

Harnessing Global Financing Facility and World Bank funding to promote nurturing care



LEAD
AND INVEST

PATH, UNICEF and WHO are collaborating with Mozambique's Ministry of Health (MoH) and other key stakeholders to promote the importance of nurturing care for children's development. A major achievement of these ongoing efforts has been the introduction of early learning and responsive caregiving into the revised Nutrition Intervention Package (Pacote de Intervenções de Nutrição, PIN). Box 1 provides details.



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PIN is one of 12 maternal and child health and nutrition packages included in Mozambique's five-year reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH-N) investment case, developed with technical assistance from the Global Financing Facility (GFF) under the Government of Mozambique's leadership.¹ Financed jointly by the World Bank, USAID and UNICEF at over US\$ 24 million, PIN aims to improve child nutrition outcomes by 2023, reaching 80% of children under age two (about 3 million overall) in the eight provinces with the highest malnutrition rates. Delivered by community health workers at bi-monthly meetings, PIN covers seven interventions: counselling on breastfeeding, complementary feeding and WASH practices; distribution of micronutrient powders and vitamin A; de-worming; and growth monitoring. Each parent-child dyad attends meetings during the child's first two years to receive all seven interventions.

This case study describes the importance of preparing stakeholders and building the foundation for strategic partnerships to leverage large-scale funding opportunities, such as that provided by the GFF, and to promote nurturing care through existing service delivery platforms for health, nutrition, HIV prevention and social protection.



NURTURING CARE
FOR EARLY CHILDHOOD DEVELOPMENT

BOX 1

Early learning and responsive caregiving in the revised PIN

Counselling on responsive caregiving and early learning was added as a standalone theme, and integrated into counselling on: antenatal care (e.g. avoiding stress in pregnancy and bonding with unborn baby); safety and hygiene (making safe toys and educating children about handwashing through songs); breastfeeding (as bonding time); and child feeding (responsive feeding and teaching children about food diversity). The four-day training for community health workers explores nurturing care across all sessions and includes a session dedicated to counselling on responsive caregiving and early learning. The revision resulted in no additional training days and no additional costs were incurred. The supervision guide, updated in 2020, requires supervisors to check that community health workers integrate COVID-19 prevention measures, promote play, and emphasize the importance of responsive caregiving and play at every meeting.

¹ The Global Financing Facility enables countries to accelerate progress towards the SDGs, especially those relevant to reproductive, maternal, newborn, child and adolescent health and nutrition. For more information visit: <https://www.globalfinancingfacility.org/>



Advocacy actions

The following actions raised the MoH's awareness of the importance of nurturing care and led to the inclusion of responsive caregiving and early learning in PIN.

Providing professional development opportunities for key stakeholders.

In 2017 and 2019, staff from the MoH's Nutrition and Maternal and Child Health Departments attended a six-day multisectoral and multistakeholder course on the science of early childhood development, offered by the Aga Khan University Institute for Human Development in collaboration with PATH. The course focused on what children need to survive and thrive and why nurturing care is vital to development. It covered the important roles of all sectors, including the health sector. In 2018, at UNICEF's request, PATH ran a three-day course on responsive caregiving and early learning as part of in-patient treatment of severe acute malnutrition, using UNICEF's emergency play kits as one of the tools. This involved demonstrations in paediatric wards, showing nutritionists the benefits of these low-cost interventions and how to integrate them into the Mozambican health system.

Organizing a national high-level meeting on early childhood development. In 2018, the MoH, with support from UNICEF, PATH and WHO, organized a national early childhood development meeting. Participants included representatives from key MoH departments at national and provincial levels, civil society organizations and development partners. Presentations covered what children need, what works to promote optimal developmental outcomes and what preliminary efforts were underway in Mozambique. Participants analysed gaps in existing health interventions and prioritized components of nurturing care for inclusion in national packages.



Photo credit: PATH/Rosario Manuel

Hosting delegations for learning and exchanging experiences.

In 2018, the Nutrition Department hosted delegations from Ethiopia, Ivory Coast and Zambia. These countries were interested to learn from a country in the same region that was further ahead in the process of promoting nurturing care in health systems. The MoH organized visits to show how nutrition and health services at facility and community levels had been modified to include all aspects of nurturing care and hosted an experience-sharing session.

Participating in a regional meeting on how to operationalize the Nurturing Care Framework in the health sector. In 2018, a delegation from Mozambique's Nutrition Department joined delegations from six other sub-Saharan African countries at a two-day meeting in Nairobi, Kenya.² This gave the participating countries a platform to share experiences, exchange best practices and formulate solutions to challenges. During the meeting, each delegation developed a draft national action plan for advancing nurturing care in the health sector, which later helped guide national action.

The revised Nutrition Intervention Package (Pacote de Intervenções de Nutrição, PIN) is one of 12 maternal and child health and nutrition packages included in Mozambique's five-year reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH-N) investment case.



Placing a World Bank Group Early Years Fellow in the Nutrition Department. In 2017, to support the MoH, the World Bank Group's Early Learning Partnership recruited an Early Years Fellow with expertise in and commitment to advancing early childhood development. The Fellow became an influential member of the PIN taskforce, continuing to support the PIN lead after the fellowship ended. The PIN lead continues this work through the Technical Working Group on Nurturing Care for Early Childhood Development, supported by PATH, UNICEF, WHO and others.



