



# WHO's Early Childhood Initiative: Implementing integrated interventions

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Road to Melbourne: Young Children Born into HIV-affected Families

# Introduction to *Every child's potential* . . .



As WHO, we intend to . . . work with member states and partners to ensure that every child has the best possible opportunity to realize its full development potential.

**MARGARET CHAN**  
*Director-General of the  
World Health Organization*



# Introduction to *Every child's potential* . . .

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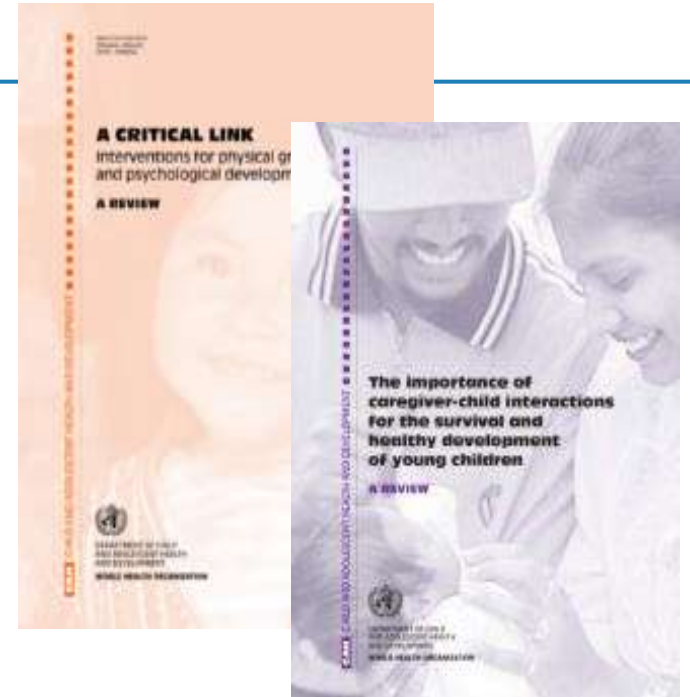
- Evidence-based strategies to promote early development exist, such as Care for Development
- These can be integrated into health/HIV, nutrition, education, social, and child protection programmes
- The **health sector** has a particular responsibility with opportunities
  - During the child's first 1000 days—  
pregnancy, birth, and early childhood
  - During adolescence—  
to prepare young people for parenthood

*Margaret Chan*



# Background: *Systematic reviews*

- **Sensitive and responsive caregiving** is a requirement for the healthy neurophysiological, physical, and psychological development of the child
- **Caregivers may need support** to develop sensitivity and responsiveness and have a nurturing relationship with the child
- Impact is greatest when interventions **start early, reach the most vulnerable children, and are combined** (especially with health and nutrition)

