

APRIL
2021

Nurturing Care during COVID-19: Lessons Learned in Seven Countries

Global webinar hosted by ECDAN

Tuesday April 13th, 2021



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Nurturing Care during COVID-19: Overview of the FHI 360 Research Project

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Research Overview

1. Rapid review of evidence on the effects of the COVID-19 pandemic on three components of nurturing care (N=112)



Responsive caregiving

- Increased parent and caregiver stress, burnout, depression and anxiety
- Harsher parenting and less warm/responsive parenting
- Increased father involvement in caregiving
- Reduced breastfeeding support



Opportunities for early learning

- Reduced outdoor play and physical activity
- Increased screen time among children
- Parental involvement in early learning (i.e., reading, storytelling)



Safety and security

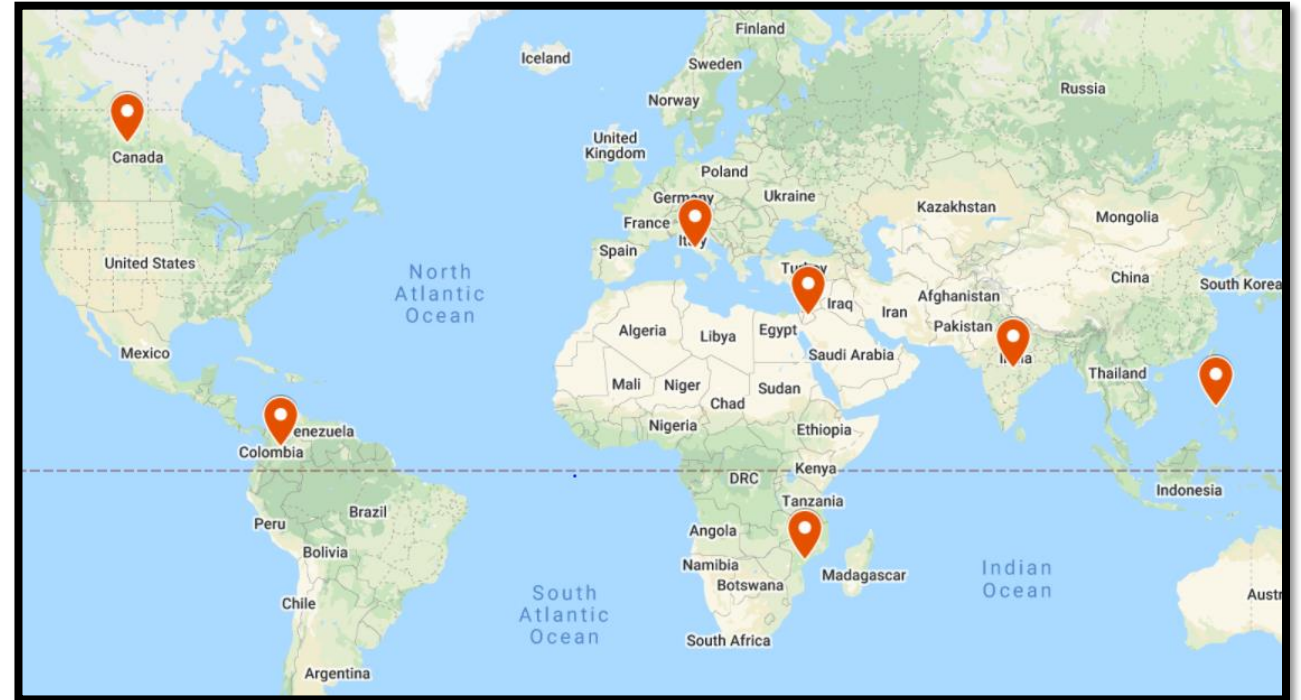
- Reduced child maltreatment referrals
- Reduction in child injuries (based on emergency visits)

- Consistent findings, 15+ studies
- Consistent findings, 6-14 studies
- Mixed findings or limited evidence, 5 or fewer studies

Research Overview

2. Qualitative Case Studies

to understand the implementation experiences and emerging lessons of COVID-19 response strategies in seven countries



Briefs and Full Report can be accessed here:

<https://www.fhi360.org/resource/lego-nurturing-care-and-covid-19-research-briefs>

Emergent Priorities during COVID-19

1

Responding to social protection for immediate health/nutrition needs (directly or via referral)

2

Supporting caregiver mental health through social support and/or stress-reducing activities

