Reaching more children and families with evidence based parenting interventions

Critical Needs

- Goal to improve home environments and ensure children have interactive caregivers and opportunities to learn

- Need evidence based interventions for children from birth to three feasible for implementation at scale
  - Integration with health services: Pilot in Caribbean of delivery through child health visits

- Increase in persons with skills to train and supervise implementors to maintain program quality
  - Expand access to evidence based Jamaica home visit intervention through web-based training package and support
New approach: Pilot of parenting interventions in the Caribbean (Antigua, Jamaica, St Lucia)

Designed new approach integrating parenting with routine visits to primary health care: aim no extra staff, no increase in frequency and duration of visits for parents

- Films produced showing mother’s practicing behaviors we want to encourage.
- Nine short films cover topics such as talking with baby, praise, looking at books, play activities shown at child health clinics from 3 to 18 months
- CHWs trained to demonstrate activities and help mothers practice
- Clinic nurses distribute message cards and a few play materials
Summary of findings

- Benefits to child’s cognition (effect size 0.3) and parents’ knowledge of child development (effect size 0.4)
- Effect size comparable to some home visit programs but less than Jamaica weekly home visit program
- No adverse effects of adding the ECD activities on children’s nutrition or immunisation status
- Integrated parenting intervention, requiring no additional clinic staff or mothers’ time, can be integrated into health services.
Challenges to integrating with routine health services

- Only 5 contacts from 3-18 months, most in first 12 months, need for complementary programmes e.g. home visits to reach children 1-3 years
- Infrastructure/resources stretched, little spare capacity. Need to ensure no negative impact on existing services.
- Caribbean has advantage of excellent coverage and compliance with child health visits
- These issues will need attention as programs are scaled up, especially where children’s health and nutrition are poorer and the capacity of health services more limited.
Cost of implementation

- Annual costs of the intervention (including staff time, training, equipment and materials, and supervision) are approximately US $14 per child if estimated for all children attending the clinics.

- Promising component of ECD strategies with potential benefits for large numbers of children.
Expanding access through training

- **Jamaica Home Visit Program**: strong evidence base, feasible in low resource settings, replicated in other countries.

- Developing an innovative web package with training and technical support for organizations in low and middle income countries.

- Goal to increase capacity to implement programs and monitor quality
Program materials

- **Films**
  - Filmed in Jamaica, Peru & Bangladesh (collaboration with Cuna Mas & icddr,b)
  - Three 15 minute films demonstrating steps in a home visit & 28 short films depicting specific activities and concepts for training

- **Curriculum and manuals**
  - Curriculum designed to be used by home visitor
  - Training manual for use by trainers, including discussion guide for use with films
  - Guide to adaptation for new countries/cultures for use by program leads
Implementation and evaluation with early users

Working with organisations in 4 countries ‘early users’ to facilitate modification and evaluation of the package

We will provide on the ground technical support

- workshops for training supervisors & home visitors
- adaptation of materials
- tools for monitoring and evaluation and training in how to use these to maintain quality
Online access and support

- Online technical support will be developed based on the feedback from the early users.
- Organizations will register in order to obtain the materials.
- For first year online users will be asked to complete online evaluation of program to refine support.
- A small subscription will be requested so as to provide continued resources for maintenance of the website and responding to requests for online support.
- Package will have Creative Commons license allowing users to adapt as long as they attribute original to developers and share under same guidelines. Adaptations will be requested for hosting on website.