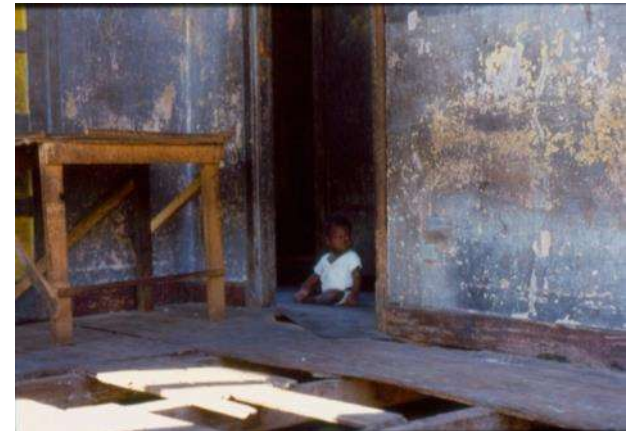


# Background: *Play and communication with an adult*

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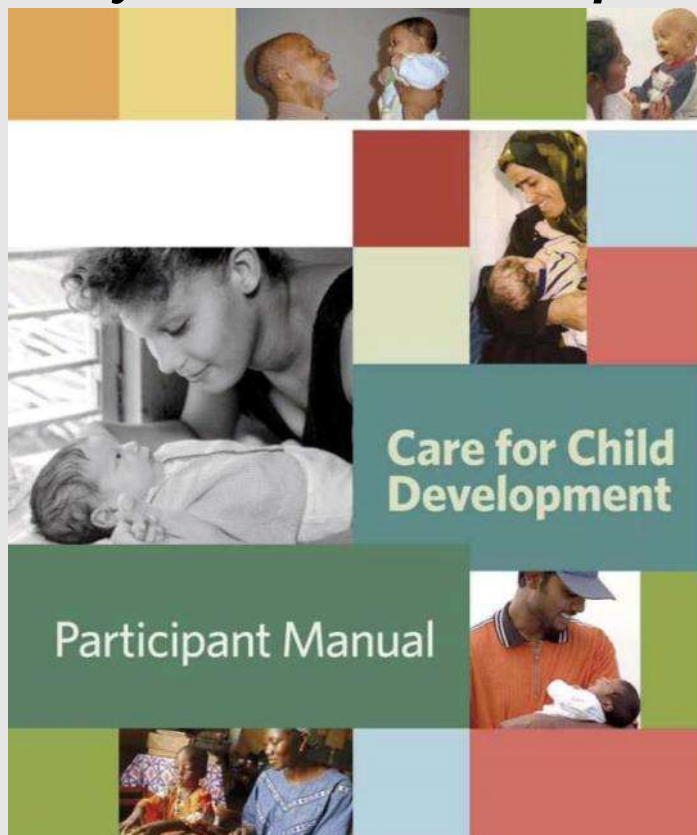
Play and communication are important **to stimulate the child's learning and to strengthen the caregiver's skills**

- Children can learn from play with many things – especially if they have someone guiding them
- Surveys in developing countries show that:
  - Only 10-41% of parents respond that they have materials in the home to stimulate their children's learning
  - Only 11-33% of parents involve their children in learning activities



# WHO/UNICEF Care for Child Development

***To enhance skills to support care for early childhood development***



- For **counselling families on play and communication activities**
  - to **stimulate** the child's learning
  - to **strengthen caregiving skills** and the **interaction** between caregivers and their children
  - to **prevent and solve problems** in care

***Supported with job aids, training materials, technical background, advocacy, monitoring and evaluation tools***



## RECOMMENDATIONS FOR CARING FOR YOUR CHILD'S DEVELOPMENT

**Newborn,  
birth up to  
1 week**



Your baby learns from birth.

- **Play:** Provide ways for your baby to see, hear, move arms and legs freely, and touch you. Gently soothe, stroke, and hold your child. Skin to skin is good.
- **Communicate:** Look into baby's eyes, and talk to your baby. When you are breastfeeding is a good time. Even a newborn baby sees your face and hears your voice.



**1 week  
up to  
6 months**



- **Play:** Provide ways for your child to see, hear, feel, move freely, and touch you. Slowly move colourful things for your child to see and reach for. Sample toys: shaker rattle, ring on a string.



- **Communicate:** Smile and laugh with your child. Talk to your child. Get a conversation going by copying your child's sounds or gestures.

**6 months  
up to  
9 months**



- **Play:** Give your child clean, safe household things to handle, bang, and drop. Sample toys: containers with lids, metal pot and spoon.

- **Communicate:** Respond to your child's sounds and interests. Call the child's name, and see your child respond.



**9 months  
up to  
12 months**



- **Play:** Hide a child's favourite toy under a cloth or box. See if the child can find it. Play peek-a-boo.



- **Communicate:** Tell your child the names of things and people. Show your child how to say things with hands, like "bye bye". Sample toy: doll with face.

**12 months  
up to  
2 years**



- **Play:** Give your child things to stack up, and to put into containers and take out. Sample toys: Nesting and stacking objects, container and clothes clips.