3

Strategies to promote positive caregiver-child interactions and playful parenting

Case Studies: Key Strategies

1

Rapid needs assessments + adapting quickly as lessons emerge

2

Risk-taking and piloting new ideas

3

Instant messaging + social media platforms to share parenting and ECD content

4

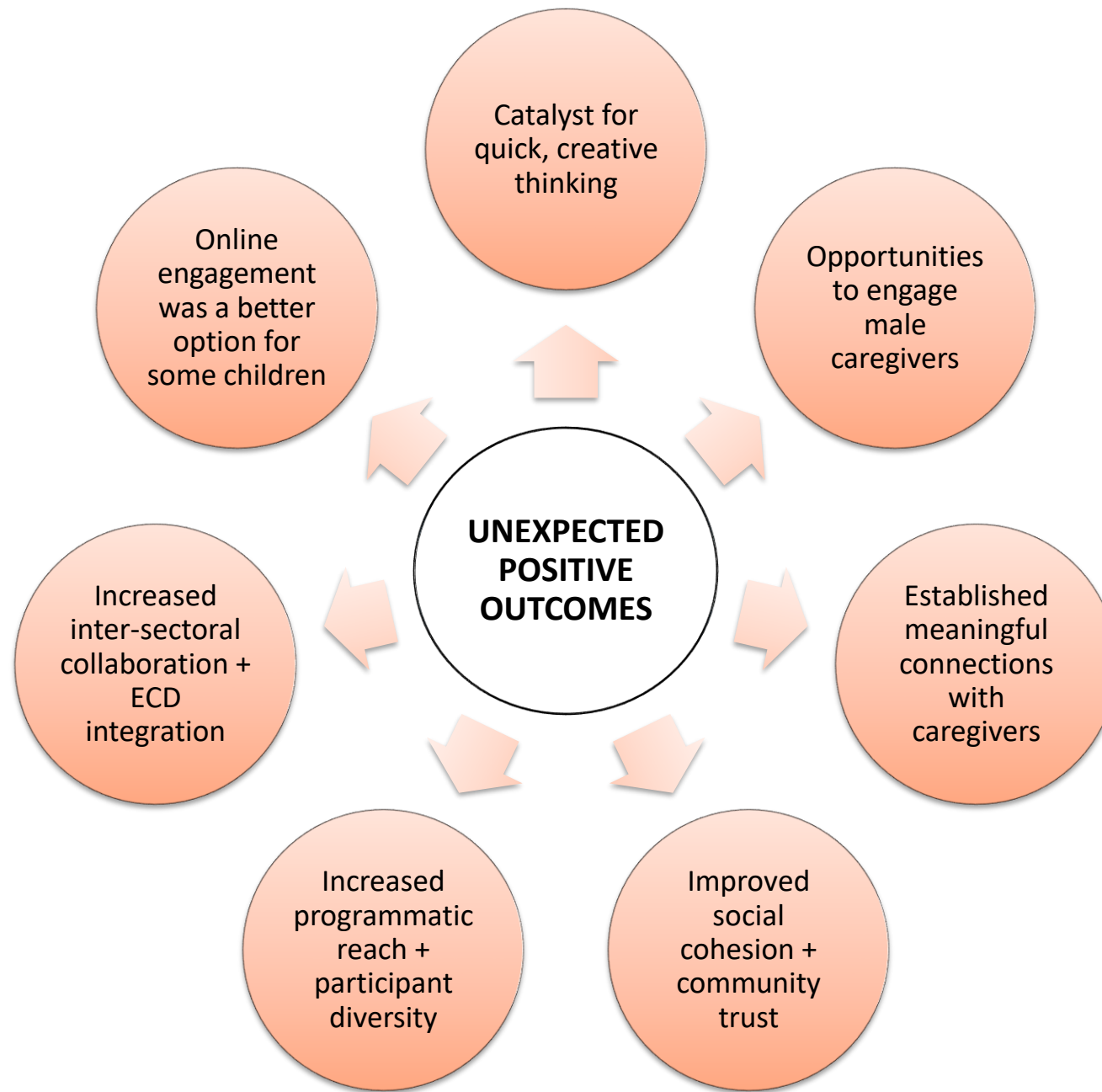
Embedding responses within existing delivery systems (across education, health, and social welfare sectors)

