

# Gaps and New Developments

Regional Meeting on Measurement of  
Early Childhood Development in Eastern and Southern Africa

24–27 October 2023  
Kigali, Rwanda



Bernadette Daelmans, WHO  
Nicole Petrowski, UNICEF

unicef   
for every child

 World Health  
Organization  
African Region

**IMPROVING  
EARLY  
CHILDHOOD  
DEVELOPMENT:**  
WHO Guideline



## 1 RESPONSIVE CAREGIVING

All infants and children should receive responsive care during the first 3 years of life; parents and other caregivers should be supported to provide responsive care.

*Strength of recommendation: Strong*

*Quality of evidence: Moderate (for responsive care)*



## 2 PROMOTE EARLY LEARNING

All infants and children should have early learning activities with their parents and other caregivers during the first 3 years of life; parents and other caregivers should be supported to engage in early learning with their infants and children.

*Strength of recommendation: Strong*

*Quality of evidence: Moderate (for early learning)*



## 3 INTEGRATE CAREGIVING AND NUTRITION INTERVENTIONS

Support for responsive care and early learning should be included as part of interventions for optimal nutrition of infants and young children.

*Strength of recommendation: Strong*

*Quality of evidence: Moderate*



## 4 SUPPORT MATERNAL MENTAL HEALTH

Psychosocial interventions to support maternal mental health should be integrated into early childhood health and development services.

*Strength of recommendation: Strong*

*Quality of evidence: Moderate*



# Definition of responsive caregiving

Responsive caregiving is based on caregiver **sensitivity** and **responsiveness** to the child. It is care that is **prompt, consistent, contingent,** and **appropriate** to the child's cues, signals, behaviours and needs. It refers to secure attachment and caregivers' abilities to incorporate the child's signals, to be attuned to and identify the child's needs and wants, to follow the child's lead, help the child to focus, support the child's exploration and scaffold development. (adapted from WHO ECD guideline, 2020)

# Towards valid and reliable measures for assessment

## Measurement tools and indicators for assessing nurturing care for early childhood development:

**A scoping review** [Measurement tools and indicators for assessing nurturing care for early childhood development: A scoping review | PLOS Global Public Health](#)

- Considerable variation in constructs assessed, measures used, and analytic construction of variables for outcomes of early learning, responsive caregiving, and safety and security
- This heterogeneity and lack of standardization reporting/analysis of outcomes precludes comparisons across studies, contexts, and time
- Need for more measurement research and statistical analyses to determine the most optimal and robust indicators for each nurturing care component
- Guidance for optimal measures/indicators will need to be tailored according to the context, measurement purpose, population/age, and other logistical considerations

## The Nurturing Care Framework: Indicators for Measuring Responsive Care and Early Learning Activities

<https://nurturing-care.org/assessing-responsive-caregiving-and-early-learning-activities>

Assessing responsive caregiving:

- Observational (live or video-recorded)
- 5-minute window for observation
- Examples are adapted to given context during training/field testing
- Dimensions are conceptually aligned with definition and were selected from methods prior used in HICs and LMICs
- Freely available

# Observing caregiver-child interactions

Dimensions	Indicator	Examples of Definitions
Responsive interactions	Verbal	Caregiver repeats, builds on, or expands on child's talk, or verbally responds to child's activity or question
	Non-verbal	Caregiver allows child take the lead and follows their lead
Caregiver-initiated interactions	Verbal	Caregiver directs or instructs child to engage in an activity
	Non-verbal	Caregiver manages activity and the materials that child and caregiver are engaged in
Negative affect and action	Verbal	Caregiver commands child to stop engaging in activity he/she is interested in, if activity is also safe and productive
	Non-verbal	Caregiver abruptly moves child, handles child roughly, pushes, shakes or hits child or physically removes play object

**Instructions for the Coder:** Provide the caregiver and child with a toy and/or picture corresponding to the age of the child. Code the frequency of all meaningful interactions.

**Instructions to the Caregiver:** We are asking you to engage with your child as you normally would about these pictures/materials.

