# CARE FOR CHILD DEVELOPMENT

Adapted for the Latin American and Caribbean Region

by the UNICEF Latin American and Caribbean Regional Office and the Pan American Health Organization/ WHO Regional Office for the Americas



## Contents

Foreword - Acknowledgements

Care for Child Development: Improving the Care of Young Children

#### Course materials: Counsel the Family on Care for Child Development

Care for Child Development: Participant Manual

Care for Child Development: Counselling Cards

Care for Child Development: Facilitator Notes

Care for Child Development: Guide for Field Practice

Framework for Monitoring and Evaluation

Poster: Recommendations for Care for Child Development



#### CD-Rom: Technical, Advocacy and Training Resources

Care for Child Development: Guide for Monitoring and Evaluation

Course Materials

Presentations for Technical Seminars

Reviews of the Evidence

Training and Advocacy Videos

Other Resource Materials

Additional materials to support the implementation of Care for Child Development will be added to this set as they are finalized.









## **Foreword**

Early childhood development (ECD) – including the physical (or motor), communication, cognitive and social - emotional capacities – is indivisible from the child survival, health and education agendas and represents one of the important stages for breaking the intergenerational cycles of poverty and for promoting sustainable development. Development during the early years lays the critical foundations for health, learning and behaviour across the life course.

Poor development during childhood, unfortunately, is widespread. Around 250 million children—or 43 percent—of all children under the age of five in low and middle income countries are at higher risk of not reaching their developmental potential because they live in poverty, and have poor health services, nutrition, psycho-social care and limited early learning opportunities. Some children are born with a disabling health condition or impairment. Others may experience a disability as a result of illness, injury, poor nutrition or violence. These disadvantaged children are often excluded from school or do poorly when enrolled. Subsequently they often have poor self-esteem, limited work skills, low incomes, high fertility, and high criminality, and provide poor care for their own children. As a result, their countries suffer an estimated 25 per cent loss in adult productivity (The Lancet, 2016).

Investment in early childhood programmes is essential because ECD programmes and interventions can provide a "good and fair start" to children and help to modify distressing socio-economic and gender-related inequities. There is strong evidence regarding interventions that can address the causal factors and reduce the burden of poor child development. For all children, early childhood provides an important window of opportunity to prepare the foundation for life-long learning and participation, while preventing potential delays in development and disabilities. For children who experience disability, it is a vital time to ensure access to interventions that can help them reach their full potential.

The health sector in countries has the capacity to play a unique role in the field of ECD because the most important window of opportunity for ensuring optimal development and preventing risk of long-term damage is from pregnancy through the first five years of life – especially from birth to three years of age. Therefore, health care encounters for mothers, fathers and their young children are important opportunities to help strengthen families' efforts to promote children's early development and may represent the only real chance for health professionals in developing countries to positively influence parents of young children. Significant increases have been

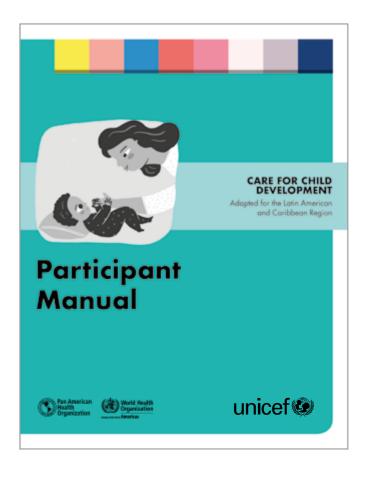
seen in Latin American and Caribbean (LAC) countries in the expansion of preschool programmes for young children. Limited progress, however, has been made by governments and non-governmental organizations to provide quality early childhood services for younger children, under three years old. In particular, investments are limited for promoting appropriate family-based programmes to guarantee the right of the youngest children to achieve their full potential. For some countries, ECD is currently not systematically incorporated into initiatives to promote and protect maternal and child health. Moreover, families are often not prepared or aware of the critical role they can play in promoting cognitive and socioemotional development in the early years.

To address this gap, WHO, PAHO/WHO and UNICEF have collaborated closely to strengthen their advocacy and technical support to regions and countries and have extended partnership to national leaders and governments, development agencies, researchers, academics, nongovernmental organizations, professional associations, media and advocacy groups. We have also developed the present evidence-based set of materials to help international staff, national governments and their partners promote Care for Child Development within all relevant programme activities of

the health sector, with the emerging involvement of education, social protection, rehabilitation and other ECD partners.

These materials guide health and other ECD workers as they help families prepare a supportive environment, build stronger relationships with their children, and solve problems in caring for their children at home. Care for Child Development recommends play and communication activities for families to stimulate the learning of their children. Also, through play and communication, adults learn how to be sensitive to the needs of children and respond appropriately to meet them. These basic care giving skills contribute to guaranteeing the right to survival, as well as to the healthy growth and development, of young children.

We hope that these materials will be widely used to optimize early psycho-social development and thereby help to guarantee the right to a good start in life, and reduce inequities and the global burden of poor development.