Achievements

Since early learning and responsive caregiving were introduced into PIN in 2018, the Nutrition Department has taken ownership of the nurturing care agenda and is leveraging financing opportunities, such as those provided by the GFF, the World Bank, and others, to ensure that nutrition interventions endorsed and implemented by the MoH promote nurturing care.

The revised PIN has catalysed investment in interventions promoting responsive caregiving and early learning within the health sector. It is being used in more provinces, by a growing number of partners. For example, the USAID-supported community nutrition project in Nampula (the largest province with the highest malnutrition rate) is implementing PIN in 12 out of 23 districts. Beyond the health sector, components of PIN are being adapted to support the training of government social action staff piloting a Cash and Care Child Grant. This programme, a partnership between the Ministry of Gender, Children and Social Action, UNICEF and the World Bank Group, will be implemented widely across the country.

PIN has made community nutrition interventions more consistent.

Previously, each community nutrition partner used its own package; now, all partners are requested to implement PIN.

All children, throughout the country, will benefit from the same set of essential interventions both at the facility and community levels. PIN is the first package that has matured to this level.

Success factors

Developing knowledge and skills within the MoH. The MoH leadership and Nutrition Department staff had multiple and diverse opportunities to learn about early childhood development and the interventions that can promote optimal developmental outcomes. The process of building the knowledge and skills of leadership and technical staff began several years before the development of the RMNCAH-N investment case for Mozambique. These ongoing capacity-building efforts persuaded the MoH to revise PIN to include attention to responsive caregiving and early learning.

Bringing visibility to the Mozambican experience. Other countries' interest in learning from Mozambique's experience helped focus the MoH's attention on the nurturing care agenda and positioned the Nutrition Department as the programmatic lead within the MoH for integrating responsive caregiving and early learning into health services. The learning and exchange visit, in particular, prompted the MoH to consider how to scale up the model being piloted through existing health services nationwide, and to seek opportunities to promote nurturing care with and through other sectors.

Developing a national action plan for nurturing care. The draft national action plan, developed by the Mozambican delegation attending the multistakeholder consultation in Kenya, included integrating early learning and responsive caregiving into PIN. That plan was subsequently validated by the MoH. A national Technical Working Group was established to guide the national action plan's implementation. This was complemented by a regional structure designed to monitor and support the seven countries that participated in the multistakeholder consultation.



Harnessing existing relationships and coordinated action from strong technical partners. The process of revising PIN was greatly enhanced by coordinated action from key technical stakeholders at the World Bank, PATH, UNICEF and WHO. A World Bank Early Years Fellow supported by a nutrition specialist at the GFF worked closely with the MoH to navigate that process. Existing materials, developed by PATH and piloted in Maputo province, were adapted and integrated into PIN. UNICEF provided financial support to pilot the revised PIN tools. WHO regularly tracked progress against the national action plan. All partners supported the MoH's revision of PIN.

Barriers

Early childhood development was not included in the RMNCAH-N investment case. Despite advocacy efforts to integrate early childhood development into Mozambique's original RMNCAH-N investment case in 2017, these elements were not included in the final version. Because the decision to integrate early learning and responsive caregiving into PIN came later, there were limits to what could be funded with no additional time or money for training, supervision or implementation of the new child development activities. Decisions were therefore based on what would work operationally, rather than what is needed to ensure quality. This underscores the importance of including nurturing care in the initial development of the RMNCAH-N investment case and at the design stage of WB/GFF-supported programmes, using relevant global guidance that will be accepted by the national MoH.

PIN was designed to reduce malnutrition, not to promote child development. Its seven interventions were selected to reduce malnutrition. The broader context of child development, including responsive caregiving and early learning, was not considered.

As a result, while content on responsive caregiving and early learning has been added, its place in PIN is less central than WASH and nutritional practices.

Performance-linked funding made it difficult to advocate for relevant indicators. PIN is a disbursement-linked programme and its funding depends on reaching set indicators. The MoH was therefore conservative in its choice of indicators. While data on counselling about WASH, breastfeeding and child feeding are used to calculate the number of children who receive all seven PIN interventions, counselling on responsive caregiving and early learning was not included as an indicator. In addition to coupling advocacy to include content with advocacy to include relevant indicators, effective roll-out of large-scale programmes such as PIN may require reframing them to include child development as well as health and nutritional needs.

Lack of global guidance on coupling developmental and growth monitoring. Monitoring children for developmental delays is an effective way to promote responsive caregiving and early learning, especially in countries with high malnutrition rates. Although global and national IMCI guidelines include developmental monitoring, there are no global guidelines that recommend coupling developmental and growth monitoring, especially in community settings. The lack of such normative tools has hindered advocacy for developmental monitoring as part of PIN and reduced the prominence of counselling on responsive care and early learning.

Conclusion

Cultivating champions, reinforcing partnerships and linking national efforts to regional and global processes can put nurturing care for early childhood development onto a national policy agenda. Continuing advocacy efforts are needed to ensure that trainers, supervisors, facility staff and community health workers are adequately prepared and supported to implement the revised PIN and deliver high-quality responsive caregiving and early learning interventions.

PIN's success has motivated the Nutrition Department to explore other nutrition entry points that can be used to include responsive caregiving and early learning and to support the development of nurturing care messages in the context of COVID-19. Other MoH packages are at different stages of revision or development. Once finalized, they will serve as new norms, with implementers using a common set of packages to promote nurturing care and allow children to achieve their full developmental potential.



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