# Application of the methodology



## Giving Children the Best Start in Life:

Resources, Experiences, and Lessons Learned from USAID Advancing Nutrition's Work Integrating Nutrition, Responsive Care, and Early Learning

August 8, 2023

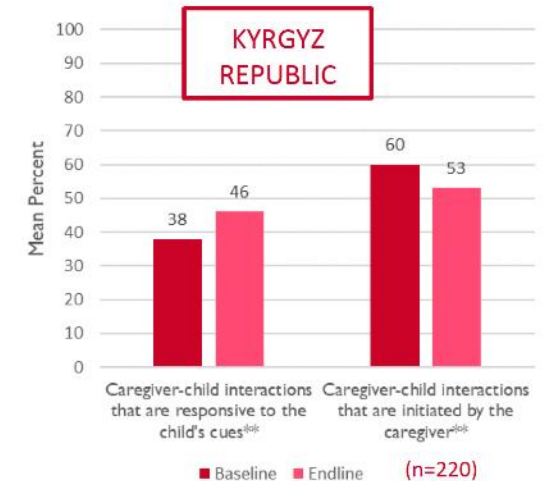
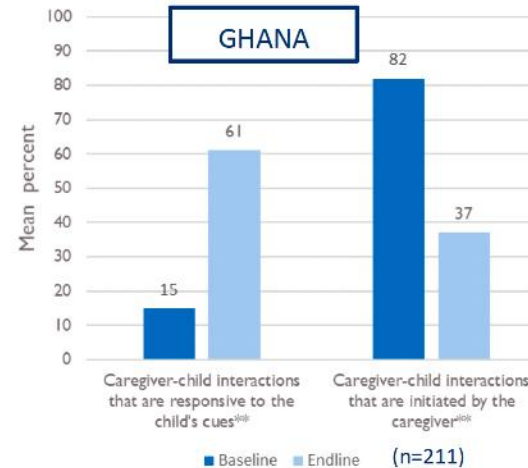
Co-hosted by the Nutrition subgroup of the CHTF



Photo credit: Bishnu Prasad Ghimire/Global Health Media

USAID ADVANCING NUTRITION

## Findings: Responsive Caregiving



USAID ADVANCING NUTRITION

\*\*change significant at p < .05

With thanks to USAID Advancing Nutrition for sharing the data

# Beyond measurement to practice

If programs are to be effective in supporting caregivers to be responsive to their young child, then providers must have the skills to:

- Observe caregiver-child interactions
- Praise good practice
- Demonstrate, advise, and coach on responsive interactions between caregiver and child



Photo credit:  
Aga Khan Development Network / Christopher Wilton-Steer

# New developments in measurement: Responsive caregiving

## Current MICS question on early stimulation

<p>ECS. Since last (<i>day of interview minus 3</i>), did you or any household member age 15 or over engage in any of the following activities with (<i>name</i>):</p> <p><i>A foster/stepmother or father living in the household who engaged with the child should be coded as mother or father.</i></p>		
[A] Reading books or looking at picture books with ( <i>name</i> )?	YES.....1 NO.....2 2 ⇒EC4[B] DK.....8 8 ⇒EC4[B]	
[A1] Who in the household engaged in this activity with ( <i>name</i> )? Probe: Anyone else?	MOTHER.....A FATHER.....B OTHER.....X	
[B] Telling stories to ( <i>name</i> )?	YES.....1 NO.....2 2 ⇒EC4[C] DK.....8 8 ⇒EC4[C]	
[B1] Who in the household engaged in this activity with ( <i>name</i> )? Probe: Anyone else?	MOTHER.....A FATHER.....B OTHER.....X	
[C] Singing songs to or with ( <i>name</i> ), including lullabies?	YES.....1 NO.....2 2 ⇒EC4[D] DK.....8 8 ⇒EC4[D]	
[C1] Who in the household engaged in this activity with ( <i>name</i> )? Probe: Anyone else?	MOTHER.....A FATHER.....B OTHER.....X	
[D] Taking ( <i>name</i> ) outside the home?	YES.....1 NO.....2 2 ⇒EC4[E] DK.....8 8 ⇒EC4[E]	
[D1] Who in the household engaged in this activity with ( <i>name</i> )? Probe: Anyone else?	MOTHER.....A FATHER.....B OTHER.....X	
[E] Playing with ( <i>name</i> )?	YES.....1 NO.....2 2 ⇒EC4[E] DK.....8 8 ⇒EC4[E]	
[E1] Who in the household engaged in this activity with ( <i>name</i> )? Probe: Anyone else?	MOTHER.....A FATHER.....B OTHER.....X	
[F] Naming, counting, or drawing <u>things</u> for or with ( <i>name</i> )?	YES.....1 NO.....2 2 ⇒EC6 DK.....8 8 ⇒EC6	
[F1] Who in the household engaged in this activity with ( <i>name</i> )? Probe: Anyone else?	MOTHER.....A FATHER.....B OTHER.....X	

