



7th International Conference on Intercultural Education “Education, Health and ICT for a Transcultural World”, EDUHEM 2016, 15-17 June 2016, Almeria, Spain

Design of a child development baseline (children aged 0 to 6 years) in Bolivia

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Abstract

In this paper, we describe the design of a baseline to set the values of child development in Bolivia, for children between birth and six years of age. It details the process of design and definition of the objectives of the baseline, and its methodological and operational aspects in relation to child development. Having the baseline of child development of Bolivian children up to six years old, by applying instruments adapted to the social, cultural, linguistic and family context of Bolivia, will be very useful since these development data can be used to compare them with international standards of child development commonly accepted, which is not possible at present. Moreover, establishing the baseline of child development in Bolivia will allow to compare the data currently obtained with those obtained by applying other not contextualized developmental scales commonly used in the country, such as the Abbreviated Scale Development Nelson Ortiz, the Ages & Stages Questionnaire (ASQ), Battelle Development Inventory or the National Screening Test (PRUNAPE).

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Peer-review under responsibility of the organizing committee of EDUHEM 2016.

Keywords: Development Measurement, Child Development; Contextual Effects; Tests.

1. Introduction

In this paper we present the methodological design for the elaboration of the baseline on child development from 0 to 4 years in Bolivia. The focused areas of study are: Personal / social; Adaptive; Motor; Communication; and Cognitive areas. The study was developed during 2015 in two departments of Bolivia: Chuquisaca & Potosí. For this

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we have used as institutional references, the proposals of the Chilean Ministry of Health (Universidad Alberto Hurtado, 2009) and the Garrahan Hospital of Argentina (Lejarraga et al, 2013).

2. Objectives

The aim of the fieldwork is to establish the baseline of developmental delays in children aged 0 to 4 years in the departments of Chuquisaca and Potosi, to guide the action protocols in stimulation rooms that have just been implemented in Bolivia, and future assessments of the impact of public policy on Early Childhood Development.

The specific objectives established are: (a) to apply an internationally recognized standardized instrument (Battelle Developmental Inventory adapted by TEA editions for Spanish-speaking population); (B) to apply a screening document widely used in Latin America (Ages and Stages Questionnaire for Children ASQ-3, adapted to children of Bolivia); (C) to apply a screening tool (PRUNAPE national screening test developed by the Garrahan Hospital in Buenos Aires); (D) to apply an anthropometric instrument and a health questionnaire; (E) to determine the prevalence of developmental delays that can be generalized to the reference population; (F) to know the behaviour of cross development tools applied to the selected sample to be adjusted to the Bolivian reference population.

3. Methodology

The instruments selected for this baseline study have been previously validated. The content, construct and criterion based on sex and race of BATTELLE Inventory have been validated in a logical, conceptual and statistical processes. The authors recommend to submit progressive data of its application to strengthen its validity and reliability (Newborg, Stock and Wnek, 1996, in its Spanish adaptation by De la Cruz and Gonzalez, 2001). The ASQ-3 questionnaire has been extensively validated as an effective tool in detecting risks of developmental delay, through its combined use with other diagnostic tools (Bricker et al 1995). The PRUNAPE test has been validated in Argentina through the analysis of sensitivity, specificity and cut off points suitable for the detection of risks in development in contrast to specialized clinical diagnostic tests (Lejarraga et al, 2002). The areas to be evaluated coincide for the three instruments selected except for the cognitive or problem resolution areas ASQ-3, which has no correspondence in PRUNAPE area, as shown in Table 1. For the anthropometric measures and health risk assessment in development, the data to be taken are: weight, height, head circumference and identification of existence of foot edema. For the correct measurement of weight and height directions of the Pan American Health Organization (WHO) 2007 will be followed.

Table 1. Development areas and its evaluation

	Instruments		
Areas of early childhood development	BATTELLE	AQS-3	PRUNAPE
	Personal/social	Social/individual	Personal/social
	Adaptative		
	Motor	Gross motor	Gross motor
		Fine motor	Fine motor
	Communication	Communication	Language
	Cognitive	Problem resolution	

The methodological criteria that should guide the fieldwork for diagnosing baseline have to offer robustness of the findings, and a clear definition of the target population intervention. Thus, the criteria that have been considered are: (a) *complementarity criteria* facilitated by the joint application of the instruments selected to the same sample to study the behavior of each of the instruments and their complementarity for the best diagnostic of the delay; (B) *comparability criteria* is reached when handling a sample that has been recently diagnosed with the joint use of Questionnaire ASQ-3 and Nelson Ortiz Scale Development; (C) *Criteria of data triangulation* in the way that the

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