





Our Mission

To encourage and enable children and young people to promote the holistic health, well-being and development of themselves, their families and their communities worldwide.

What is Child-to-Child?

Child-to-Child is a rights-based approach to children's participation in health promotion and development. Through participating in Child-to-Child activities the personal, physical, social, emotional, moral and intellectual development of children is enhanced. The Child-to-Child approach is an educational process that links children's learning with taking action to promote the health, well-being and development of themselves, their families and their communities.

Child-to-Child: A Rights-Based Approach

The Child-to-Child approach is grounded in the United Nations Convention on the Rights of the Child (CRC). It is a practical way in which children's rights can be effectively implemented. It addresses children's right to survival, protection, development and participation. The Convention's guiding principles of inclusion, non-discrimination and being in the best interests of the child underpin the Child-to-Child approach. We believe in a child's right and responsibility to participate in health and education as well as their right to play.

The Child-to-Child International Network

The Child-to-Child approach has been successfully implemented since 1978. Education, Health Promotion and Community Development Programmes using the approach are active in over 70 countries. In order to strengthen the international network, resource groups based in India, Kenya, Lebanon, London (UK) and Pakistan have come together to contribute their thematic expertise and experience of capacity building in training, materials development, research and advocacy. This new initiative is being supported by Comic Relief.





Photo Aga Khan Foundation / Jean-Luc Ray

'When I helped in deciding what we should do to improve things I felt important!'
10-year-old girl, South Africa



'Child-to-Child activities help children become freedom fighters for health.'

Kenneth Kaunda, former President of Zambia

Our Principles

Programmes using the Child-to-Child approach should:

- View health in the wider context of physical, mental, emotional, social, moral and environmental well-being and not merely the absence of disease or infirmity (WHO).
- Recognise the role of children as citizens and community members in contributing to the health and development of themselves and others.
- **Engage** children in active learning so that their critical thinking and life skills are developed.
- **Be inclusive** and involve as many children as possible without selection or exclusion on the basis of gender, disability, ethnicity or religion.
- **Facilitate** the building of an enabling environment for the fulfilment of children's rights, participation and protection.
- **Encourage** children to work cooperatively to find solutions that are safe and helpful for themselves, their families and communities.
- Ensure that adult facilitators work in responsible ways with children protecting them from any actions that may physically, emotionally or socially put them at risk.
- **Appreciate** that the participation of children should be sensitive to the evolving capacities of children.

Our Characteristics

The Child-to-Child approach:

- Respects children's views and voices to enable them to grow into responsible adults.
- Advocates for children's active participation that links learning with living and promotes reflection.
- **Facilitates** children's understanding of development issues and why healthy behaviours are important.
- **Includes** relevant, do-able and fun activities that promote life skills, confidence and self-esteem.
- **Encourages** children to take ownership and identify health and development priorities relevant to themselves and their communities.
- Develops children's decision-making and problemsolving abilities in order to take action on identified priorities.
- Develops children's ability to communicate, empathise and cope with difficult circumstances.
- Recognises children's capacities as change agents, who require the facilitative support but not the dominance of adults.
- **Ensures** that the personal development and gains of the children implementing activities are as important as those of children with whom they are working (e.g. older children working with pre-schoolers).

Child-to-Child is MUCH MORE THAN

- One child helping another child
- Older children passing on health messages to younger children
- An approach to Peer Education
- A one time activity

Child-to-Child IS NOT about

- Children being asked to act as loudspeakers for adults
- Children being used to do things adults do not want to or should do
- Richer children helping poorer ones
- A few children being put into positions of authority over their peers (e.g. as "little teachers")



Child-to-Child approaches to learning and action

The Child-to-Child approach links children's learning (in or out of school) with their lives (home and community) so that knowledge translates into behaviour and action.

The Child-to-Child matrix shows how a child or children can participate in health and development. Group activities should be integral to the Child-to-Child approach.

One child A group of children

- spreading knowledge to
- teaching skills to
- demonstrating by example to
- working together with

- younger child/children
- a same-aged child/children
- a family/families
- the community

'Children who are healthy are happy and learn better!'

Anita Ghulam Ali, Former Sind Education Minister, Pakistan



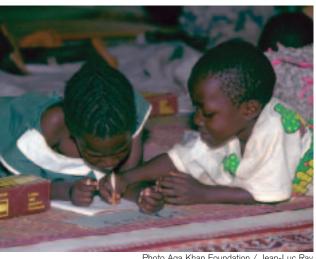


Photo Aga Khan Foundation / Jean-Luc Ray

What we can do for you

We have resource materials on all areas of *Facts for Life*:

- Timing Births, Safe Motherhood and Sexual Health
- Child Development and Early Learning
- Breastfeeding
- Nutrition and Growth
- Immunisation
- Diarrhoea
- Coughs, Colds and more serious illnesses
- Hygiene
- Malaria
- HIV and AIDS
- Injury Prevention
- Including Children with Disabilities
- Disasters and Emergencies

Our materials are copyright free and we encourage others in the network to use, translate, adapt and share them. Please share copies of the materials with the Child-to-Child Trust.

Materials are available from resource groups as well as TALC-Teaching Aids at Low Cost.