## Rationale

Fill existing gap in measurement landscape; respond to the need for a short, easy to administer population-level survey measure of responsive caregiving; improve on existing question/measure (e.g., both conceptual and expanding age range to capture responsive care among all children under 5); ensure conceptual alignment with recent advances in theoretical understanding



# New developments in measurement: Responsive caregiving

## Objective

Develop and validate a culturally relevant and internationally applicable population-level survey measure on responsive caregiving for integration in household surveys and other relevant data collection platforms

## Intended uses

Population-level monitoring of responsive caregiving; inform national policy and interventions; evaluate impact and effectiveness of programmes/interventions at population-level

## Content

Children's exposure to responsive and nurturing caregiving at home (or its absence)

## Respondent

Caregivers of young children

# Supporting streams of work



## International Classification of Violence against Children

*New measure of responsive case will build on and consider the comprehensive operational definitions of neglect outlined in the ICVAC*

<https://data.unicef.org/resources/international-classification-of-violence-against-children/>



### SECTION 5: NEGLECT OF A CHILD

The deliberate, unwanted and non-essential failure to meet a child's physical or psychological needs, protect a child from danger, or obtain medical, educational or other services when those responsible for the child's care have the means, knowledge and access to services to do so<sup>140</sup>

#### 501 Physical neglect of a child

*Ongoing failure to protect a child from harm, including through lack of supervision, or ongoing failure to provide a child with basic necessities, including adequate food, shelter, clothing<sup>141</sup> when those responsible for the child's care have the means, knowledge and access to services to do so*

**Illustrative examples:** ongoing inadequate nutrition, including in residential care, boarding schools or refugee camps; ongoing failure to protect a child from harm through lack of supervision by parents or caregivers, including in residential care, boarding schools or refugee camps; constantly leaving a child with a dirty or smelly appearance, unwashed or in improper clothing for the season; constantly letting a child live in an unsuitable/unhealthy home environment

**Exclusions:** psychological neglect of a child (502); neglect of a child's physical or mental health (503); educational neglect of a child (504); abandonment of a child (505); lack of providing necessities due to extreme poverty<sup>142</sup> or exposure to forces beyond parents' control such as armed conflict

#### 502 Psychological neglect of a child<sup>143</sup>

*Ongoing failure to provide adequate nurturing and affection to a child, when those responsible for the child's care have the means, knowledge and access to services to do so*

**Illustrative examples:** constant lack of any emotional support and love, chronic inattention to a child; caregivers being constantly 'psychologically unavailable/inaccessible' by overlooking a young child's cues and signals,<sup>144</sup> including in residential care

**Exclusions:** physical neglect of a child (501); neglect of a child's physical or mental health (503); educational neglect of a child (504); abandonment of a child (505)

#### 503 Neglect of a child's physical or mental health

*Ongoing withholding of proper medical care<sup>145</sup> when those responsible for the child's care have the means, knowledge and access to services to do so*

**Illustrative examples:** ongoing failure to provide or allow needed care in accord with recommendations of a competent health-care professional for a physical injury, illness, medical condition or physical or psychological impairment,<sup>146</sup> including in residential care; ongoing failure to seek timely and appropriate medical care for a serious health problem<sup>147</sup>

