

## The Partnership for Child Development



## Who are we?

- A global consortium of civil society organizations, academic institutions and technical experts
- A Coordinating Centre based within the Department of Infectious Disease Epidemiology at Imperial College, London



## What is our goal?

- To improve the educational achievement of children, especially girls, through national programmes that enhance the health, nutrition and psychosocial status of children in low and middle income countries.



## How do we seek to achieve this?

1. Strengthen the evidence base about school health, nutrition and HIV prevention
2. Strengthen the capacity of the education sectors in low and middle income countries
3. Improve, collect, share and disseminate knowledge
4. Strengthen global, regional, national and local partnerships



## How do we work?

- PCD engages specific experts, in specific countries, on specific issues, as and when required
- We bring together a distinct combination of academic excellence, technical expertise and high level networks to governments and international organizations, resident in many different countries
- We are not an implementing agency!!



## Our Unique Position

*Academic excellence, technical expertise and high level networks: a unique partnership for all*



## The evidence base for school health, nutrition and HIV prevention programmes

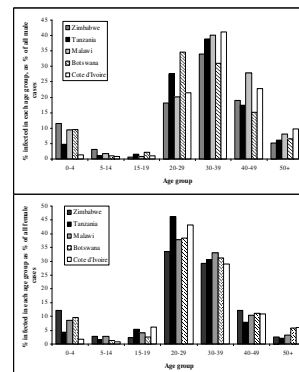


## The basic intervention package



## Global impact of ill health on education

	Prevalence	Total Cases (millions)	IQ points lost per child	Additional cases of IQ < 70 (millions)	Lost years of schooling (millions)
Worms	30%	169	3.75	15.8	201
Stunting	52%	292	3	21.6	284
Anaemia	53%	298	6	45.6	524



## A WINDOW OF HOPE?

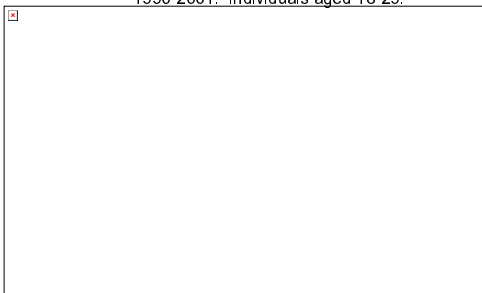


source: UNAIDS



## A Social Vaccine?

HIV prevalence by education category, Rural Uganda, 1990-2001. Individuals aged 18-29.



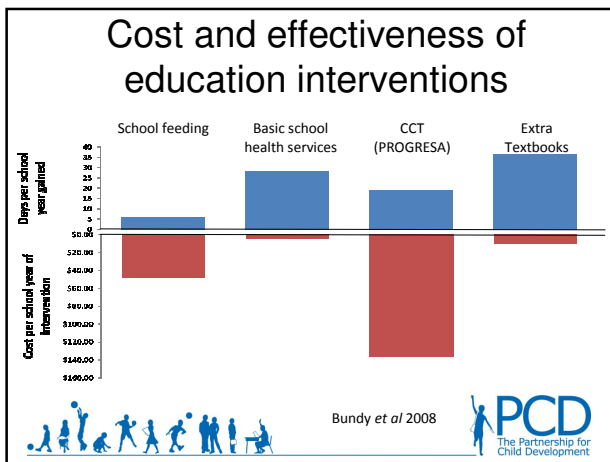
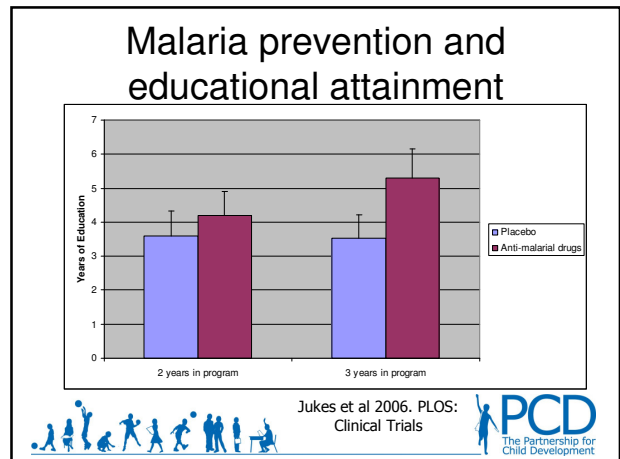
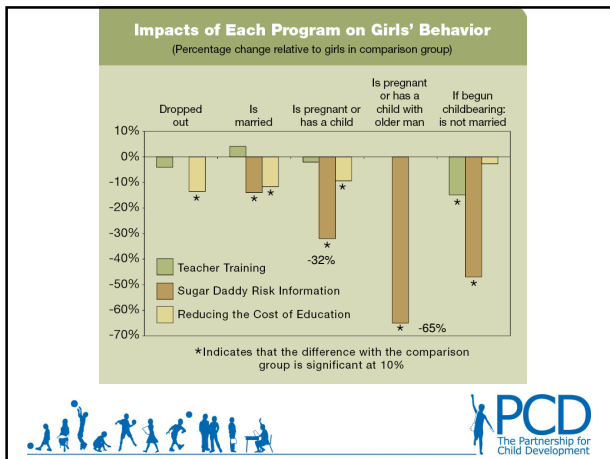
De Walque and J. Willworth, MRC Uganda (2002)



