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HIV and Early Childhood Development

Early Childhood Growth and Development in the Context of HIV

A poor start in life has long-term irreparable consequences on the life of a child. Early childhood interventions including early childhood development programs (ECD) have the capacity to counteract these issues before their onset and are critical in promoting, protecting and supporting children's development. There are around 250 million children in low- and middle-income countries under five years old who are at risk of not reaching their full potential.¹ Children affected by AIDS are especially at risk of developmental delay, with young HIV-infected children at highest risk.

Vulnerabilities can stem from children living in poverty and having caregivers who have difficulty taking care of them due to sickness or stress.² Violence, under-nutrition, and orphanhood increase risk of under development.^{3,4} Both HIV-infected and affected children are at an increased risk of developing mental health problems and neurocognitive deficiencies, as well as having overall worse nutrition than unexposed children.^{5,6,7} The significance of adequately responding to this need is underscored by the recent recognition and inclusion of ECD into the Sustainable Development Goals and the development of the Nurturing Care Framework⁸ by global stakeholders.

The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) strives to eliminate pediatric HIV/AIDS through groundbreaking research, advocacy, and prevention and treatment programs on a global scale. In line with our mission, integrating ECD into our programs allows vulnerable and at risk children to receive needed services and support. This brief describes EGPAF's current efforts to integrate early childhood development interventions into HIV programs to support the optimal development of children affected by HIV.

Child Development and ECD

Children develop at an extremely fast pace. The beginning

of a child's life, starting at conception to the age of three, is a time of unparalleled development and sensitivity. Children attain 80% of their adult brain volume by the time they are three years of age.⁹ They are particularly vulnerable to external factors that affect this development.

COMPONENTS OF NURTURING CARE



The most influential experiences of young children come from interacting with their caregivers. Nurturing care from parents, other family members and caregivers, and community-based services, that allow children to be in a safe, protective and stimulating environment is critical to children's health, growth and development. Nurturing care includes health, adequate nutrition, responsive caregiving, security and safety, and sufficient opportunities for early learning.¹⁰ Intervening early with programs that engage caregivers and families has the power to allow vulnerable children to live healthy and successful lives.¹¹ Support for ECD increases the health and wellbeing of children and families, along with their productivity and social cohesion and has lifetime benefits.¹²

The Health Sector as an ECD Entry Point

Health services provide a unique opportunity to support ECD. Health care can reach caregivers and their children across a life course from pregnancy to birth, through childhood, adolescence, and adulthood. Regular contact during pregnancy, and during children's early years, present unparalleled opportunity to reach caregivers with critical ECD interventions. In addition to providing health and nutrition interventions critical to child health and development, integrating ECD into health platforms creates opportunities to identify vulnerable children and build caregiver capacity to support the early development of their child. Integration efforts in existing health infrastructure have shown to be feasible, affordable, and effective.¹³ Leveraging ongoing comprehensive HIV programs, EGPAF is supporting integration of ECD interventions into facility and community-based maternal, neonatal and child health (MNCH) and HIV services in Tanzania and Zambia.



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Early Childhood Development in EGPAF Programs Tanzania

EGPAF's Malezi project, funded by the Conrad N. Hilton Foundation and implemented in the Tabora Region, focuses on the integration of ECD into MNCH and HIV services to support children in reaching their full potential. Malezi, meaning "caring for young children" in Swahili, builds the knowledge, awareness and skills of caregivers, health care workers (HCWs), and community workers to respond to the developmental needs of young children and promote and practice age-appropriate early stimulation interventions within facility and community-based MNCH and HIV services. A formative assessment to better understand current child development knowledge, attitudes and practices among caregivers, HCWs, and community health workers informed the design of the intervention. The assessment identified opportunities to build on what caregivers already know and practice in relation to early stimulation and opportunities for integrating early stimulation messages into the existing service delivery platforms in facilities and homes, in particular facility-based MNCH/prevention of mother-to-child HIV transmission and HIV care and treatment services, as well as existing community-based MNCH services.

Using the United Nation's Children Fund (UNICEF) and the World Health Organization (WHO)-designed Care for Child Development (CCD) package,¹⁴ HCWs and community health workers were trained to guide families in supporting the development of young children. In waiting areas of HIV care

and treatment and reproductive and child health services (RCH) services, ECD corners were established, wherein trained service providers provide caregivers with general health care messaging and practical guidance on early stimulation, learning through play and communication with their children, using locally made, age-appropriate play materials.