**Exclusions:** physical neglect of a child (501); psychological neglect of a child (502); educational neglect of a child (504); abandonment of a child (505)

#### 504 Educational neglect of a child

*Ongoing failure to secure a child's education through attendance at school or otherwise those responsible for the child's care have the means, knowledge and access to services to do so*

**Illustrative examples:** letting a child be absent from school in a repeated

#### 505 Abandonment of a child

*Any act by parents or other caregivers to leave behind a child with the intention to willingly relinquish parental responsibility, whether openly or anonymously<sup>148</sup>*

**Illustrative examples:** abandonment of a newborn (secret or non-secret); permanently leaving a child behind without appropriate care; expulsion of a child from home without alternative arrangement for care;<sup>149</sup> refusal to accept custody of a returned runaway;<sup>151</sup> refusal to look for a runaway child, including by social workers or foster carers

**Exclusions:** threat of abandonment (401); physical neglect of a child (501); psychological neglect of a child (502); neglect of a child's physical or mental health (503); educational neglect of a child (504)

#### 509 Other acts of neglect of a child not elsewhere classified

*Acts of neglect not described in categories 501–505*

**Illustrative examples:** law-enforcement personnel failing to respond to protect a child in domestic violence incidents; court personnel awarding primary custody of a child to a known batterer

**Exclusions:** apply all exclusions listed in 501–505

# Supporting streams of work

- **Children living outside of family care**
  - [Data collection protocol and tools](#) for census, enumeration and survey on children in residential care
  - Phase One: Collect data on the number, location and basic characteristics of all institutions and number and basic characteristics of all children living in institutions
  - Phase Two: Follow-up survey on representative sample of children living in institutions to collect data on selected measures of well-being
  - Once ready, new measure will be integrated as part of Phase Two to generate data on children's experience of responsive care within residential care institutions

# New developments in measurement: Mental health

- Measures of mental health as part of MICS7
  - Complimentary module on Adult Functioning with items on anxiety & depression for adults 18-49 years
  - Other questions for young parents aged 15-17 years

<p>AF15. The next questions have different options for answers. I am going to read these to you after each question.</p> <p>How often do you feel worried, nervous or anxious? Would you say daily, weekly, monthly, a few times a year, or never?</p> <p><i>If respondent asks whether to answer about emotional states after taking mood-regulating medications, say: Please answer according to whatever medication you were taking.</i></p>	<p>DAILY.....1</p> <p>WEEKLY.....2</p> <p>MONTHLY.....3</p> <p>A FEW TIMES A YEAR.....4</p> <p>NEVER.....5</p>	5 =>AF17
<p>AF16. Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings? Would you say a little, a lot, or somewhere in between a little and a lot?</p> <p><i>If respondent asks whether to answer about emotional states after taking mood-regulating medications, say: Please answer according to whatever medication you were taking.</i></p>	<p>A LITTLE.....1</p> <p>A LOT.....2</p> <p>SOMEWHERE IN BETWEEN A LITTLE AND A LOT.....3</p>	

<p>AF17. How often do you feel depressed? Would you say daily, weekly, monthly, a few times a year, or never?</p> <p><i>If respondent asks whether to answer about emotional states after taking mood-regulating medications, say: Please answer according to whatever medication you were taking.</i></p>	<p>DAILY.....1</p> <p>WEEKLY.....2</p> <p>MONTHLY.....3</p> <p>A FEW TIMES A YEAR.....4</p> <p>NEVER.....5</p>	5 =>End
<p>AF18. Thinking about the last time you felt depressed, how depressed did you feel? Would you say a little, a lot, or somewhere in between a little and a lot?</p> <p><i>If respondent asks whether to answer about emotional states after taking mood-regulating medications, say: Please answer according to whatever medication you were taking.</i></p>	<p>A LITTLE.....1</p> <p>A LOT.....2</p> <p>SOMEWHERE IN BETWEEN A LITTLE AND A LOT.....3</p>	

# Thank you

unicef   
for every child

 World Health  
Organization  
African Region