Promoting early childhood development during antenatal care



Background

Use of antenatal care (ANC) services during pregnancy is relatively high in many sub-Saharan African countries. In Mozambique, for example, 49 percent of pregnant women attend ANC at least four times.¹ The corresponding figure is 66 percent in Kenya.²

The Nurturing Care Practice Guide recommends ANC service providers check on maternal mental health, promote self-care, help identify support networks, and encourage parents to respond to the movements of the unborn child *in utero* by rubbing the belly and talking to the child. These activities enhance bonding with the baby and reduce parental anxiety.³ Parents who bond with their children during pregnancy are also more likely to feel attached to and engaged in the lives of their children after birth and through their toddler years.⁴

Despite the importance of communicating and playing with children *in utero* and during the period after birth, traditional beliefs often make families assume that newborns cannot see or hear them for the first one or two months after birth. Such beliefs may lead to limited stimulating interactions with newborns. Given the relatively high uptake of ANC services, this touchpoint can be used to explain to parents that children start to hear and recognize voices *in utero* and that caregivers can engage and start bonding with their children right from pregnancy.

With the government and support from the Conrad. N. Hilton Foundation, PATH has co-created several interventions to promote early childhood development (ECD) and caregiver wellbeing during ANC and postnatal care (PNC). In Mozambique, we tested a protocol for screening and counseling on maternal depression in ANC and PNC (see separate brief). In Ethiopia, Kenya, and Mozambique, we developed a

simple protocol to counsel on child development starting at the first ANC visit.

The intervention

The protocol for counseling on child development in ANC asks a maternal and child health nurse to carry out the following steps:

- 1. Probe if parents are already talking to their unborn child while *in utero*.
- Explain that the unborn child can hear from the sixth month of pregnancy; and after birth, will recognize the voices of caregivers who talk to her/him regularly.
- 3. Demonstrate how to talk to the unborn child by using a simple pictorial job aid and demonstration.
- 4. Invite both parents—emphasizing father involvement—to practice talking to their unborn child and praise them when they do so.

Nurses were trained to follow the counseling protocol and provided with a job aid.



Job aid for ECD counseling in ANC, Kenya.

¹ Mozambique DHS 2022-2023

² Kenya DHS 2022

³ https://nurturing-care.org/practiceguide/

⁴ De Cock, E. S., Henrichs, J., Vreeswijk, C. M., Maas, A. J., Rijk, C. H., & van Bakel, H. J. (2016). Continuous feelings of love? The parental bond from pregnancy to toddlerhood. *Journal of Family Psychology*, 30(1), 125–134.

Results

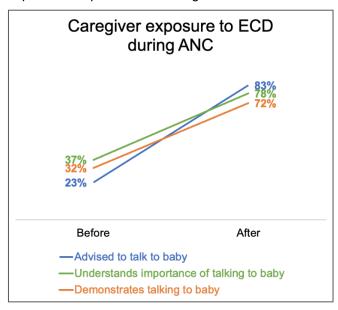
Data from Mozambique in 2022 showed that close to 80 percent of caregivers of children under two years visiting health facilities where PATH was supporting the government to integrate ECD into primary health care, had heard about talking to the unborn child. The majority described learning about this practice during ANC.

"... the parents, as soon as they are awake, should talk to their child [in utero]. The child will be moving and that is a sign that he heard the father's voice." (Caregiver, Monapo District, Mozambique)

It is likely that the novelty of this information resulted in such high uptake. This was a finding that came up in assessments in other countries as well.

"The information that the fetus can listen to me was a new information for me." (Caregiver, Addis Ababa, Ethiopia)

In 2023, PATH systematically assessed change in service provider ECD care practices during ANC service delivery in Kenya, as well as change in caregiver ECD knowledge and practices as a result of service provider capacity-building. As the figure below shows, training providers on ECD counseling during ANC services was associated with a 60-percentage point increase in providers advising mothers to talk to the baby *in utero*. There was also a 40-percentage point increase in caregivers who could demonstrate and explain the importance of talking to an unborn child.

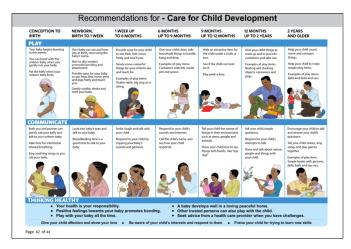


Caregiver exposure to and practice of ECD in ANC, Kenya.

Government uptake

PATH has successfully advocated for the inclusion of ECD counseling during pregnancy into the Mother & Child Health Handbook in Kenya (2020) and the National ECD Implementation Guide in Ethiopia (2024).

In addition, in response to a request from the Ministry of Health (MOH) in Mozambique, PATH has designed a competency-based training module on ECD counseling in ANC as part of a broader national ECD training curriculum. Furthermore, pictorial job aids for ANC counseling have been approved for national use by the MOH in Mozambique and the Federal MOH in Ethiopia; and for use in Siaya County in Kenya by the Siaya County Health Management Team.



ECD counseling page in the Kenya Mother & Child Health Handbook (2020).

Next steps

As next steps, we recommend advocacy for inclusion of ECD counseling into national standard operating procedures and guidelines on ANC, as well as into preand in-service training modules, so that counseling is an essential component of ANC.

Additionally, it is important to continue to emphasize father engagement in ANC services. Such engagement can be reinforced during household visits conducted by community health workers, through mass media, and in forums that specifically target men.