Common Barriers to Program Delivery during COVID-19

- Technological challenges
 - Low computer/internet literacy
 - Inequitable access to technology (smartphones, secure internet connection, airtime)
- Competing childcare/household demands
- Lack of physical contact with children
- Initial difficulties with remote/online delivery:
 - assessing body language
 - engaging participants
 - integrating play

Common Facilitators of Program Delivery during COVID-19

- Flexible donors
- Having an innovative mindset
- Effective, motivated leadership team and staff
- Advocacy skills, ability to identify/generate resources
- Strong community partnerships + leveraging local contextual knowledge



Associazione 21 Luglio (ITALY)



Guendalina Curi

Sociologist, Social Worker and Project Manager



BUILDING OUTPUTS, DISCOVERING OUTCOMES



Before Covid-19

Baby play space: quality moments in the adult-baby relationship.

Covid-19 early stages

Distribution of baby packages

BUILDING OUTPUTS, DISCOVERING OUTCOMES

Post-lockdown

Distribution of baby
packages

Social helpdesk

Baby play space

Midwife group meetings



Ummeed Child Development Center (INDIA)



Dr. Roopa Srinivasan

Director, Developmental Pediatrics & Head of Clinical Services





Challenges encountered at the beginning of the pandemic

Overwhelmed and burnt out caregivers and providers

Conflicting demands on caregivers and providers at home

Domestic violence, food insecurity, lack of access to essentials

Unprecedented situations called for novel approaches

Food security, access to essentials in partnership with CBOs

Mental health support initiatives for providers and caregivers

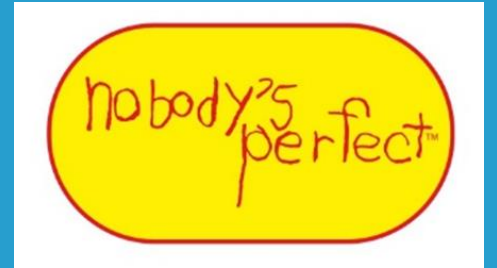
Online service delivery
Hierarchy of connectivity
Co-creation of best practices



Nobody's Perfect Parenting Program (CANADA)

Carmen Paterson-Payne

Provincial Coordinator



What is *Nobody's Perfect*?

Intellectual property
development and dissemination by:



Public Health
Agency of Canada

Agence de la santé
publique du Canada



Overview

- Facilitated parenting program for parents of children under 6 yrs.
- Designed to meet the needs of families who may be facing challenging life circumstances
- Parents participate in a process which enhances their knowledge & understanding of their child's behaviour & development, builds upon their skills, & provides them with practical parenting information

Key Concepts

- Participant-centered
- Respecting values
- Experiential Learning
- Flexibility



Program Objectives

- Promote positive parenting
- Increase parents' understanding of children's health, safety and behaviour
- Help parents build on the skills they have and learn new ones
- Improve parents' self-esteem and coping skills
- Increase self-help and mutual support
- Bring parents in contact with community services and resources

Nobody's Perfect Response to the Covid-19 Pandemic



- Pilot of virtual Nobody's Perfect (NPP) Parent Programs
- Develop national guidelines for online facilitation of NPP
- Pilot virtual NPP Facilitator training
- Develop national guidelines and create/offer professional development for Trainers for training Facilitators, virtually
- Pilot virtual NPP Trainer training



"I loved how interactive and engaging it was, I looked forward to each new day"
– newly trained facilitator

www.nobodysperfect.ca or search Nobody's Perfect at www.canada.ca



"We have recharged together! I don't know what I would have done without this group. Thank you! I know I am not alone."

– parent

"We are building a bike while we are riding it!"

– Facilitator April 2020 after her first virtual parent session

"Those [Nobody's Perfect] facilitators always impresses me with their creativity and flexibility!"