## Effect of increasing education levels on HIV transmission

- The 36% of young adults in low-income countries without a complete primary education will experience 55% of new infections: 700,000 a year (Global Campaign for Education, 2004)
- One year of education leads to a 6.7% (Uganda) or 7% (South Africa) reduction in likelihood of acquiring infection. (De Walque, 2002; Barnighausen et al 2007).





### Cost-effectiveness of education interventions

	School Feeding	Basic school health services	CCT (PROGRESA)	Extra Textbooks
Cost per school day gained	\$8.03	\$0.14	\$7.21	\$0.27

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### A **FRESH** Framework:

Consensus organizing principles for planning School Health & Nutrition Programs

- **Policy:** for health, HIV/AIDS, hygiene and nutrition in schools
- **Environment:** safe and hygienic for all schools
- **Education:** skills-based for health, hygiene and nutrition
- **Services:** school-based for health and nutrition

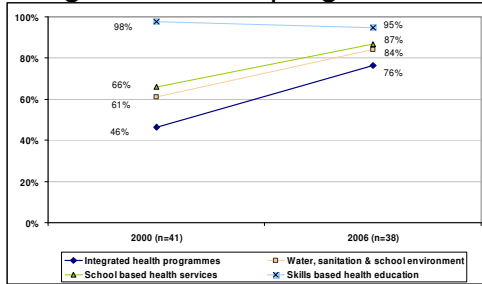
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### FRESH as an international education partnership

- Launched at the Global "Education for All" Forum in Dakar, Senegal April 2000
- WHO, UNICEF, UNESCO, World Bank & Others

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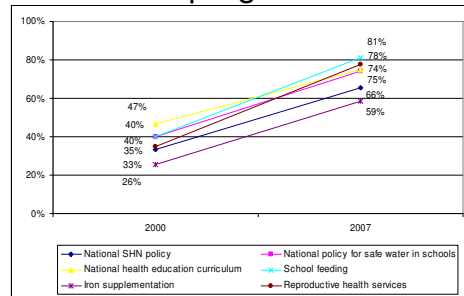
## Organisations are moving towards integrated health programmes



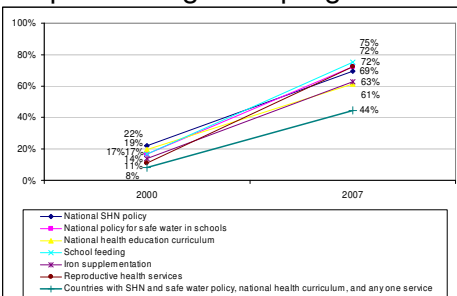
Source: Partnership for Child Development (2007) Directory of Support to School-Based Health and Nutrition Programmes. Updated Survey 2006



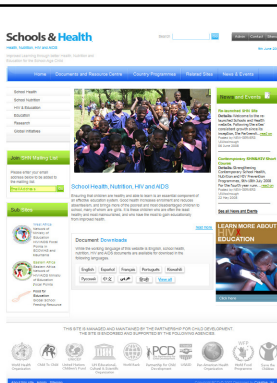
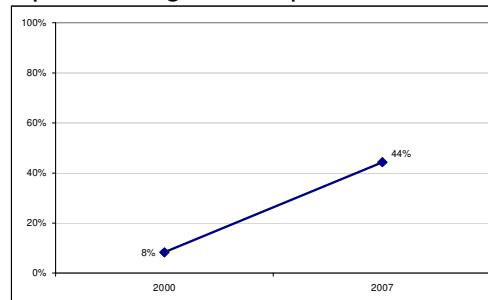
## Country level implementation of SHN programmes



## Countries from sub-Saharan Africa implementing SHN programmes



## Countries from sub-Saharan Africa implementing all four pillars of FRESH



For more information, please visit:

[www.schoolsandhealth.org](http://www.schoolsandhealth.org)

