Nurturing care for early childhood development: A framework for action and results

Response to comments received during the first global online consultation

March 2018

From 24th January to 6th February 2018, country leadership and other relevant stakeholders were invited to provide feedback on an early draft of the document: Nurturing care for early childhood development: A framework for action and results, henceforth referred to as the Nurturing Care Framework (NCF). This was the first of two web-based global online consultations (the second takes place from 14-28 March). Nearly 200 comments were received, including comments from 11 governments, 2 UN agencies, 84 professional associations or NGOs, as well as many individuals. Following the end of the consultation period, the comments were reviewed and analyzed by two independent reviewers. The overarching themes were presented and discussed at a meeting of the writing team in Geneva, Switzerland (26-28 February 2018). Following this, the draft was revised. This document summarizes the overarching themes and how they have been addressed.

A note on the usefulness of the Nurturing Care Framework (NCF). Most reviewers (approximately 70%) indicated that they could see themselves applying the Framework in their current work settings. Reviewers said the Framework can help support advocacy efforts; act as an energizing force and guidance to ongoing work and its expansion; promote a shared understanding of stakeholders across sectors at global, national, and sub-national levels; inform national and sub-national strategies and policies; assist in the design and implementation of programs; enhance teaching, training, and research efforts; assist in more effective channelling of existing resources or obtaining new one; and inform work with parents and communities.

Main Issues (Response in italics)

1. **Audience, language, and contents.** Several comments proposed specifying more clearly at the outset the intended audience for the Framework (e.g., policymakers and/or implementers). This would help ensure the language used in the document corresponds with the readers’ prior understanding of the topic. In most cases, reviewers wanted to keep the document simple, short, and easy to understand but also wanted more guidance on how to apply the Framework in practice (i.e. tools, case studies, implementation guidance, monitoring).

Response: The Framework will be a high-level document providing strategic direction to policy and decision-makers at all levels of government and partners who can contribute to making nurturing care a reality. The document aims to provide the main rationale and conceptual foundations for countries to engage in nurturing care. The Framework will not include guidance on implementation and monitoring. Operational guidance, including monitoring will be developed separately.

2. **Positioning the Framework in global agendas.** Many comments requested that the link between the Framework and global agendas such as the Sustainable Development Goals and the Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030) be more clearly articulated. This would help position the Framework as building on and supporting
existing priorities rather than as something new. In relation to the SDG targets that were included in the Framework, reviewers recommended that the choice of targets be reviewed (e.g., consider adding others) or better explained.

Response: The link between the Framework, the SDGs, and the Survive, Thrive and Transform goals of the Global Strategy for Women’s, Children’s and Adolescents’ Health will be clearly articulated in the next version. The Framework will seek to support attainment of these two interlinked agendas, rather than present itself as a standalone agenda. In doing so, users will be encouraged to draw on existing indicators and targets from the two agendas to assess progress. The Framework will continue to highlight 5 specific SDG Targets that most clearly relate to the major risk factors affecting children and caregivers. However, the Framework will acknowledge that attaining early childhood development will depend on attainment of all the SDGs.

3. **Age group of focus and rationale for emphasizing this age group.** There were multiple comments which indicated that the reader was confused about which age group was of focus in the Framework and why. This was evidenced by comments that questioned whether “early years” and “first 1000 days” were synonyms or comments that asked for additional examples in specific places pertaining to pre-conception. It was clear that the Framework needed to clearly delineate an age span. Trying to extend too widely was creating confusion. Linked to this, were multiple requests to broaden the rationale for the age group of focus (e.g., brain science but also economic rationale, epigenesist) and the type of long-term impacts (e.g., non-communicable diseases, educational outcomes, social and emotional well-being). Many comments provided throughout came down to varied understandings of what the age group of focus was and why.

Response: The Framework will concentrate on the period “pregnancy to age three”. This term will be used consistently throughout the Framework to avoid misinterpretation. While acknowledging the importance of inter-generational and preconception influences, as well as life-long opportunities for development, the period from pregnancy to age three is one that has received scant attention, but affords countries with the opportunity to significantly change outcomes and accrue individual, social and financial capital. This includes countries that are still struggling with “survival issues” as Nurturing Care can also contribute to mortality reductions. The rationale for focusing on this age group will be broadened as per the suggestions of the reviewers.

4. **Nurturing Care – the concept and the domains.** According to the reviewers, “nurturing care” as a concept is not well understood in some cultures or by individuals not directly involved in child development (i.e., policy makers, professionals from other sectors, parliamentarians). There were multiple requests that the concept be more fully explained. Linked to this were a lot of comments about the domains – their names (some, but not all, have the same names as sectors; early learning has a connotation that means preschool) and their explanations (only the new ones were explained, rather than all, and even those explanations were not clear as many said they did not understand the difference between “responsive caregiving” and “early learning”). There were also questions on how WASH is reflected in these domains and elsewhere in the document, noting that at times this is captures and other times it is not, and when it is done, it is inconsistent (sometimes part of health, sometimes part of safety and security). The word “domain” was also problematic as many comments about the domains and later on about the roles of sectors suggested that the reader understood these as individual rather than working together (i.e. a sector could have a single focus on one domain, rather than the desired holistic view where every sector contributes to all 5 domains).

Response: The Framework will provide a more comprehensive explanation of nurturing care and define all five domains. The word “components” will be used instead of “domains” to better convey that the
The five components are indivisible, working together to achieve nurturing care. The five components of nurturing care are: good health, adequate nutrition, responsive caregiving, opportunities for learning, and safety and security. WASH will be reflected in safety and security.