- **Communicate:** Ask your child simple questions. Respond to your child's attempts to talk. Show and talk about nature, pictures, and things.



**2 years  
and  
older**



- **Play:** Help your child count, name, and compare things. Make simple toys for your child. Sample toys: Objects of different colours and shapes to sort, stick or chalk board, puzzle.



- **Communicate:** Encourage your child to talk and answer your child's questions. Teach your child stories, songs, and games. Talk about pictures or books. Sample toy: book with pictures.

**Give your child affection and show your love.  
Be aware of your child's interests and respond to them.  
Praise your child for trying to learn new skills.**



**Age 1 week up to 6 months:**

**Talk to your child and get a conversation going with sounds or gestures (copy your child)**

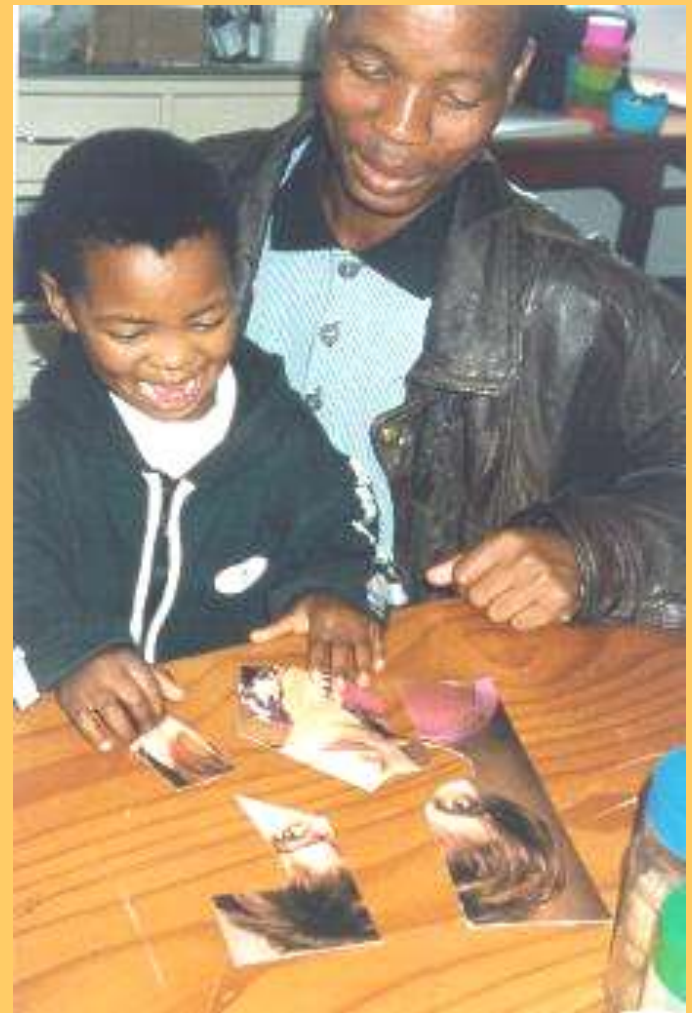




**Age 12 months  
up to 2 years:**

**Give your child  
things to stack  
up, and to put  
into containers  
and take out.**

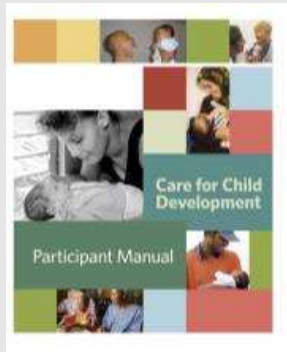




**Age 2 years and older:**

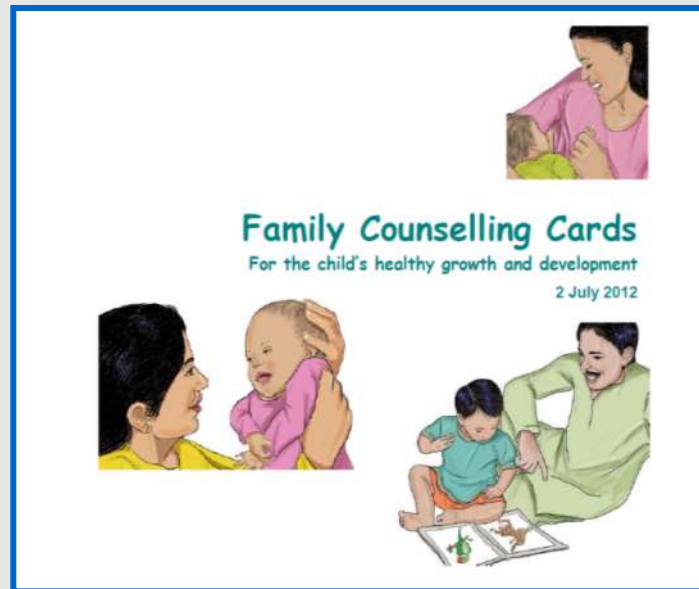
**Help your child count, name, and compare things. Make simple toys for your child.**

# Integrating Care for Child Development with nutrition and health: A WHO/UNICEF community health worker intervention



**Care for Child Development**

- **WHO/UNICEF training materials for community health workers to enhance skills for caring for the *child's healthy growth and development* (birth to 5 years old)**



## INTEGRATED CARE

Counselling the family on:

- Feeding
- Play and communication
- Preventing illness and injury
- Responding to illness



## RECOMMENDATIONS FOR FEEDING YOUR CHILD

**Newborn,  
birth  
up to  
1 week**



- Immediately after birth, put your baby in skin to skin contact with you.
- Allow your baby to take the breast within the first hour. Give your baby colostrum, the first yellowish, thick milk. It protects the baby from many illnesses.
