Rapid assessment of national preparedness for implementing nurturing care for early childhood development in South-East Asia

Summary report from seven countries
Bangladesh, Bhutan, India, Maldives, Nepal, Sri Lanka, Timor-Leste
Regional Context

• Significant reduction in mortality: maternal, neonatal and child

• Large proportion of children at risk of poor development

• Significant inequity amid economic growth

• Opportunities for investing in ECD:
  • Regional commitments:
    SDGs; UHC; Global Strategy: Survive-Thrive-Transform
  • Improving economic development in SEAR
  • H6 partnership – UNICEF is strong partner in NC for ECD
The Strategic Framework outlines evidence-based, age-appropriate interventions that can be delivered at health facilities, communities and families through the health system, integrated into primary health care.

It describes the steps each country could take to develop a plan for promoting early childhood development, focusing on what can be implemented through the health sector working with other sectors and partners.
Rapid assessment of national preparedness for implementing NC for ECD
Bangladesh, Bhutan, India, Maldives, Nepal, Sri Lanka, Timor-Leste

Objectives

• Map the national legislation, policies, programmes across different sectors
• Assess the range of interventions from conception to 3 years across various sectors and extent of implementation
• Assess intersectoral coordination and role of partners
• Propose recommendations for at-scale implementation of NC for ECD

Process:

• Assessment tool developed with UNICEF, piloted in Bangkok meeting - covers 5 domains
• WHO country Office coordinated with stakeholders
• Desk review of documents, reports and publications
• Key people interviews

Limitations:

• 7 out of 11 countries participated
• Fragmented information across multiple ministries
• Information gaps and inconsistencies

Rapid assessment of national preparedness for implementing nurturing care for early childhood development (who.int)
Governance of ECD programs

- Ministries of Health, Nutrition and Education are responsible for different components of NC for ECD: All 7 countries
- Have nodal persons appointed for ECD in different ministries at the national level: 6 of the 7 countries (except Bangladesh)
- Have officers at subnational levels in these ministries: Bhutan, India, Sri Lanka, Timor Leste

National ECD Steering Committee

- High level multisectoral Council, Steering or Coordinating Committee: 5 countries (except Maldives, Timor Leste)
- Ineffective in practice: All 7 countries
  - Infrequent meetings
  - Mostly, advisory capacity – no mandate
  - No monitoring of recommendations
Relevant policies for Nurturing Care for ECD

- **Approved national ECD policies**: Bangladesh, India, Nepal, Sri Lanka
- **Draft policies**: Bhutan and Timor Leste
- **One ministry publishes the policy that mentions linkage with other policies within and outside the ministry, but no operational mechanism**
- **No specific policy** in Maldives but various ECD activities implemented in their health programme

**International conventions**
- **International Code** of Marketing of Breastmilk Substitutes: Except Bhutan and Timor Leste
- **Convention on the Rights of the Child**: All 7 countries
- **Hague Convention** on the Protection of Children and Cooperation in Respect of Intercountry Adoption: India and Sri Lanka
ECD implementation plans

• Specific ECD programmes with annual plans and budget: India (Health, WCD, Edu), Sri Lanka (Health, Social, Edu)

• Interventions for ECD included in multiple programmes:
  - In health, nutrition and education sectors in all 7 countries
  - In social welfare sector: Nepal, Sri Lanka and Timor Leste

Do policies cover diversity and living conditions?

• Policies cover diversity in all 7 countries

• Inadequately translated into implementation

• Inequities and discriminations continue to exist
  - Vulnerable parents and children are left out
  - Families and children with special needs are left out
Inadequate resources for ECD programmes

**Budget:**

- All countries report budget allocations in programmes across sectors
- Most reported that budgets are inadequate

**Human resources:** All countries report that staffing for ECD is inadequate in all involved sectors

- Staff shortages - Limitations in funding for recruitment
- Vacancies and High turnover
- Overburdened staff who cannot include interventions for ECD within their routine duties
- Lack of training – not competent
- Poor remuneration and no incentives
Services for NC for ECD across the 5 components

• **Good health and nutrition:** MCH programmes in *all 7 countries* - health and nutrition ministries

• **Responsive care:** *Bangladesh, Bhutan, India, Maldives and Sri Lanka (Nep, TLS)* - multiple ministries (health, nutrition, education and social welfare)

• **Early learning:** 4 countries (*Bangladesh, Bhutan, India, Sri Lanka*) - Mainly as Preschool Education; Opportunities for early learning at home /in formal/informal spaces before preschool are not at-scale

• **Security and safety:** *Bangladesh, India, Sri Lanka and Timor Leste* - in Social welfare ministries

• **Interventions for wellbeing of caregivers:** *Bangladesh, India, Sri Lanka* - Health; *Bangladesh, India, Nepal* - Social Welfare

• **Parenting program** for ECD: *Nepal, Timor Leste* - in Social Welfare sector; *India* - Health / Nutrition Sector
Services for nurturing care

