

Key Messages Part 2: Closing

In the second part of the meeting, we discussed

1. The availability and integration of data at national and subnational levels, and how available information is being used to strengthen programme implementation.
2. Agreed on priority actions to advance ECD-relevant measurement at the country level, as well as the supportive role of regional and global priorities

We continued the theme of measurement as a cornerstone for driving change

Specifically, we considered:

Key considerations of **programme monitoring** and **monitoring an individual child's development** as part of the **continuum of ECD measurement**

We also had a preview of **the latest developments in measuring child development**

The challenge

- 2/3rds of children under age 5 years in the region are not developmentally on track.
- We are falling far short of the goal that every child is able to grow and develop to their full potential, with no child left behind – as a right, and as a development imperative

Programme Implementation

- **The purpose of measurement: to tell the story of children's development and to change the story of children's development**
- Monitoring programme implementation is a core component of that, as part of the stairway to impact

We reiterated the preconditions to harness potential of measurement and data in the context of programme monitoring:

- First, an enabling environment necessary to monitor programme implementation
- Having clarity on our goals and objectives (why we do it) drives what we measure
- Family-friendly multisectoral ECD policies and strategies should provide this clarity on a **shared** national, and translated into specific sector **goals** that are **aligned with sector plans and with SDGs**
- Robust monitoring and evaluation frameworks **support program implementation monitoring as it ensures clarity on what to monitor and how?**
- Countries shared their monitoring and evaluation frameworks and tools, which address these preconditions to variable degrees, and their learning to date
 - **Requires clarity on** who are the **delivery agents**, what **service** is being provided, **to whom** are the services being delivered; to what degree have we ensured **stakeholder engagement**.

- How we do it, needs to be supported within the context of a clear structure of governance and systems
- A functional M&E system requires investments in i) **data governance**; ii) capacities **for systems for generation, storage and transmission of data**; and iii) **systems to support data analysis**; and iv) **systems to support data use** – across the different levels – from the point of generation, nationally and regionally - only in this way can we harness the power of data
- We also spoke about programme monitoring as a core component for understanding real time how interventions are delivered and whether that meets the expectations.
- Data that are generated to look at fidelity and quality of implementation are usually not incorporated in HMIS but are managed by the responsible programme to strengthen implementation pathways.

The aspiration is *to break the 'data rich, information poor' culture*; and to use programme monitoring to improve the quality of implementation towards children's healthy development

Key reflections in monitoring an individual child's development included the following:

- **How** can we use **different** or the **same tools** to assess individual children at risk for or with neurodevelopmental impairment?
- **We looked at screening** versus **diagnostic** tools
- We acknowledged **the ethical imperative** to then follow through, by enabling and facilitating access to services for children with developmental delay **through functional referral pathways**

We closed with ***the latest developments in measuring child development***

A lot of developments are underway in the realm of technology thanks to the artificial intelligence (AI) revolution. We can expect in the next 5 years we will be much better equipped to assess and support early childhood development.

It is important to remember that the ECD agenda is relevant for all children whether they were born at term and healthy, whether they were born with a growth deficit, whether they are living in deprived circumstances. The science tells us that each one of these children are at risk of sub optimal development without nurturing care

To conclude:

As we think about how we ensure all children survive and thrive, let's remember to invest in all five components of nurturing care. Single sector or single interventions are not sufficient. We need a holistic approach that brings together all five components of nurturing care to the benefit of the family and the child. Let's remember to keep the child and the caregiver at the centre of what we do.

If we change the beginning of the story, we will change the whole story

WHO/AFRO Commitments

WHO AFRO commitments will be delivered in close consultation and collaboration with Member States, with UN agencies active in the Health Sector, and with Co-convening entities of this regional ECD measurement meeting

WHO will facilitate the development of a high-level regional advocacy strategy to galvanize political commitment, leadership, and financing so that nurturing care is embedded and scaled up across the region, with emphasis on what the health sector can deliver, particularly in the first 1000 days

We will support ongoing efforts to strengthen platforms that offer entry points and connections for early childhood development in and through public health systems, to strengthen access to early child development services across all five domains of the NCF.

This includes support to embed nurturing care within efforts to accelerate improving the quality of care for women, newborns, and children to end preventable stillbirths, maternal, neonatal and child deaths, jointly with UNFPA and UNICEF. This platform interfaces with the care for small vulnerable newborns' who are at risk of poor developmental outcomes

It includes WHO's work with Member states, to integrate services to support maternal mental health in maternal newborn and child health

services with particular attention to the period during pregnancy, childbirth, and the postnatal period.

Our commitment also builds on a resolution agreed with member states and partners in Aruha in 2023, to revitalize the implementation of the integrated management of childhood illnesses (IMCI). A strong IMCI platform facilitates nurturing care, as we heard from many Countries

This past week, we discussed the preconditions to harness the potential of measurement and data to drive programme monitoring, quality implementation, and ultimately the attainment of children's healthy development. WHO will work with member states and partners to clarify health sector outcome goals, and co-develop robust Monitoring and Evaluation frameworks and the data governance and system capacities necessary to implement them

Lastly WHO will partner with member states and partners to document and disseminate best practices on leadership, multi-sectoral coordination, and M&E Framework performance.