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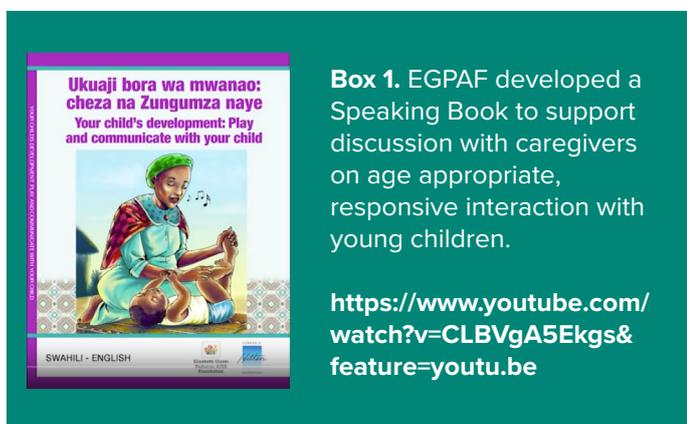
Play and stimulation session in the ECD corner and waiting space while waiting for services.

Clinical consultations provide an opportunity to further reinforce ECD, during individual counseling, especially for the at-risk groups. In case a child is suspected to have developmental delays, they are referred for additional support. **Care for Child Development counseling tools** were developed to aid discussions between HCWs and caregivers during group and individual consultations. Existing MNCH community health workers were trained to integrate early stimulation activities into their home visits to children under five years and their caregivers. Community health workers counsel caregivers on the importance of play and interaction, observe caregiver/child interaction, and provide guidance on age-appropriate, locally-made play materials, and how caregivers can provide a safe and stimulating environment. Community health workers identify and refer children with suspected developmental delays, malnutrition and health issues for facility-based services.



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CHWs conducting home visits carrying play materials



Box 1. EGPAF developed a Speaking Book to support discussion with caregivers on age appropriate, responsive interaction with young children.

<https://www.youtube.com/watch?v=CLBVgA5Ekg&feature=youtu.be>

From January 2016 period to August 2018, the Malezi program reached 25,990 caregivers with ECD messaging via individual counselling and 69,260 via group counselling, where they received information on the importance of interaction, understanding cues, and appropriately responding to their children. The project reached 1,599 HIV-positive pregnant women, 780 HIV-positive mothers and 351 caregivers of HIV-infected children with early stimulation messages. The second phase of the program, which began in 2018, incorporates media in communities and health facilities and will evaluate the effectiveness of video messages in increasing caregiver awareness of the importance of early childhood development.

The Malezi program informed the development of the Care for Child Development guidelines including guidance for the establishment of ECD corners in health facilities and the inclusion of developmental milestones in the under-five booklet developed by the Tanzania Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDEC). With the adoption of the Care for Child Development guidelines, ECD in health facilities is being scaled up across Tanzania.

Zambia

In Zambia, the Conrad N. Hilton Foundation funded Survive and Thrive Project, which began in 2012, targeted children under five affected by or infected with HIV/AIDS in high-prevalence areas in the Lusaka Province. The primary objectives of the project were to build general awareness of the importance of ECD in Zambia and build the capacity of caregivers and ECD teachers to support developmental needs of young children in two-Lusaka based clinics.

The project established ECD centers at Mount Makulu and Mandevu pediatric clinics in Lusaka, where children were screened for malnutrition, developmental delay, and HIV disease symptoms. At the ECD centers, caregivers participated in cooking demonstrations and child health talks, including on ECD. Health care providers and community health volunteer's received training to build their skills in development assessments and intervention techniques. Volunteers conducted visits with vulnerable children and their caregivers to assess for developmental delays and provide ECD support including developing household care plans, referrals for children with developmental delays or for child protection, and educating caregivers on infant and young child nutrition. ECD messages promoting early childhood stimulation were also integrated into MNCH services.

Between 2012 and 2015, over 7,000 caregivers and young children were reached with screening and cooking demonstrations. While in MNCH, nearly 2,400 women received ECD messages and 3,429 vulnerable young children were screened for developmental delays during home visits. EGPAF played a critical role in activating a stronger national commitment to ECD in Zambia. EGPAF worked with MOH and other stakeholders to develop the national ECD strategy and guidance for the Integration of Care Child's Health Growth and Development training into MNCH clinics. To address a critical lack of physical therapists in the country, EGPAF trained community health volunteers, caregivers, and community health workers to provide basic physical therapy to children with physical/motor developmental delays.

Way forward

EGPAF programs in Zambia and Tanzania have shown that integration of ECD into health services is feasible and health services can play a valuable role in improving access to ECD support for caregivers, in particular caregivers of young children at increased risk. To support the integration of ECD interventions within health services, investments are needed to ensure service providers have the knowledge and skills to promote early childhood development. Political will and commitment by the ministries of health will be critical to address the current gaps, and build sustained capacity, ensuring the delivery of quality ECD interventions for vulnerable young children, including those affected by HIV.

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