# **Acknowledgements**

The Care for Development module of IMCI was first developed in the late 90s to provide families with information and recommendations for cognitive stimulation and social support to young children as part of the child health visit specified in the WHO/UNICEF strategy Integrated Management of Childhood Illness (IMCI). WHO prepared the Care for Development recommendations as part of the Counsel the Mother Card along with advocacy materials, technical seminars, and training materials with the technical expertise of Drs. Patrice Engle and Jane E. Lucas.

The project was led and managed by **Meena Cabral de Mello**, Senior Scientist, Department of Maternal, Newborn, Child and Adolescent Health in WHO, and **Nurper Ulkuer**, Chief, Child Development Unit in UNICEF.

In 2007, a group of experts in health, nutrition, and child development met at the International Child Development Centre (ICC) in Ankara. They reviewed the Care for Development training materials and shared experiences in using the guidelines in Africa, the Central Asian Republics, the Middle East, and South East Asia.

Nurper Ulkuer, Senior Advisor and Chief, Child Development Unit, UNICEF, New York, Nune Mangasarayan, Senior Advisor Nutrition, UNICEF, New York, and Meena Cabral de Mello, Senior Scientist, Department of Child and Adolescent Health and Development, World Health Organization, Geneva convened the group which included: Patrice Engle (Professor of Child Development, Cal Poly University, United States); Ilgi Ertem (Professor of Paediatrics, Ankara University, Turkey); Jane E. Lucas (Consultant in child health and development, United States); Sally McGregor-Grantham (Professor of Paediatrics, University College London, United Kingdom); Sudhansh Mahotra (Regional Adviser, Child Health and Development, WHO SEARO): Linda Richter (Executive Director. Child, Youth, and Family Development, Human Sciences Research Council, South Africa); Atif Rahman (Professor of Child Psychiatry, University of Manchester, United Kingdom); Tomris Türmen (Professor of Paediatrics, Ankara University, and President of the International Children's Centre. Turkey) with the assistance of others from the ICC.

The meeting participants concluded that the training for workers in first-level health facilities was a valuable tool to promote the healthy growth and development of young children. The available materials, however, needed updating to be consistent with new research evidence and WHO/UNICEF recommendations. Furthermore, if the training could be used beyond, as well as within, the IMCI strategy and local health facilities, the intervention had the potential to reach many more children. The training could complement other child survival and health, nutrition, and early child-care interventions in resource-poor areas, including programmes to meet the needs of children living in communities affected by HIV/AIDS. The group's valuable recommendations are incorporated in these revised materials for the course Counsel the Family on Care for Child Development.

We are grateful to the many international experts and WHO and UNICEF regional and country based staff who contributed over the years to the development and use of the Care for Development materials.

We are especially grateful to **Drs Jane E. Lucas and Patrice Engle** for donating much of their valuable time and technical expertise that was needed to update and revise the materials that are contained in **Care for Child Development**. They were supported by Aisha K Yousafzai, Assistant Professor, Department of Paediatrics and Child Health, Aga Khan University, Karachi, Pakistan and Oliver Petrovic, ECD Programme Specialist, Early Childhood Development Unit/PDO, UNICEF, New York, USA.

The assistance of Amy R. Borden, WHO intern, Des Moines University, USA, in the finalization process is gratefully acknowledged.

# The adaptation for Latin America and Caribbean (LAC)

In November 2012, a regional meeting of Early Childhood Development experts was held in Panama to identify and consider the required adaptations of the Care for Child Development (CCD) package for implementation in the Latin America and Caribbean Region, along with exploring potential follow-up pilot processes to validate modified materials in two or three regional countries. This present version reflects inputs and comments from the following workshop organizers and participants.

Workshop Organizers and Facilitators: Chris Drasbek (PAHO/WHO); Maite Onochie (UNICEF); Fabio Manno (Consultant-Facilitator); Janet Lennox (Consultant – UNICEF).

Workshop Participants: Carlos Becerra (Ministry of Health, Chile); Betzabe Butron (PAHO Ecuador); Charlene Coore Desai (Parenting Partners, Jamaica); Pilar Fort (WHO/MCA Geneva); Anna Christine Grellert (World Vision, Latin America Regional Office, Colombia); Shelly Ann Harper (UNICEF Barbados); Garren Lumpkin (UNICEF Consultant, Nicaragua); Raul Mercer (FLACSO Argentina); Helia Molina (Catholic University, Chile); Alessandra Schneider (CONASS Brazil); Fulvia Guerra (Ministry of Health, Caja de Seguro Social, Panama); Maria Elena Ubeda (UNICEF Nicaragua); Patricia Velasco (Fomento al Desarrollo Infantil, Bolivia); Ofelina Vergara (Hospital del Niño, Panama); and Sian Williams (CARICHILD, Jamaica).

Team for adapting materials for the LAC region: Based on workshop observations and recommendations of regional Early Childhood Development (ECD) experts, the original WHO/UNICEF Care for Child Development package was modified by the following technical team: Garren Lumpkin, Maria Elena Ubeda, and Chris Drasbek, with initial assistance by Maite Onochie. Jane E. Lucas (UNICEF consultant, New York) provided the technical review for WHO and UNICEF. Pilar Fort (Consultant – PAHO/WHO) provided the final editing review.