

framework for our Series. The Series addressed strategies to either prevent disabilities or mitigate their adverse consequences through environmental adaptation, rehabilitation, corrective services, and supportive families and workplaces.¹ As we addressed at the Series launch, principles of inclusion and equity are inherent in nurturing care and apply to all children. The variability in the intensity and specificity of the interventions is dependent on the environmental or individual needs of children (appendix). Thus, children in conflict zones, children who are displaced for various reasons, and children with disabilities often need additional and specialised support. We agree that close attention should be directed to identifying children in vulnerable circumstances, to identifying children who have additional needs, to providing services that promote children's adaptation, and to monitoring the effects of interventions on the wellbeing of children.¹¹

Richards makes the case for highlighting HIV, syphilis, and Hepatitis B virus interventions. We agree that these are important interventions, as noted in the third paper in the Series.³ The interventions are discussed in additional detail in the accompanying detailed systematic reviews of the evidence.^{6,7} The importance of the interventions among vulnerable adolescents has also been underscored in a 2016 review.⁸

Laverty and colleagues refer to comprehensive tobacco control measures by WHO, which is clearly an important universal intervention across all age groups. Renshaw and colleagues advocate strongly for reducing air pollution whereas Hughes and colleagues further advocate for bringing climate and the environment to the centre of child and adolescent health. These are extremely important and relevant measures and are incorporated into the Series, the background papers,^{9,12} and into the comprehensive report of the 2020 WHO-UNICEF-Lancet

Commission.¹³ In our call for action,⁵ we specifically referred to the failure of the UN Climate Change Summit to sufficiently rise to the aspirations of millions of children and adolescents globally and called for a global summit for children, an activity that we are actively pursuing for 2023. We thank all readers for their interest in this Series and its core messages and invite them to support the effort to optimise child and adolescent health for future generations.

ZAB reports grants from International Development Research Centre, UNICEF, WHO, The Rockefeller Foundation, and the Institute of International Education during the conduct of the study. REB serves on the Board of Directors of Vitamin Angels, a non-profit charitable organisation supporting maternal and child nutrition services in low-income and middle-income countries. All other authors report no competing interests.

*Zulfiqar A Bhutta, Tyler Vaivada, Maureen M Black, Robert E Black
zulfiqar.bhutta@sickkids.ca

Centre for Global Child Health, The Hospital for Sick Children, Toronto, ON M5G 0A4 (ZAB, TV), Canada; Institute for Global Health and Development, The Aga Khan University, Karachi, Pakistan (ZAB); Department of Pediatrics, University of Maryland School of Medicine, Baltimore, MD, USA (MMB); RTI International, Research Triangle Park, NC, USA (MMB); Institute for International Programs, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, USA (REB)

- Black RE, Liu L, Hartwig FP, et al. Health and development from preconception to 20 years of age and human capital. *Lancet* 2022; **399**: 1730–40.
- Victoria CG, Hartwig FP, Vidaletti LP, et al. Effects of early-life poverty on health and human capital in children and adolescents: analyses of national surveys and birth cohort studies in LMICs. *Lancet* 2022; **399**: 1741–52.
- Vaivada T, Lassi ZS, Irfan O, et al. What can work and how? An overview of evidence-based interventions and delivery strategies to support health and human development from before conception to 20 years. *Lancet* 2022; **399**: 1810–29.
- Kruk ME, Lewis TP, Arsenaault C, et al. Improving health and social systems for all children in LMICs: structural innovations to deliver high-quality services. *Lancet* 2022; **399**: 1830–44.
- Bhutta ZA, Boerma T, Black MM, Victoria CG, Kruk ME, Black RE. Optimising child and adolescent health and development in the post-pandemic world. *Lancet* 2022; **399**: 1759–61.
- Khan DSA, Naseem R, Salam RA, Lassi ZS, Das JK, Bhutta ZA. Interventions for high-burden infectious diseases in children and adolescents: a meta-analysis. *Pediatrics* 2022; **149** (suppl 5): e2021053852C.
- Fantaye AW, Buh AW, Idriss-Wheeler D,

Fourmier K, Yaya S. Interventions promoting child sexual and reproductive health and rights in LMICs: a systematic review. *Pediatrics* 2022; **149** (suppl 5): e2021053852K.

- Salam RA, Das JK, Lassi ZS, Bhutta ZA. Adolescent health interventions: conclusions, evidence gaps, and research priorities. *J Adolesc Health* 2016; **59**: S88–92.
- Jain RP, Als D, Vaivada T, Bhutta ZA. Prevention and management of high-burden noncommunicable diseases in school-age children: a systematic review. *Pediatrics* 2022; **149** (suppl 5): e2021053852F.
- Black MM, Behrman JR, Daelmans B, et al. The principles of Nurturing Care promote human capital and mitigate adversities from preconception through adolescence. *BMJ Glob Health* 2021; **6**: e004436.
- Olusanya BO, Boo NY, Nair MKC, et al. Accelerating progress on early childhood development for children under 5 years with disabilities by 2030. *Lancet Glob Health* 2022; **10**: e438–44.
- Das JK, Salam RA, Arshad A, Finkelstein Y, Bhutta ZA. Interventions for adolescent substance abuse: an overview of systematic reviews. *J Adolesc Health* 2016; **59**: S61–75.
- Clark H, Coll-Seck AM, Banerjee A, et al. A future for the world's children? A WHO-UNICEF-Lancet Commission. *Lancet* 2020; **395**: 605–58.

Department of Error

Antimicrobial Resistance Collaborators. Global burden of bacterial antimicrobial resistance in 2019: a systematic analysis. Lancet 2022; **399**: 629–55—In this Article, the Antimicrobial Resistance Collaborators list and affiliations have been updated. These corrections have been made to the online version as of Sept 29, 2022.

Perry DC, Achten J, Knight R, et al. Immobilisation of torus fractures of the wrist in children (FORCE): a randomised controlled equivalence trial in the UK. Lancet 2022; **400**: 39–47—In this Article, Daniel C Perry's affiliations should have included Faculty of Health and Life Sciences, University of Liverpool, Liverpool, UK. This correction has been made to the online version as of Sept 29, 2022.

RECOVERY Collaborative Group. Baricitinib in patients admitted to hospital with COVID-19 (RECOVERY): a randomised, controlled, open-label, platform trial and updated meta-analysis. Lancet 2022; **400**: 359–68—The appendix of this Article has been corrected as of Sept 29, 2022.

For a video of the Series launch see <https://youtu.be/N1clujUNAvI>

See Online for appendix