Opportunities to adapt health and nutrition services for pregnant women and children to be supportive of nurturing care

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https://nurturing-care.org/practiceguide/
Ensuring all children survive and thrive

What the child’s brain and body expects and needs

Enabling environments for nurturing care
Operationalizing the Nurturing Care Framework

The five strategic actions

- Lead and invest
- Focus on families and their communities
- Strengthen services
- Monitor progress
- Scale up and innovate

Operationalizing Nurturing Care for Early Childhood Development
The role of the health sector alongside other sectors and actors

Nurturing care handbook: https://nurturing-care.org/handbook
The role of health and nutrition services in strengthening nurturing care

- Parents and other caregivers are primarily responsible for their children’s care and support
- All caregivers require some support to provide nurturing care
- Some caregivers might have limited or disrupted capacity
- First time/adolescent mothers and fathers, conflict within the household, poverty

Opportunity
Caregivers and children have regular interaction with providers of health and nutrition services, from pregnancy through early childhood
Strengthening nurturing care through health and nutrition services

Health and nutrition services already support caregivers with two of the five components of nurturing care.

How can health and nutrition services better support caregivers with the other three components of nurturing care? How can health and nutrition services support caregiver well-being?
Tools that address one or more components
https://nurturing-care.org/tag/training-materials

And so much more!

• Reach up and Learn
• Parenting for lifelong health – tip sheets,
• Videos
Nurturing care practice guide

➢ Targets providers and managers of health and nutrition services
➢ Focuses on three of five inter-related components of nurturing care, as well as on caregiver well-being
➢ Introduces considerations to serve all children and their caregivers, including those with chronic illness, developmental delays and disabilities
➢ Is relevant for humanitarian and emergency settings

https://nurturing-care.org/practiceguide/
Focuses on universal support

- **POPULATION COVERAGE**
  - All caregivers and children
  - Families and children at risk
  - Families of children with additional needs

- **INTENSITY OF INTERVENTION**
  - Universal support
  - Targeted support
  - Indicated support
  - Specialised services

- **Additional contacts and benefits**
- **National policies, information and basic support**
Nurturing care practice guide

Part 1
Nurturing care: another look
Rationale for strengthening support for responsive caregiving, opportunities for early learning, safety and security, and caregiver well-being in health and nutrition services

Part 2
Preparing health and nutrition services
Role of managers to reduce barriers, build skills of providers, identify resources for additional support

Part 3
Supporting families in existing services
Practical examples of what providers can do in existing services throughout the lifecourse

Photo credit: © UNICEF/UN0156445/Voronin
Nurturing care: another look
RESPONSIVE CAREGIVING

Refers to the ability of the caregiver to notice, understand, and respond to their child’s signals in a timely and appropriate manner. Considered the foundational component because responsive caregivers are better able to support the other four components.
OPPORTUNITIES FOR EARLY LEARNING

Refers to any opportunity for the infant or child to interact with a person, place, or object in their environment. Recognizes that every interaction (positive or negative) or absence of an interaction is contributing to the child’s brain development and laying the foundation for later learning.
SAFETY AND SECURITY

Refers to safe and secure environments for children and their families. Includes physical dangers, emotional stress, environmental risks (e.g., pollution), and access to food and water.
CAREGIVER WELL-BEING

Refers to caregivers’ physical and mental health. Recognizes that caregivers are best placed to provide their children nurturing care but can only do so effectively when they are able to care for themselves and get support when problems arise.

Photo credit: Plan Ecuador
Throughout their regular interactions with caregivers, **providers can**

- Observe
- Ask and discuss
- Introduce and model
- Acknowledge and encourage positive caregiver practices
- Problem-solve

And support caregivers

- To be more responsive
- To recognize opportunities to help their children learn
- To provide a safe and protective environment
- To be well
What can managers do?
Enabling health and nutrition services to support nurturing care: what can managers do?

