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 (ICD) 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, 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 Paly 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 Türmén (Professor of Paediatrics, Ankara University, and President of the International Children’s Centre, Turkey) with the assistance of others from the ICD.

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, UNICEF, New York, USA.

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

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

Care for Child Development

Contents

- Foreword – Acknowledgments
- 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 Clinical 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

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

Additional materials to support the implementation of Care for Child Development will be added to this set as they are finalized.
Early childhood development (ECD) – including the sensori-motor, social/emotional and language/cognitive 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. Globally over 200 million children do not reach their developmental potential in the first 5 years because they live in poverty, and have poor health services, nutrition and psycho-social care. These disadvantaged children do poorly in school and subsequently have low incomes, high fertility, high criminality, and provide poor care for their own children. As a result, their countries suffer an estimated 20 per cent loss in adult productivity (McGregor et al., The Lancet Child Development Series, 2007).

Investment in early childhood programmes is essential because ECD programmes and interventions can provide a “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.

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. Therefore health encounters for women and 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. But between birth and five years of life, there are relatively few investments made by governments for promoting the development of young children, and 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 socio-emotional development in the early years.

To address this gap, WHO and UNICEF have collaborated closely to strengthen their technical support to regions and countries and have extended partnership to national leaders and governments, development agencies, researchers, academics, non-governmental organizations, professional associations 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.

These materials guide health workers and other counsellors as they help families 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 the survival, as well as 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 reduce inequities and the global burden of poor development.
a variety of health and community workers to provide age-appropriate guidance to caregivers of young children for stimulating cognitive, language and social-emotional development through play and communication. This guidance is designed to benefit those children and families who need it most. It has been shown to be effective in improving responsive care.

The Care for Child Development package consists of:

☑ Simple recommendations health workers can make to families to improve the development of children.
☑ Training materials for health workers and community providers.
☑ Support for families to solve common problems in providing good care for young children.
☑ Advocacy materials.
☑ A monitoring and evaluation framework.

Care for Child Development
Improving the Care of Young Children

7.6 million children under the age of 5 worldwide die each year. More than 25 times that number – over 200 million children – survive, but do not reach their full human potential. As a result, their countries have an estimated 20 per cent loss in adult productivity. Health services, health workers and community providers have an important role in promoting the development of young children.

EVERY CHILD
What happens during the early years is of crucial importance for every child’s development. It is a period of great opportunity, but also of vulnerability to negative influences.

Many children do not reach their full human potential because they live in very poor families in developing countries. They do not receive adequate nutrition, care and opportunities to learn. These children and their families can be helped. It is their right to develop as well as to survive.

GOOD START
Good nutrition and health, consistent loving care and encouragement to learn in the early years of life help children to do better at school, be healthier, have higher earnings and participate more in society. This is especially important for children in poverty.

LASTS A LIFETIME
A good foundation in the early years makes a difference through adulthood and even gives the next generation a better start.

The Care for Child Development package consists of:

☑ Simple recommendations health workers can make to families to improve the development of children.
☑ Training materials for health workers and community providers.
☑ Support for families to solve common problems in providing good care for young children.
☑ Advocacy materials.
☑ A monitoring and evaluation framework.

For every child – a good start – lasts a lifetime – builds our society

World Health Organization
Department of Maternal, Newborn, Child and Adolescent Health (MCA)
Avenue Appia 20
CH-1211 Geneva 27
Switzerland
Email: mca@who.int

For more information contact:
Early Childhood Development/PDO
UNICEF House
3 UN Plaza
New York, NY 10017
USA
Email: pubdoc@unicef.org

© World Health Organization 2012

1. “We have made a conservative estimate that no more than 200 million children under age 5 fall below their potential in cognitive development because of poverty, poor health and nutrition, and deficient care.” Grantham-McGregor S et al., and the International Child Development Steering Group (2007). Developmental potential in the first 5 years for children in developing countries. Lancet, 369:60-70.
BUILDS OUR SOCIETY
Educated and healthy people participate in, and contribute to, the financial and social wealth of their societies.

The World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF), together with a wide range of partners, have developed a package of materials entitled Care for Child Development to support families in promoting the development of young children through health services, health workers, community providers and others working with families and young children.

Improving care for young children is fundamental to achieving the Millennium Development Goals. A 2007 series on Early Child Development in the Lancet estimated that more than 200 million children in the developing world, over one third of all children, do not fulfill their potential. The major reasons for their disadvantage are poor nutrition and few opportunities to learn, which occurs in families facing poverty. The WHO’s Commission on the Social Determinants of Health recognizes the importance of early childhood development to equity, adult health, wellbeing and productivity. The Education for All Global Monitoring Report 2007 advocates that better care in early childhood improves performance in primary school. The World Bank’s poverty reduction strategies begin with early childhood development. The United Nations Secretary-General’s Study on Violence against Children found that young children bear the brunt of parental violence. It identified the importance of improved care for young children in the overall reduction of violence.

There is consistent and strong evidence which shows that:

- Brain development is most rapid in the early years of life. When the quality of stimulation, support and nurturance is deficient, child development is seriously affected.
- The effects of early disadvantage on children can be reduced. Early interventions for disadvantaged children lead to improvements in children’s survival, health, growth, and cognitive and social development.
- Children who receive assistance in their early years achieve more success at school. As adults they have higher employment and earnings, better health, and lower levels of welfare dependence and crime rates than those who don’t have these early opportunities.
- Efforts to improve early child development are an investment, not a cost. Available cost-benefit ratios of early intervention indicate that for every dollar spent on improving early child development, returns can be on average 4 to 5 times the amount invested, and in some cases, much higher.

There is now substantial information on how children’s development can be promoted through health care-related activities in developing countries. Care for Child Development is an investment, not a cost. Available cost-benefit ratios of early intervention indicate that for every dollar spent on improving early child development, returns can be on average 4 to 5 times the amount invested, and in some cases, much higher.

The health system has a unique opportunity
The importance of children’s early years has been recognized for a long time. Many actors play an important part in improving the care of young children.

In most countries, the health care system reaches more young children and their families than other services. Health services often have home-visiting services. In addition, nutrition and good health are essential to children’s development. Health services and community activities for health must use their unique opportunities to strengthen families’ efforts to promote children’s development.

The United Nation’s Convention on the Rights of the Child calls for all countries to enable children to develop their full human potential and to support families in the process. The CRC advocates for children’s rights to development in addition to survival. Thus, health-care systems must aim for better growth and development among all children.

Caregivers and families are best placed to support children’s growth and development through daily activities and interactions. Families often need assistance to focus on the most important activities for the development of young children – play and communication.