– National Lead at PHAC



Kangaroo Foundation (COLOMBIA)



Dr. Nathalie Charpak

Founder and Director

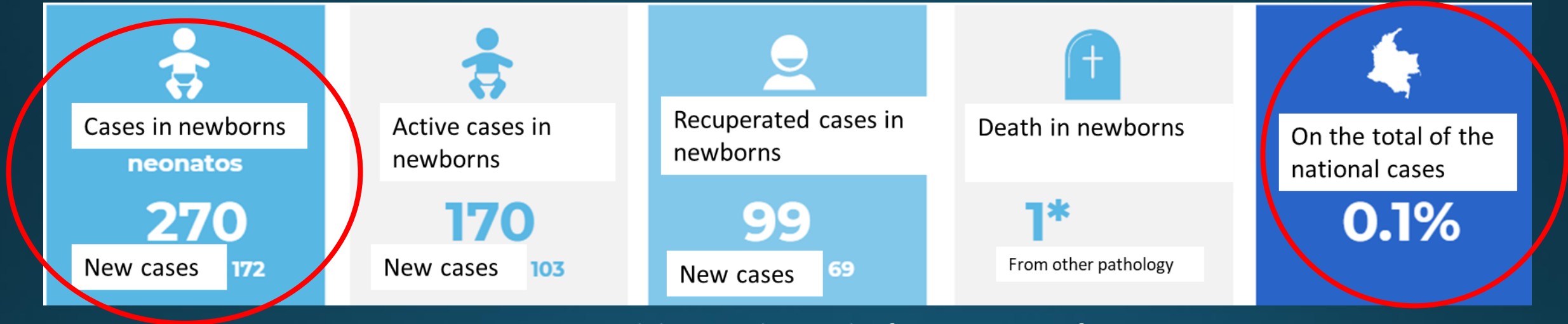


Key problems and proposed solutions to protect Kangaroo Mother Care during Covid-19 pandemic (Kangaroo Foundation of Colombia- 2021)



1) The first key problem: “fear that parents and babies could be contaminants”.
The challenge: to have reliable data to illustrate the problem

We used the August 2020 Report of the Colombian National Institute of Health



Data on 400.000 deliveries during the first semester of 2020

The solution:

Trying to react not emotion-based but data-based.

Recommendations were published and updated once in collaboration with the Society of neonatology and the Health ministry of Colombia.



2) The 2nd key problem: how to adapt the NCIU for KMC practice during the COVID-19 pandemic

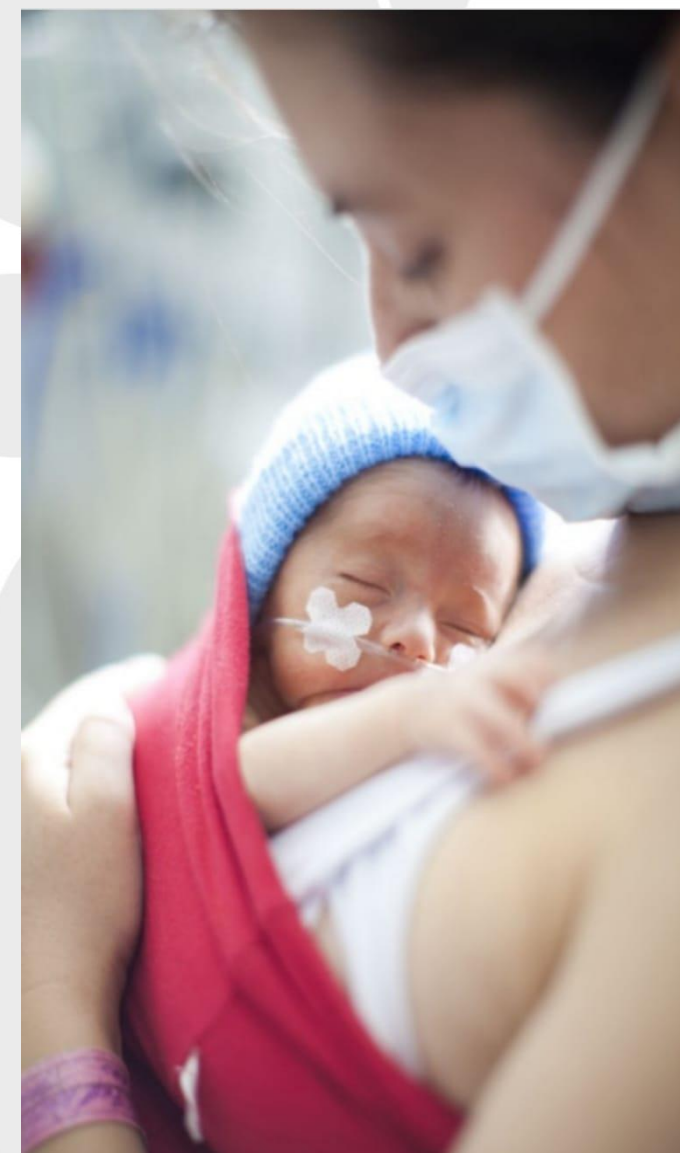
The solution: separation between suspected/confirmed Covid zone and non Covid zone



Parents are not considered as a “visit” even during the COVID pandemic

NICU open 12 to 24 hours for the healthy mother and her healthy baby, skin to skin contact and breastfeeding for early discharge and ambulatory follow up. Only one parent during the COVID-19 pandemic.