- Breastfeed day and night, as often as your baby wants, at least 8 times in 24 hours. Frequent feeding produces more milk.
- If your baby is small (low birth weight), feed at least every 2 to 3 hours. Wake the baby for feeding after 3 hours, if baby does not wake self.
- Do not give other foods or fluids. Breast milk is all your baby needs.

**1 week  
up to  
6 months**



- Breastfeed as often as your child wants. Look for signs of hunger, such as beginning to fuss, sucking fingers, or moving lips.
- Breastfeed day and night, whenever your baby wants, at least 8 times in 24 hours. Frequent feeding produces more milk.
- Do not give other foods or fluids. Breast milk is all your baby needs.

**6 months  
up to  
9 months**



- Breastfeed as often as your child wants.
- Also give thick porridge or well-mashed foods, including animal-source foods and vitamin A-rich fruits and vegetables.
- Start by giving 2 to 3 tablespoons of food. Gradually increase to 1/2 cup at each meal.
- Give 2 to 3 meals each day.
- Offer 1 or 2 snacks each day between meals when the child seems hungry.



**9 months  
up to  
12 months**



- Breastfeed as often as your child wants.
- Also give a variety of mashed or finely chopped family foods, including animal-source foods and vitamin A-rich fruits and vegetables.
- Give 1/2 cup at each meal.
- Give 3 to 4 meals each day.
- Offer 1 or 2 snacks between meals. The child will eat if hungry.
- For snacks, give small chewable items that the child can hold. Let your child try to eat the snack, but provide help if needed.



**12 months  
up to  
2 years**



- Breastfeed as often as your child wants.
- Also give a variety of mashed or chopped family foods, including animal-source foods and vitamin A-rich fruits and vegetables.
- Give 3/4 cup at each meal.
- Give 3 to 4 meals each day.
- Offer 1 to 2 snacks between meals.
- Continue to feed your child slowly, patiently. Encourage—but do not force—your child to eat.