1. Make facilities accessible and welcoming for all children
2. Adapt to humanitarian and health crises
3. Identify needs and advocate for specialized services
2 Enabling health and nutrition services to support nurturing care: what can managers do?

4. Build the capacity of service providers
   • Interpersonal communication skills
   • Skills to support caregiver practices

5. Strengthen services to support caregiving
   • Integrated management protocols
   • Supervisory checklists, mentoring support

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Table 2.1: Skills providers need to strengthen caregiver practices for nurturing care

**SKILLS FOR INTERPERSONAL COMMUNICATION**

- For all caregiver-provider contacts
  - Ask open-ended questions, listen attentively and observe interactions and practices.
  - Praise and reinforce the efforts of families to care for their children.
  - Identify family difficulties in providing care at home or using health services.
  - Empathize with caregiver concerns and assist caregivers in solving problems through shared decision-making.
  - Coach or guide caregivers in practising new skills, identifying difficulties they might have and help solve problems.

**SKILLS TO SUPPORT CAREGIVER PRACTICES**

- For responsive caregiving
  - Observe cues as children interact with caregivers (e.g., expressions of hunger, discomfort, fear, needs for affection and interest).
  - Observe the responses of caregivers to their children’s cues.
  - Engage caregivers in practising responsive interactions, starting before the child is born and continuing through the early years.
  - Emphasize the importance of responsive caregiving to support children who are acutely ill or have chronic conditions, and help caregivers interpret and respond to their cues.
  - Demonstrate responsiveness when asking about caregiver concerns.
  - Model responsiveness with the child during the visit while weighing, immunizing or taking the child’s temperature. Actively engage, explain and respond to the child’s cues of fear and curiosity, and encourage the caregiver’s help.

- For opportunities for early learning
  - Identify existing and missed opportunities for caregivers to play and communicate with their young children at home.
  - Counsel caregivers on how to start very early, even during pregnancy, to play and communicate with their young children.
  - Identify developmentally-appropriate learning activities and use them to strengthen caregiver-child interactions.
  - Model ways to praise and encourage caregivers in what they are doing well, and in trying out new tasks with their children.

- For safety and security
  - Help caregivers identify and correct environmental hazards to the child’s health and development in the home and in the community.
  - Observe for signs of potential neglect and abuse of children and their caregivers, and follow reporting protocols when necessary.
  - Help caregivers stop unhealthy behaviours such as smoking, alcohol or other substance abuse.
  - Help caregivers establish routines for eating and sleeping.

- For supporting caregiver well-being
  - Listen to the caregiver(s) and build a trusting confidence relationship.
  - Work together to understand how caregivers feel about their children and identify stressors the caregiver is facing.
  - Demonstrate relaxation exercises and other practices that can help caregivers cope with stress.
  - Support caregivers in problem-solving and develop approaches for dealing with family conflict.
  - Connect caregivers to peer groups and other community resources to support their own well-being and that of their children.
What can practitioners do?
Services where providers can support caregivers to provide nurturing care and support caregiver well-being

USE EXISTING SERVICES ALONG THE LIFECOURSE TO STRENGTHEN CAREGIVER PRACTICES AND SUPPORT CAREGIVER WELL-BEING.

- Pregnancy and childbirth
- Newborn period
- Infancy
- Early childhood

- Antenatal care
  - Postnatal care
  - Well-child care
  - Acute and chronic care
    (sick child care: in- and out-patient, nutritional rehabilitation, chronic care)
Example: sick child services – outpatient care

3.4. Sick-child care and follow-up: managing childhood illness responsively

When a child is sick, managing the child’s illness is the priority for service providers. It is also the priority for caregivers, and they need skills to do it well. Caregivers need to notice how the child feels, recognize signs of illness, and respond quickly when the child requires medical attention. Being responsive enables the caregiver to seek timely medical care, give a child medicine, and comfort the child in pain and discomfort. However, time is limited to help families improve their caregiving practices when the child is sick. Strengthening caregiving practices must be accomplished within the priority of learning how to care for the sick child.