What we cannot lose

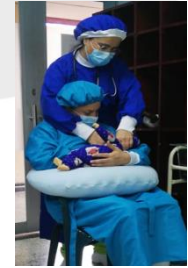


3) The third key problem: how to adapt the ambulatory follow-up KMC program for the premature and LBWI and their family

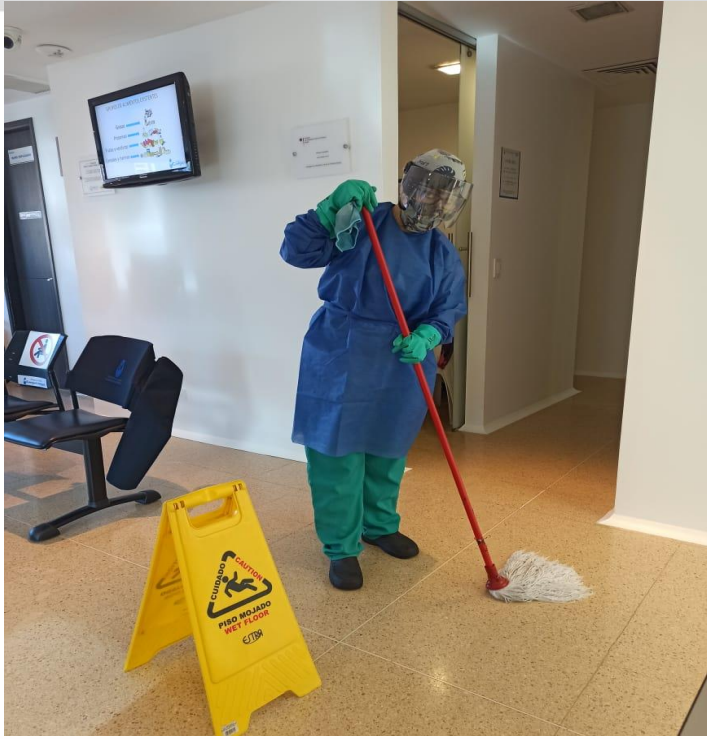


Before

Now: yes, it is possible



The solution: Cleaning protocols and respect of biosecurity measures from the staff and parents and children. “Protect yourself and you will protect the others”



International Rescue Committee - Ahlan Simsim Program (JORDAN)



Ghada Abu Alrous

Early Childhood Development Coordinator



Ahlan Simsim - IRC Jordan: Adapting Reach Up and Learn (RUL) evaluation research to assess the remote delivered program



In each phone call, Community Health Volunteers (CHVs) will:

- Deliver health messages
- Perform a quick well-being check-in for caregivers
- Introduce developmentally – stimulating activities for the children (RUL)

How:

- CHVs recruit families and caregivers from their social networks
- Each CHV has a caseload of 30-40 families; supervisors have a caseload of 12 families
- The intervention is implemented in Mafraq, Amman, Irbid and Ramtha, with research focusing on Irbid and Ramtha only

Lessons learned:

