

## Early Childhood Development 0–3 Program in Ghana

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### Why the Early Years Matter

A child needs stimulation to grow and develop. The most critical period for brain development in children is from conception to age three, when they are most sensitive to environmental stimuli and experiences. In fact, brain development occurs at a higher rate in these early years than at any other time in life. A nurturing relationship between a caregiver and child is vital for brain development. For example, when a mother sings and talks to her baby, even before the baby can talk, her baby learns to communicate back. When a father encourages a child's interest and curiosity, the child reaches out to explore and learn. Babies whose parents respond to their cries by calming and soothing learn to calm and comfort themselves. All of these activities are known as early stimulation. Research<sup>i</sup> shows that deficiencies in stimulation and in the quality of the relationships a child experiences from birth to age three can stunt the child's social, emotional, language, and cognitive development. Thus, relationships with parents and caregivers form the most important experiences that shape the way a child grows and develops.

Globally, 43% of children (or 250 million) under five years of age living in low- and middle-income countries are at risk of not achieving their development potential.<sup>ii</sup> In Ghana, more than one quarter of children aged 36-59 months are behind in the domains of language, cognitive, physical, and socioemotional development.<sup>iii</sup> Compounding gaps in early childhood development (ECD), children in Ghana face significant nutritional deficiencies. Nearly 20 percent of children under-five are stunted, five percent are wasted, and 11 percent are underweight<sup>iv</sup>. Global research shows physical stunting is associated with cognitive stunting. Based on this critical need, there is growing momentum for integrated ECD programming that engages multiple sectors, particularly health, nutrition, child



Photo by Caroline Trutmann Marconi

and social protection, and education to support parents in their caregiving function. However, many parents and caregivers lack adequate knowledge on how to stimulate their children's development. To date, there has been an absence of early stimulation information in maternal and child health guidelines and parenting sessions. With improved access to ECD information and targeted training, caregivers can develop skills to become effective providers of nurturing care.

### Program Objective

The overall goal of the Maternal and Child Survival Program (MCSP) Ghana ECD 0-3 program is to increase caregiver knowledge of early stimulation as well as to leverage frontline health workers to promote and practice early stimulation techniques at the community level. Aligning with the U.S. Government Action Plan on Children in Adversity, MCSP targets and supports critical periods in development, with efforts to reach populations that are chronically underserved. MCSP, in close collaboration with the Government of Ghana, utilizes lessons learned to integrate ECD messaging into national guidelines, including the National Newborn Strategy, to institutionalize ECD within the sphere of childcare. Furthermore, MCSP serves a key coordination role linking with institutions beyond the health sector, including the area of social protection, to lay the foundations for a society in which children survive and thrive.

#### Strategic Objectives

**Objective 1:** Finalize and disseminate an evidence-based set of early child development materials emphasizing early childhood stimulation and responsive parenting for children under three years.

**Objective 2:** Build capacity of Community-based Health Planning and Services (CHPS) staff, community health volunteers (CHVs), and social protection staff to effectively teach caregivers with young children about psychosocial stimulation and responsive parenting in targeted districts.

**Objective 3:** Assess the ability of CHPS staff and CHVs to integrate early childhood activities with their regular nutrition services as well as document changes in caregiver behaviors and child development.

**Objective 4:** Create an enabling environment at the national and regional level to promote institutionalization of early child development activities into partner and government programming.