Managing the sick child: treating the child in the outpatient clinic and preparing for home care

A sick child seen in a clinic who is not referred to hospital may need a caregiver at home to give effective treatment, provide responsive and supportive care and nurture the child to health. For example, caregivers should learn how to prepare and feed a child who refuses to eat. They need to know how to give the child medicine, and to troubleshoot common problems if the child spits it out. The WHO and UNICEF integrated management of childhood illness protocol (IMCI) for managing the sick child in a first-level health facility and in the community stress that the caregiver needs to practice preparing and giving medication correctly. This is an opportunity to help the caregiver learn how to be aware and respond to the difficulties the child may have.

Children with cognitive, physical or behavioural difficulties may have particular complications with eating and receiving the medical care they need. They may be lethargic, withdraw and reject physical touch. The provider can demonstrate to a caregiver how to draw the child’s interest, activate swallowing and prevent choking and other problems.

In a follow-up visit, if the child has improved, there is more time to strengthen other caregiver practices. Some practices, including responsive play, can help the child catch up if there has been a delay of growth and development during the illness.

Caregivers may face additional challenges and stress to care for a sick child while having to manage work, household chores and take care of other children. They might require support.

Table 3.4.1 gives suggestions for what providers can do to strengthen caregiver practices and support caregiver well-being during outpatient sick-child visits.

<table>
<thead>
<tr>
<th>COMPONENT OF NURTURING CARE</th>
<th>CAREGIVER PRACTICES</th>
<th>EXAMPLES OF WHAT SERVICE PROVIDERS CAN DO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsive caregiving</td>
<td></td>
<td>□ Respond appropriately and directly to the signals and the child’s needs, which differ when the child is sick, or has special needs.</td>
</tr>
<tr>
<td>Safety and security</td>
<td></td>
<td>□ Demonstrate Talk to the child softly, explaining as you go through the steps of the visit. Engage the child, rather than force the child’s response. For example, hold your hand out and ask the child to give you her hand. Tell the child that you will take her temperature.</td>
</tr>
<tr>
<td>Making a safe environment</td>
<td></td>
<td>□ Demonstrate How to store your medicines at home? Discuss how to keep medicines dry and safe, and away from children.</td>
</tr>
</tbody>
</table>

Table 3.4.1. Continued

<table>
<thead>
<tr>
<th>SUPPORTING CAREGIVER WELL-BEING</th>
<th>EXAMPLES OF WHAT SERVICE PROVIDERS CAN DO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting caregiver well-being</td>
<td>□ Discuss Caring for a child who is sick can be difficult and tiring. What can you do to relax, even for 10 minutes at a time?</td>
</tr>
<tr>
<td>Safety and security</td>
<td>□ Ask what extra help do you need from your family, so you can spend more time with your child and care for yourself? Who could you ask for help?</td>
</tr>
</tbody>
</table>

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THREE ways to view the nurturing care practice guide

1. Download the entire guide
2. Download by section
3. Download by service

Three annexes (available as individual files)

1. Additional reading on nurturing care
2. Training resources to develop the skills of providers
3. Strengthening nurturing care to support caregiver well-being across the three levels of support

Three tables (available as individual files)

1. Caregiver practices
2. Providers' skills
3. What managers can do

https://nurturing-care.org/practiceguide/
What’s next? ways to use this guide

- Convene at country level to review
  - What is already happening – where can you complement
  - What are new ideas?
  - Consider phased approach
    - What are ‘low hanging fruit’
    - Start with certain services, document, learn and scale
- Institutionalize skills building
  - Are any of the foundational training packages used?
  - Pre- and in-service training
  - Incorporate in mentoring and supervision
- Disseminate the guide/sections of the guide
  - Facility managers
  - Providers (part 3 sections)
- Document, inform scale up and cross-country learning

Not everything has to be done all at once
Thank you

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