Aligning Child Health to Sustainable Development Goals

“Narrative on CCD Capacity Building”

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Introduction to Care for Child Development

The WHO Commission on the Social Determinants of Health concluded:

• Early child development (ECD) influences:
  – Subsequent life chances
  – Health
  – Skills development
  – Education
  – Occupational Opportunities

WHY

• “... because what children experience during the early years sets a critical foundation for their entire life course.” (WHO, 2008)
Investment in early child development reduces inequalities

“Investment in the early years provides one of the greatest potentials to reduce health inequities within a generation...”

WHO Commission on the Social Determinants of Health (WHO, 2008)
Investing in early child development is good science

The science behind ECD indicates that brain development:

— *Is highly sensitive to external influence during childhood that can have life long effects*  
  *(WHO Commission)*

— *Is influenced by genes and childhood experiences*

— *Is influenced by relationships with parents and other caregivers*  
  *(Harvard Center for the Developing Child)*
Neurogenesis and synaptogenesis occur throughout development (intense during first 56 days)

Mikati, Mohamad. 2010. Presentation at the International Congress of the IPA. Johannesburg, SA.
Investing in early child development is the child’s right

Children have the right to life, survival, and development.

Children’s education must help children develop their full potential.

The Jamaica Study
Granthish-McGregor, et al., 1991

Looked at the effects of nutritional supplementation and psychological stimulation on stunted children aged 9-24 months

An experimental intervention study

129 children (age 9-24 months) from poor neighborhoods were randomly assigned to four groups:

- **Control**
- **Supplemented only (milk-based formula)**
- **Stimulated only (weekly play sessions at home)**
- **Supplemented plus stimulated**

And a matched comparison group of non-stunted children
Jamaica Project: Effects of supplementation and stimulation on the mean development quotient of stunted groups compared with non-stunted groups.

ECD interventions level playing field for disadvantaged children and are a vehicle for health equity and social inclusion

In Jamaica study, stimulated children earned 25 percent more as adults, compared to non-stimulated children.

98 percent of stimulated children had been employed by 22 years and 94 percent held full-time jobs.

Indirect economic gains through improved school performance, improved “executive functions,” fewer cases of violence, reduced use of drugs, and fewer instances of early pregnancies.
Bogotá Project:
Effects of supplementation and stimulation on growth and weight (results at age 7)

What is Care for Child Development?

• Simple age-specific recommendations for how families can help children develop

• Checklist for observation of problems during visit

• Recommendations and suggestions for common problems in the care for a child’s development

• Generic parenting materials
  Includes:
  • Training and advocacy materials
  • Monitoring and evaluation framework

• Training is Designed for:
  • District officials
  • Health workers in-service and pre-service
  • Community health workers
  • Parents and families
Care For Child Development

Application: it is an intervention that can be added on top of existing health / nutrition interventions

Focus: caregiver-child interactions, play and communication to stimulate learning

Aim: integration of new skills (to improve child development outcomes) in ongoing service delivery

Audience: For health professionals and CHVs to enhance skills to support care for development

Duration: 3.5 days

Clinical practice: 4 sessions
Integrating Care for Child Development in existing services

- Health Services
  - Maternal and child health services
  - PMTCT, early diagnosis and treatment, pediatric treatment and ARV programs
  - Infant and young child feeding and nutrition
  - Community health worker services

- Child development service
  - Parenting programs
  - Child care services
  - Pre-school education and stimulation programs

- Child protection systems
  - Care for orphans and vulnerable children
  - Economic and social protection programs
care includes...

• Behaviors and practices of caregivers, including:
  • Providing food
  • Health care
  • Stimulation
  • Emotional support

• How the practices are performed:
  • With affection
  • With responsiveness to the child

Engle (1999)

The care that children receive has powerful effects on their survival, growth and development.
Lessons Learnt

- Counseling skills do not develop over the four days training-need to provide a longer period for mentorship and supervision for TOTs before they embark on training practitioners

- The need to support mothers mental health in addition to supporting responsive care giving
Proposed Improved Training Model

- Phase I: Basic course training for TOTs,
- Phase II: TOT participants to practice counseling for one full month with mentoring and supervision that will culminate in a one day reflection meeting, added input if necessary and certification.
- Phase III: TOTs will then facilitate basic course for a new group of participants under supervision from Master trainers. They will also mentor this group during the one-month field practice and facilitate one day reflection meeting and certification.
Improved Training Model

Course content:
◦ Adapted CCD package
◦ Mentorship, coaching and supportive supervision of promising TOTs
◦ Integrating maternal depression content in the training
Numbers Trained so Far.......& CCD Hubs

Regional Trainer 1
Master Trainers 12
TOTs 78
Basic Counsellors 257

**CCD Training Hubs:**
- Machakos level 5 Hospital
- Mbagathi level 5 hospital, Nairobi
- Siaya County Referral Hospital
- Kisumu County
- Homabay County
- Migori County
Moving Forward.... A World Fit for Children!!!!

CARE brings it all together
Thank You