## Key Accomplishments to Date

- Developed a set of global ECD materials on early stimulation and responsive parenting for children below three and adapted to the Ghana context; using it to train CHPS staff and CHVs on early stimulation activities. The final package of materials includes a facilitator flip chart, parenting session manual, counseling cards, and early stimulation posters and brochures.
- Conducted a training of trainers on the use of the Ghana ECD materials for 34 national, regional and district staff from Upper West and Eastern regions of Ghana.
- Led trainings for 74% of community health officers (CHOs) in all implementation zones (398 out of 540 total CHOs), who have the mandate of educating caregivers to engage in early stimulation activities with their children 0-3 years at the CHPS compound and mother-to-mother support groups (MTMSGs).
- Conducted trainings for 46% of CHVs in all implementation zones (293 out of 643 total CHVs) who have the mandate of educating caregivers to engage in early stimulation activities with children 0-3 years at the household level.
- Commenced qualitative and quantitative data collection to monitor changes in CHPS staff and CHVs knowledge and perceptions of early stimulation practices as well as understand effectiveness and feasibility for scale-up. Findings from pre- and post- assessments show there was a 15% gain in knowledge after the training. MCSP will continue to assess knowledge and practice through the life of the program during routine supportive supervision visits.

## Way Forward

In the second year of the program, MCSP will focus on expanding activities to additional districts in the Eastern and Upper West regions as well as adapting program implementation platforms to address different regional needs. During year one, MCSP noted lower MTMSG participation in the urban areas of Eastern region. In collaboration with CHPS staff, MCSP identified alternative platforms for the delivery of ECD messaging to accommodate urban areas, including child welfare clinics and religious fellowship groups. MCSP will document these different platforms in order to identify the best mechanisms for delivery in Ghana across different geographic areas and cultural contexts. With more than 50% of the population in Ghana living in urban settings,<sup>v</sup> adapting approaches for an urban context is a valuable contribution of the program and will inform any future scale-up. Additionally, MCSP will engage at the national and regional level to promote integration of ECD activities into partner and government programming. MCSP will continue to work with the Ghana Health Service (GHS) in addition to the Department of Children within the Ministry of Gender, Children and Social Protection (MOGCSP) to institutionalize ECD-related policy and strategy, encouraging greater future investment. This includes collaboration on the National Newborn Strategy, National Early Childhood Care and Development (ECCD) 0-3 Standards, and National Maternal and Child Health Booklet/Training Guide, which will contribute to improved ECD surveillance and extension of early stimulation practice.

## Sustainability

To encourage sustainability, the program leverages existing GHS CHPS and MOGCSP structures in order to deliver ECD activities. CHPS staff, CHVs, as well as social welfare officers are trained to integrate ECD into their existing services, streamlining tasks and reducing gaps in information. In addition, the program has built the capacity of regional and district CHPS and MOGCSP managers to implement and facilitate future ECD trainings. MCSP training modules and materials, which were developed with the support of the GHS Family Health Division and the MOGCSP, will also be useful assets for potential expansion of ECD programming in the country.

### About MCSP

MCSP is a global, USAID initiative to introduce and support high-impact health interventions in 25 priority countries to help prevent child and maternal deaths. MCSP supports programming in maternal, newborn, and child health, immunization, family planning and reproductive health, nutrition, health systems strengthening, water/sanitation/hygiene, malaria, prevention of mother-to-child transmission of HIV, and pediatric HIV care and treatment. MCSP will tackle these issues through approaches that also focus on household community mobilization, gender integration, and digital health, among others.

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<sup>i</sup> Center on the Developing Child. 2009. *Five Numbers to Remember about Early Childhood Development*. Available at: [www.developingchild.harvard.edu](http://www.developingchild.harvard.edu)

<sup>ii</sup> Black MM, Walker SP, Fernald LCH, et al. 2017. Early childhood coming of age: science through the life course. *Lancet*. 389: 77-90

<sup>iii</sup> UNICEF. 2011. Multiple Indicator Cluster Survey. Available at: [https://mics-surveys-prod.s3.amazonaws.com/MICS4/West%20and%20Central%20Africa/Ghana/2011/Final/Ghana%202011%20MICS\\_English.pdf](https://mics-surveys-prod.s3.amazonaws.com/MICS4/West%20and%20Central%20Africa/Ghana/2011/Final/Ghana%202011%20MICS_English.pdf)

<sup>v</sup> United Nations Population Division. *World Urbanization Prospects: 2014 Revision*