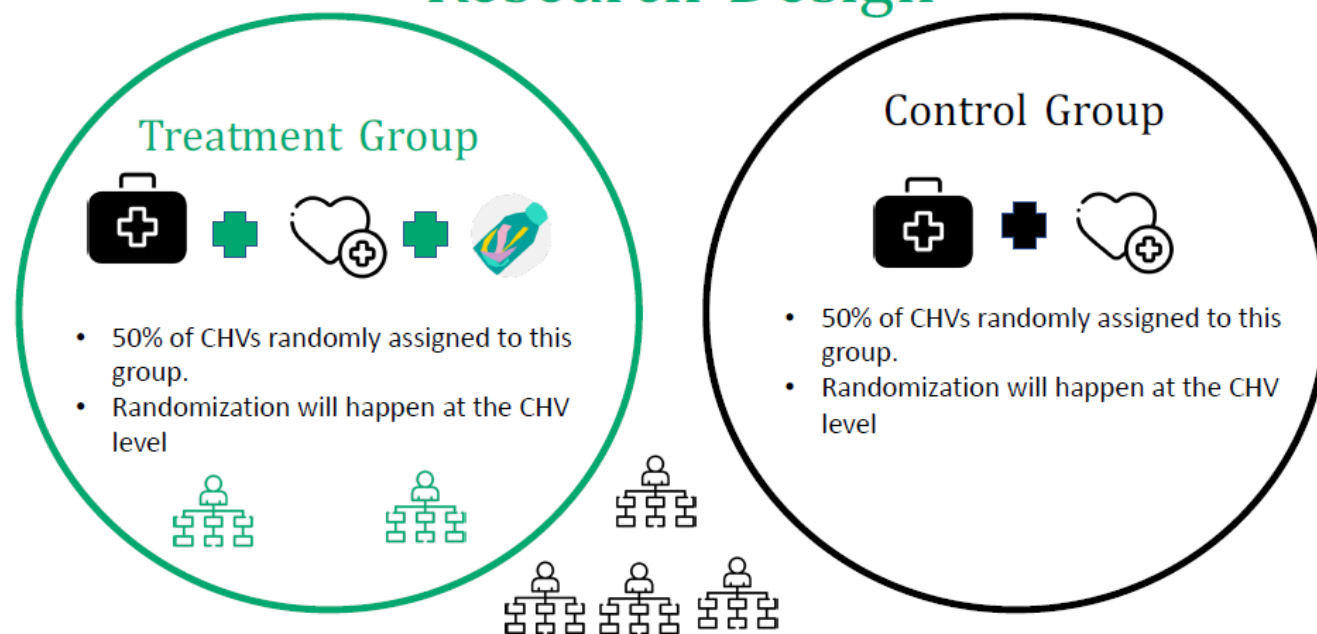
- Facilitator prefer in-person training
- Caregivers in local communities requested the help of each other when they are literate
- Caregivers require more tips in protection and cognitive skills beside SEL, since in some communities they don't have enough sources of guidance

Ahlan Simsim - IRC Jordan: Adapting Reach Up and Learn (RUL) evaluation research to assess the remote delivered

Challenges:

- COVID required a rethink of the RUL programming
 - Time (length of intervention)
 - Modality (in-person vs. remote)
- Research needed to be redesigned:
 - to assess the newly adapted remote version of the program, and
 - to execute the research via remote methods

Research Design



Parenting for Lifelong Health MaPa Program (PHILIPPINES)

Dr. Liane Peña Alampay

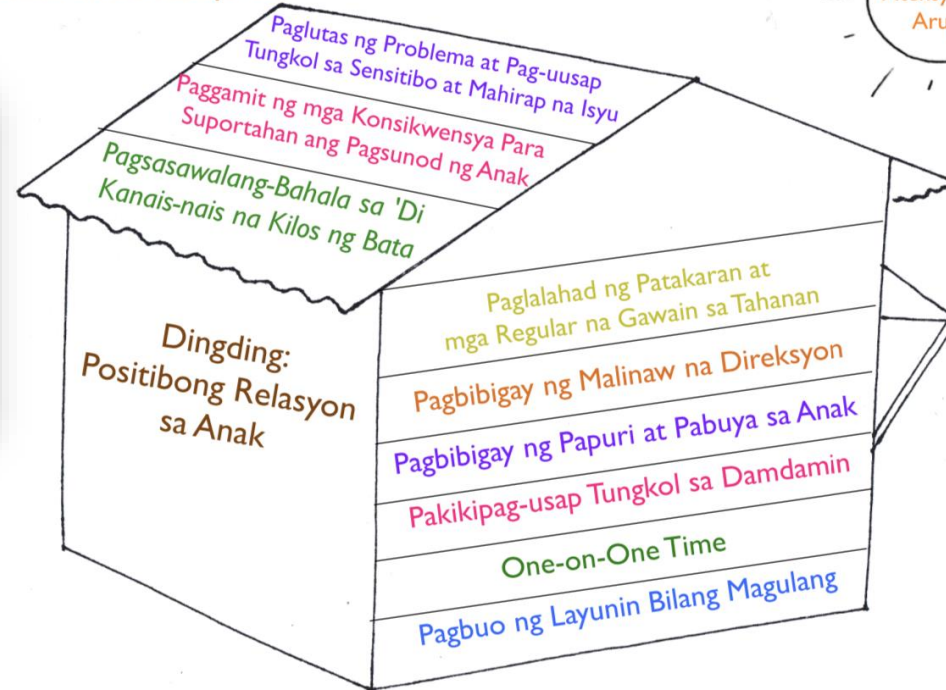
Professor, Ateneo de Manila University



Parenting for Lifelong Health (PLH) - Philippines Masayang Pamilya Para sa Batang Pilipino (MaPa)



