Foreword

The honourable First Lady, Doctor Tshepo Motsepe

This issue of the South African Child Gauge makes a powerful case for investing in child health. The science is clear. If we want to promote cognitive development, break the intergenerational cycles of poverty and violence, and halt the growing epidemic of obesity and non-communicable diseases, we need to invest early – starting in the first 1,000

days of a child's life and continuing into adolescence. Investments during these two sensitive periods of development, yield the greatest returns.

These benefits extend across life. By building a strong foundation early in life, we improve the health of children today, the adults they will become tomorrow, and the health and development of their children and their children's children.

Over the past 25 years we have made good progress. Yet South Africa remains a deeply divided country. While some children flourish, the majority of South Africa's children grow up

in communities where poverty, hunger and violence continue to compromise their health, development, education and future employment prospects.

We have to ensure that no child is left behind, and that all of South Africa's children not only survive but thrive and reach their full potential. We have to realise children's constitutional right to basic health care services. We must define a clear package of basic health care services for children and adolescents – rooted in the best available evidence and responsive to local needs.

Emphasis has to be placed on providing quality preventative health care close to home. These services need to extend beyond the treatment of illness and injury, to promote children's optimal health, growth and development - including mental health and healthy relationships. This requires strong leadership for child health at the district level and teams of community health workers who can bridge the divide between clinics and children's homes.



Children, adolescents and their families have to be treated with care, dignity and respect. When we take the time to listen, keep them informed, and include them as active partners in health, this simple act of communication helps build a relationship of trust and relieves children's pain, fear and distress. It also helps improve patient outcomes

> and compliance with treatment and lies at the heart of a child- and adolescent-friendly health care system.

> We have to recognise that health professionals have a responsibility for child health that extends beyond the walls of their clinic or hospital. We need to get to know where children come from and who they live with. We should understand the challenges they face, and put care plans in place that build on existing strengths in order to promote and safeguard children's health when they return to their homes, schools and communities.

We have to build strong partnerships to

address the upstream determinants of health. This means health workers need to engage with their counterparts working in ECD centres, schools, youth development and job creation programmes. Families should be assisted to access birth certificates and social grants and assisted by lobbying local government to improve access to water and sanitation. Working with civil society organisations advocating for the regulation of fast foods and sugary beverages will address the epidemic of obesity and life style diseases. In this way we can start to build safer, healthier communities and a strong network of care and support for children and families.

Child health is everyone's business. Each one of us has the potential to make a difference. We need strong leadership and advocates for child and adolescent health; from the highest level of government down to grassroots levels where doctors, nurses, teachers and social workers have a critical role to play together with children and adolescents themselves. Working in unison we will achieve our goal.