Counselling of caregivers during home visits

• Child Health, Nutrition and Safety & Security: 6 countries (*Bangladesh*, *Bhutan*, *India*, *Nepal*, *Sri Lanka*, *Timor Leste*)

• Early learning: 4 countries (*Bangladesh*, *Bhutan*, *India*, *Sri Lanka*)

• Responsive caregiving: 5 countries (*Bangladesh*, *Bhutan*, *India*, *Maldives*, *Sri Lanka*)

• Children with special needs: *Bangladesh, Maldives for children >4 years old*

Counselling of caregivers at facilities

• Health sector: 5 countries (*Bangladesh*, *India*, *Maldives*, *Sri Lanka*, *Timor Leste*)

• Nutrition sector: 2 Countries (*India*, *Sri Lanka*)

• Social welfare sector: 1 country (*Sri Lanka*)
Community-based approaches for nurturing care

Community services, Community / social support groups: All 7

• District level advocacy program
• Orientation for local level government; Village committees
• Community celebrations and events
• Mother support groups, Parent groups
• Awareness programs on nutrition, good parenting

Media approaches for nurturing care: All 7

• Mass media: campaigns using electronic and print messages for creating awareness and publicity for behaviour change, Radio health programs
• Mid-media: art/folk media, videos on ECD produced by health sector for visioning by mothers in clinics, printed messages for parents
Provision of Crèche, play centres, day care centres

- **Health sector**: 2 countries (*Bangladesh, Nepal*)
- **Nutrition sector**: 4 countries (*Bangladesh, India, Nepal, Sri Lanka*)
- **Education sector**: 3 countries (*Bangladesh, India, Nepal*)
- **Woman & Child, Social welfare sector**: 4 countries (*Bangladesh, India, Nepal, Sri Lanka*)

**Services for children with special needs: Partial**

- **Early identification and referral** of children with developmental delays/disabilities: *In all countries – but inadequate*
- **Services for children with special needs**: *Bangladesh, Maldives, Nepal: but inadequate*
- **Community-based supports for parents with children of special needs**: *Bangladesh, Bhutan, India*
Challenges in monitoring and evaluation

• No functional monitoring and auditing system for coverage of ECD programmes

• No mechanism to review quality and impact of the service delivery

• No standard monitoring indicators and tools for ECD
  • Health sector data on early child care and development is inadequate and fragmented
  • No structured data collection on ECE in education sector
  • No data on corporal punishment, violence against children
  • No data on children with working mothers

• Lack of joint monitoring across sectors
## Summary:

### Nurturing Care services across sectors

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<th>Health</th>
<th>Nutrition</th>
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### Health & Nutrition

- **Pregnancy**
- **0–3 years**
- **3–6 years**

**Responsive caregiving**

**Early learning**

**Safety/security**

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# Summary: Strategic actions for NC

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<th>NCF Elements</th>
<th>BAN</th>
<th>BHU</th>
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Challenges in Intra- and Inter-sectoral Coordination

• Inter-sectoral coordination mechanisms intended, but difficult to realize in practice
• Lack of a common understanding of NC for ECD within and across sectors
• Poor leadership and overlapping mandates within and across different ministries
• Poor engagement and coordination with:
  • Parents, families and community leaders
  • NGOs, CSOs
  • Private sector
Overall recommendations proposed by countries for advancing nurturing care for early childhood development
Recommendations for Leadership / Policy / Plan

- Establish a high-power Council/Commission at national and province levels and improve its functions:
  - Provide guidance to all sectors on coordinated work
  - Oversee implementation across sectors
  - Monitor across sectors
  - Ensure accountability across sectors

- Develop a specific comprehensive national multisectoral ECD policy:
  - Covering all relevant sectors
  - Covering all domains of NCF
  - Clear mandate, roles and responsibilities, implementation plans and targets across sectors

- Necessary legislation to strengthen the national ECD policies
Recommendations for Plan / Programme

- **Develop a multi-sectoral strategic plan** through involvement of all sectors/parties (Joint planning)
- **Increase budgetary allocations** in all involved sectors
- **Ensure competent human resources** in all involved sectors
- **Ensure engagement with parents and families for planning and implementation** in all involved sectors
- **Strengthen M & E mechanisms** across all involved sectors (Joint monitoring plans)
- **Strengthen evidence, research, innovation and documentation** in all involved sectors
Recommendations for service delivery in all sectors

- **Service Packages:** Identify and prioritize evidence-based interventions across the involved sectors
- **Mainstream responsive care component** and link aspects of child protection and early learning in all programs
- **Strengthen services for at-risk and affected children**
- **Service delivery channels:**
  - Use multiple service delivery channels in all sectors
  - Define standards of services that are child-centred and rights based
- **Service providers:**
  - Ensure adequate numbers
  - Appropriate competencies: In-service and pre-service training
  - Upgrade status of ECD providers, provide incentives in addition to salaries, and appraise and reward their performance