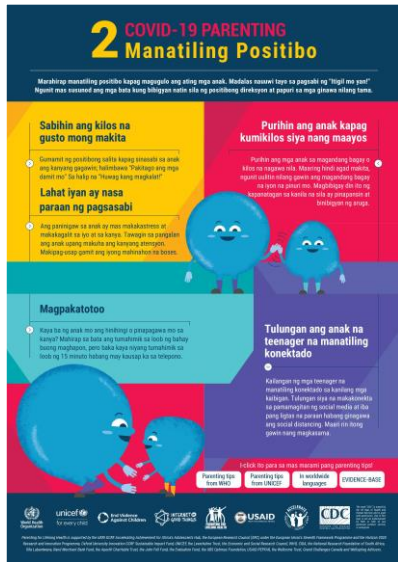
Bubong:
Patakaran at Disiplina



1 MONTH post-MaPa (vs control families)
39% reduction in overall child maltreatment
1 YEAR post-MaPa (vs control families)
23% reduction in overall child maltreatment

N=120

Parenting Tipsheets



Tips are on the evidence-based PLH-MaPa program that has been shown to decrease VAC among 4Ps families

Translated to **12 Philippine languages**

Freely available at: <https://www.covid19parenting.com>

Parenting webinars & radio programs



MaPa Parenting Webinars have capacitated **~8,500 service providers**: social workers, community service providers in GOs & NGOs, CPUs, schools

MaPa sa Radyo Turo-Guro viewed by **~25,000 public school teachers and parents** in Facebook Live

MaPaChat



Digital parent support groups based on PLH-MaPa (ages 2-17)

Feasibility pilot in Valenzuela City with 40 families



Integration in DSWD programs:

eFDS.residential care.foster care

PLH-MaPa parenting resources will be integrated in the national 4Ps conditional cash transfer program.

~6,000 social workers & community service providers will be trained to use the resources with families in communities and in residential and foster care facilities.



PATH (MOZAMBIQUE)

Svetlana Karuskina-Drivdale

Senior Regional ECD Specialist



USING RADIO TO PROMOTE ECD IN WAITING ROOMS

Play sessions in the health center waiting rooms were replaced with **radio sessions** broadcasting in the local language:

- interactive humouristic radio dialogues on child development & nutrition
- children's songs

When questioned, caregivers were able to mention their favorite songs and give examples of some ECD practices they heard on the radio and adopted at home.



USING STORIES TO REACH CHILDREN & CAREGIVERS

- A story of 6-year-old Vania who learns what COVID-19 is and how she can continue playing, learning, and stay safe during the pandemic.
- Approved by 3 national Ministries
- Disseminated to over 100 community radios through a local communications partner
 - Radios dramatized the story
 - Children called in to answer questions, made drawings about the story

The story format and simple language resonated well with children and adults alike.

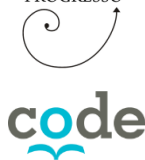
Radio stations are requesting a “sequel” to Vania.



Vânia e o coronavírus

PATH
10:::AO+//2□□

PROGRESSO



O Paulo desenhou um monstro redondo e estranho, com muitos chifres. Disse: – Vânia, este é o CORONAVÍRUS!

Eu fiquei um pouco assustada quando vi o monstro...

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Mas quando eu pensei mais, fiquei triste:

– Assim já não posso brincar com as minhas amigas?

O mano disse-me:

– Sim, é verdade, agora não podes brincar com as tuas amigas! MAS...

- Podes falar com as tuas amigas por telefone!
- A cada semana, podes desenhar ou escrever uma carta para as tuas amigas. Podes entregar as cartas a mamã para ela entregar as tuas amigas!



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THANK YOU!

Research Briefs and the Full Case Study Report can be accessed here:
<https://www.fhi360.org/resource/lego-nurturing-care-and-covid-19-research-briefs>

Question & Answer Period

Moderated by: Vanessa Cavallera

Technical Officer, World Health Organization