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Early Childhood Development

An integral part of Zika response programs

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WHY THE EARLY YEARS MATTER

The most critical period for brain development in children is from conception to age three, when they are most sensitive to environmental stimuli and outcomes.¹

In fact, brain development occurs at a higher rate in these early years than at any other time in life. Because early experiences and the environments in which children develop from conception to age three support vital brain connections, caregivers play an essential role in supporting children's healthy brain development through reciprocal interactions that provide the neural connections in the brain that build learning, social, and behavioral pathways. The goal of early childhood development (ECD) programs is to **enable parents and caregivers to promote brain development, health, and well-being for optimal child development.**

ECD programs are holistic, engaging multiple sectors in integrated services to bring about improved child development outcomes, better use of financial and human resources, and more children and families receiving services.

In addition to nutrients, a child needs stimulation to grow and develop. For example, when a caregiver responds to a baby's needs and signals in a sensitive and accepting way, the caregiver is being responsive, and the baby feels secure and loved. Responsive parenting is critical for building trust and confidence in infants and young children. 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 more. 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 has shown 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.²

The first three years offer an opportune moment for action, as interventions are most effective during this crucial window. During this time, caregivers and service providers can best address disabilities to mitigate their long-term developmental effects. **Therapeutic early stimulation interventions target the developmental needs of children with physical, sensory, and intellectual disabilities.** Furthermore, these interventions are appropriate for the full spectrum of children's abilities, supporting young children who are developing along a typical timeline as well as those

¹ Center on the Developing Child. 2009. Five numbers to remember about early childhood development. Brief. Center on the Developing Child at Harvard University website. <http://developingchild.harvard.edu/resources/five-numbers-to-remember-about-early-childhood-development>. Accessed October 16, 2017.

² Black MM, Walker SP, Wachs TD, et al. 2008. Policies to reduce undernutrition include child development. *Lancet*. 371(9611): 454-455.

with severe or profound disabilities. Multi-disciplinary interventions draw from best practices in physical and occupational therapies, orientation and mobility therapy, and speech/language therapy. With user-friendly activities requiring only common household materials, both caregivers and service providers can deliver interventions needed to support the development of young children with disabilities.

HOW DO WE REACH CHILDREN AGES 0–3 YEARS?

Infants and young children depend on their caregivers for all their basic needs. The first few months of life are crucial for developing secure and positive relationships between children and their caregivers. In the early years, good parenting and caregiving involve bonding, attachment, and attunement between children and their caregivers, and have critical implications on their health and well-being both as children and as future adults. **Additionally, the home is the primary environment for children with disabilities to receive the high dosage and frequency of therapy needed.** Given the important role parents play as primary caregivers of their children, reaching parents is the gateway to supporting children ages 0–3 years to reach their fullest developmental potential. Through **parent groups, one-on-one counseling, take-home cards, and other mechanisms**, therapeutic early stimulation programs empower caregivers to address the developmental needs of their children during this critical window of brain growth.

ECD AND CONGENITAL ZIKA SYNDROME

Congenital Zika syndrome is a recently recognized pattern of anomalies associated with Zika virus infection during pregnancy that may include microcephaly and brain or eye anomalies. A range of neurologic abnormalities, in addition to microcephaly, has been observed in infants with congenital Zika virus infection. ECD programs that enable parents or caregivers to understand optimal child development can facilitate the recognition of developmental delays, including those that may be associated with the effects of congenital infections. Additionally, **therapeutic early stimulation interventions have been used to try to mitigate the long-term effects of congenital infections**, including those associated with severe neurodevelopmental delays resulting from congenital Zika syndrome.

ABOUT MCSP

The Maternal and Child Survival Program (MCSP) is a global, USAID Cooperative Agreement to introduce and support high-impact health interventions with a focus on 25 high-priority countries with the ultimate goal of ending preventable child and maternal deaths within a generation. The Program focuses on ensuring that all women, newborns, and children most in need have equitable access to quality health care services to save lives. MCSP supports programming in maternal, newborn, and child health, immunization, family planning and reproductive health, nutrition, health systems strengthening, water/sanitation/hygiene, malaria, Zika, prevention of perinatal transmission of HIV, and pediatric HIV care and treatment.

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