducing the need for rehabilitative services for future disabilities. However, there is still a need for simple cost effective community models for promoting early child development.

CHILD DEVELOPMENT CENTERS (CDC)

An ideal CDC has the following components:

- (i) monitoring,
- (ii) assessment,
- (iii) early intervention,
- (iv) therapy,
- (v) integration,
- (vi) research, and
- (vii) community/social application.

Comprehensive and Integrated management are the keystones of a successful CDC.

CDCs with an integrated approach where a central member of the team, preferably the pediatrician, coordinates the effort for the child and an in-house, "under one roof" approach not only allows for greater compliance, but also significantly improves the quality of care. The outcome can scarcely be that effective with an uncoordinated, individually given therapy, where it is impossible for the therapists to function in a coordinated and "child – centric manner".

ARE CURRENT RESOURCES ADEQUATE?

The biggest single problem with developmental services is the lack of adequately trained resource persons. The urgent need is for capacity building with an ingrained inclination towards a TEAM intervention. Setting up of colleges and infrastructure to provide this human resource is the greatest challenge at the moment.

WHAT WE HOPE TO ACHIEVE?

Creating enough awareness about child developmental and behavioral concerns in academic circles is of paramount importance in fostering this much needed renaissance in the country. Guidelines towards integrated management will go a long way

in promoting setting up of indigenously developed CDCs across the country. Appreciating the need for qualified human resource, which is unlikely to come from outside the system and in an effort aimed at the capacity building of personnel working in the field of early child development, CDC Kerala is at the forefront of teaching and training activities at all levels.

In India, a feasible and sustainable model for early developmental intervention would be through community owned early child care and development facilities, preferably within the ambit of current national programs viz., NRHM, ICDS and the Sarv Shiksha Abhiyan. We hope that this supplement is the initial step towards this long journey.