Tel: +44 (0) 1727 853869 Fax: +44 (0) 1727 846852 E-mail: talcuk@talcuk.org Website: www.talcuk.org

What you can do for us

Through its distinctive method of operation the Trust achieves enviable results on a very low budget. More could be achieved with additional resources. You can support the work we do with your donations (cheque only) which can be sent to:

Child-to-Child Institute of Education 20 Bedford Way London WC1H 0AL

Tel: +44 (0) 20 7612 6648
Fax: +44 (0) 20 7612 6645
E-mail: ccenquiries@ioe.ac.uk
Website: www.child-to-child.org

Registered Charity Number 327654

Please do not hesitate to contact us if you would like to discuss ways in which your donations could help our work. Thank you for your generous support.

	3
	=
	4
	Q
	4
	귤
	E
	9
	3
	T T
	Ä
	ā
	듯
1	ĭ
	Ø
	ô
	Ś
	2
	7
	Child-to-Child International Resource Groups
	6
	4
	2
	늉
	Š

Policy development and advocacy on children's participation	 Policy development 	needs basis			
Developing, producing and disseminating health education materials Sharing and promoting experience based learning and action research	₽ • •	Our Services, Our Role: Capacity building for planning, implementing and evaluation of education, health and community development programmes incorporating Child-to-Child activities Facilitating international short courses and training on a	Tel: +44 (0) 20 7612 6648 Fax: +44 (0) 20 7612 6645 E-mail: ccenquiries@ioe.ac.uk Website: www.child-to-child.org	Health Promotion/Health Education Development of Core Materials for Education and Training	CTC Trust (Child-to-Child) UK
E-mail: kenaids@iconnect.co.ke Website: www.kanco.org		1	22866b13 E-mail: chetha@icenet.net Website: www.chetnaindia.org		СНЕТРИВ
Tel: 00 254 202717664/ 2715008 Fax: 00 254 202714837	HIV/AIDS in both school and community contexts	KANCO (Kenya Aids NGO HIV/A Consortium) commi Kenya	Tel: 009 179 22866695/ 22113005/22149938 Fax: 009 179 22113005/	Early Childhood Care and Development Adolescents' Health	CHETNA (Centre for Health Education, Training and Nutrition Awareness) India
nail: osite:		th Action Schools) (U-IED, Pakistan	nail: bsite:	Inclusive Education Adolescents' Health Early Childhood Care and Development	Lebanon
Contact Information Tel: 92 21 634 7611-4	Thematic Expertise Health Promotion in Schools	Resource Group Them HAS Health	Contact Information Tel: 00 961 1 742075	Thematic Expertise Children Affected by Conflict	Resource Group ARC (Arab Resource Collective)
		onal Resource Groups	Child-to-Child international Resource Groups		



'I now see children in terms of what they CAN do rather than what they cannot.'

Class 3 Teacher, Uzbekistan

The Child-to-Child Step Approach: A Health Action Methodology

Using a series of linked activities, or 'steps', children think about health issues, make decisions, develop their life-skills and take action to promote health in their communities, with the support of adults.

Choose and Understand

Children identify and assess their health problems and priorities.

Find out More

Children research and find out how these issues affect them and their communities.

Discuss what we Found and Plan Action

Based on their findings children plan action that they can take individually or together.

Take Action

Children take action based on what they planned.

Evaluate

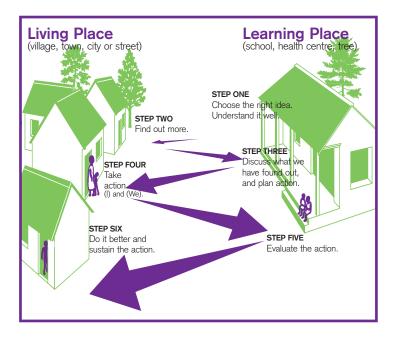
Children evaluate the action they took: What went well? What was difficult? Has any change been achieved?

Do it better

Based on their evaluation children find ways of keeping the action going or improving it.

Different projects have developed different models with different numbers of steps. There is no "right" number of steps. What matters is that there is a sequence of activities which enables children to understand the issues around them and promote health and well-being.

Whilst the activities are frequently initiated by or with children, adults are available for support. Increasing participation is a slow and phased process upon a continuum from children's active involvement to children directing initiatives.











Our Current Thematic Areas

Since its inception, Child-to-Child approaches have contributed greatly to key health activities in hygiene, water and sanitation and disease prevention but currently particular thematic areas have also been identified where the approach is seen to have a great and lasting impact such as:

- Health Education and Promotion in Schools.
- Early Childhood Development.
- Children in communities affected by HIV/AIDS.
- Adolescent Reproductive and Sexual Health.
- Inclusive Education.
- Children in Difficult Circumstances.

Influencing Policy & Practice

Lessons and action research from Child-to-Child have been used to advocate for children's participation as well as influence policy in the area of health promotion. Examples included establishing health education as a part of national curricula; contributing to alternative community school programmes as in Zambia and Bangladesh; and working with and contributing to major health and development programmes supported by international NGOs such as Water Aid, Save the Children, the Aga Khan Foundation, Plan International as well as UNESCO, WHO and many others.

Child-to-Child enriches and is enriched by other initiatives:

- Millennium Development Goals
- Education For All (EFA)
- Health for All
- Focusing Resources on Effective School Health (FRESH)
- Health promoting schools programmes regionally and internationally
- Facts for Life



Photo Aga Khan Foundation / Jean-Luc Ray

Child-to-Child ultimately contributes a new, effective, revolutionary idea to educate the people and the community to lead a better, healthier life through children.

Citation of UNICEF's Maurice Pate Award, 1991