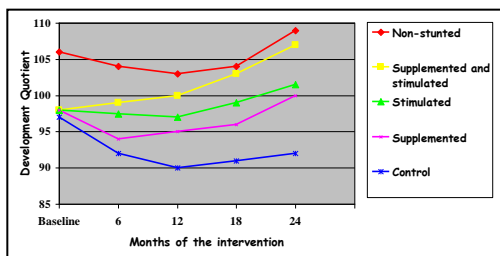
**2 years  
and  
older**



- Give a variety of family foods to your child, including animal-source foods and vitamin A-rich fruits and vegetables.
- Give at least 1 full cup at each meal.
- Give 3 to 4 meals each day.
- Offer 1 or 2 snacks between meals.
- If your child refuses a new food, offer "tastes" several times. Show that you like the food. Be patient.
- Talk with your child during a meal, and keep eye contact.

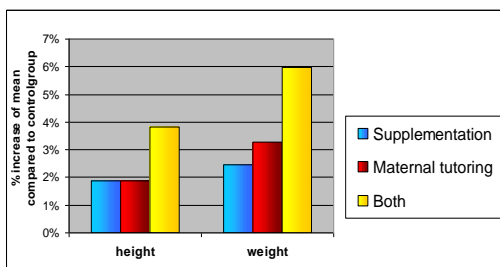


# Our experience: Integrating play and communication into health and nutrition interventions



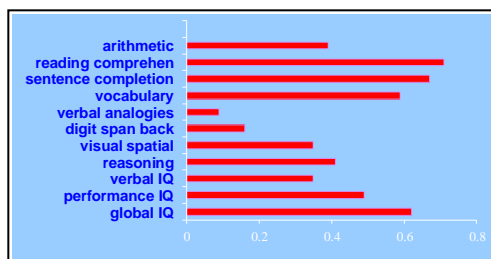
- **Stimulation and better nutrition improve **child development****

*The Jamaica Project, Grantham-McGregor, et al. (1991)*



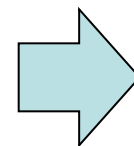
- **Stimulation and better nutrition improve **child growth and development****

*The Bogota Project*



- **Benefits of early stimulation on cognitive measures are **sustained****

*The Jamaica Project, Walker, et al. (2005)*



# New experiences: Integrating play and communication into health and nutrition interventions in the community



## The PEDS Trial (Pakistan)

Yousafzai, et al. (2014)

- **Lady Health Workers**
- Home visits, mother-child groups
- Care for Child Development with nutrition education and supplementation



## The WHO/Intervida Project (Haryana and Maharashtra, India)

Kumar, Gupta, et al. (current)

- **Anganwadi workers** (Integrated Child Development Services, ICDS)
- **Accredited Social Health Assistants** – (ASHAs in the Rural Health Mission)
- Home visits, mother-child groups, parent groups, SMS and helpline
- Care for Child Development with nutrition education and supplements, and health



# New experiences: Integrating play and communication into health and nutrition interventions

## Desired outcomes:

- Improved **child growth and development**



## Additional benefits:

- More positive **mother-child interactions**
- Increased frequency of **play and communication activities** at home
- Increased **use of books** and other learning materials at home
- Reduced **maternal depression**
- Strengthened community health care **services**
- Improved **access to, and use of, health and early child care services** (e.g. immunization, referral of sick child to health centre, and Anganwadi child care)



## More examples of integration

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- **Community health care** (Pakistan and India)
- **Primary care health workers** (Kazakhstan, Kyrgyzstan, South Africa, China, and others)
- **Child protection** (Australia)
- **Literacy** (day care centre trainers and supervisors in Brazil)
- **Community development** (agriculture, health, and education workers in Mozambique)





# Implications for families affected by HIV

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- Young Children especially vulnerable
- Caregivers may not be parents
- Caregivers may need to be taught to interact with young children
- Positive stimulation will give the children a better start in life