5. Caring for the Caregiver. Many reviewers felt that the Framework underrepresented the critical need to ensure caregivers receive nurturing care if they, in turn, are expected to provide nurturing care for their children. The paragraph on ‘caregiver mental health’ in What’s new? was appreciated but caused confusion. Reviewers wondered why this topic was being described here when it was not a domain. Reviewers also wondered why the focus was on mental health rather than well-being. As a whole, the comments suggested that supports to caregivers needed much more prominence in the document.

Response: The Framework will bring this topic into sharper focus and broaden the scope of care of the caregiver to overall well-being. At least one box will focus on this topic to ensure high visibility.

6. Culture and context. A concern raised by multiple reviewers was that the Framework assumes a nuclear family and is not inclusive of other caregivers providing nurturing care to newborns, infants and young children (i.e., grandmothers, siblings, members of the extended family, providers of early childcare and even nurses in the neonatal and paediatric intensive care units). Numerous comments also stated that the document highlights the role of the mother at the cost of a greater involvement of fathers in nurturing care. Others wanted more emphasis on the high vulnerability of pregnant women, mothers and girl children. The issue of promoting nurturing care while being respectful of indigenous cultures and building on their strengths was seen as needing more discussion.

Response: The language in the Framework, text boxes, and eventual addition of images will be reviewed to ensure recognition of all family compositions and caregivers. The definition of caregiver will be broadened. Additional text or boxes will ensure that any examples provided include a variety of caregivers, not just the mother, thereby conveying the message that all caregivers are important. The Strategic Actions will emphasize the need to ensure local assets are valued and serve as the basis upon which to strengthen services.

7. Roles and Responsibilities. When referring to the section on the contributions of different sectors in the Framework, reviewers asked for clarity on whether the Framework was calling for ‘health led’ or ‘multi-sectoral’. There were strong opinions for both. However, when reading through the comments together, reviewers were more strongly calling for multi-sectoral collaborations and a very detailed roadmap of what working together across sectors would look like. There were also a few questions about which sectors had been included and suggestions to add others (e.g., agriculture, labour).

Response: The Framework builds on the existing ECD policies and working groups in many countries worldwide which call for a multi-sectoral approach to achieving early childhood development. Within this context, the Framework seeks to reinforce the importance of working together. The Framework will take a whole-of-government and whole-of-society approach. Within this, the health sector, with its direct contact with pregnant women and children under age 3, will be encouraged to elevate its efforts. The sectors detailed in the early draft reflect the sectors that have mandates directly focused on women and young children. Other important sectors, identified by the reviewers, are indeed instrumental to a holistic approach and should be involved in any national level planning. The Framework will include a section on roles and responsibilities which will encompass sectors and constituencies. The detailed guidance requested by the reviewers will be illustrated through vignettes and later on through the operational guidance.
8. **Guiding Principles.** Of the six guiding principles proposed, two received the most comments: ‘early means early’ and ‘lifecourse approach’. It was felt these were contradictory and overlapping. Reviewers questioned whether, ‘enabling environment’ and ‘multi-sectoral approach’ were principles or solutions. Reviewers also suggested some other important themes as guiding principles, such as “children as rights holders”, “the role of community,” and “addressing the special needs of vulnerable groups”.

Response: Comments in this section and elsewhere suggested that the guiding principles needed to reinforce some of the key messages repeatedly mentioned. For example, attention to child rights, recognizing and valuing the multiple family compositions around the world, requiring the involvement of every sector and everyone. The Framework will propose a new set of guiding principles (some the same as or linked to what was provided in the earlier version and some new).

9. **Strategic Actions.** Reviewers were in broad agreement with the 5 strategic actions, but suggested more emphasis on child rights; prevention; communication efforts; availability of adequate public, private and donor funding, including for the inter-sectoral work; a strengthened role of community engagement (including indigenous communities) at all levels of the strategic actions; the importance of a skilled, supported and remunerated workforce of frontline workers; and strong engagement from academia in capacity building, implementation, monitoring and evaluation, and research. Concerns were raised who would be monitoring the implementation of NC globally; how good practices could be shared for maximum uptake; and how tools and resources would be linked to the Strategic Actions. Additionally, some reviewers proposed that Strategic Action 3, relating to families and communities, should be moved up, and that the content of the last two Strategic Actions on “Monitor implementation and account for results” and Innovate for scale-up and strengthen the evidence” should be separated more logically and reorganized.

Response: The Strategic Actions will stay the same but be shorter and crisper. Text boxes in the document may address some of the requests (e.g., financing). The sections on roles and responsibilities may address others (e.g., role of academic institutions in building core competencies).

**Additional issues**

- Nurturing care was interpreted, at times, as synonymous with ECD. These are not synonyms. Nurturing care is what the brain needs and expects to achieve optimal development. Nurturing care needs to be supported across the life course. When referring to young children, nurturing care is the set of inputs that results in early childhood development.

- Some reviewers felt that the Framework could elevate the link between the Framework and existing protocols and conventions recognizing the right of the child and the right of the family to receive support from the government as duty bearer. A guiding principle specific to this will be included in the Framework.

- The range of vulnerable children (e.g., living in fragile settings, chronic illness, disability, maltreatment), and implications for these children, are underrepresented in the Framework. The Framework could draw attention to all of these vulnerabilities, rather than just a few. The Framework could help readers understand how nurturing care might be tailored for vulnerable children and families. Text boxes featuring different vulnerable groups or circumstances will be used to draw attention to the range of vulnerabilities. How to tailor nurturing care in these circumstances is related to operationalizing the Framework and will be kept in mind when developing the Operational guidance.
The proposed implementation approach could benefit from more explanation of the three levels, how families move in and out of the three levels depending on their needs, and how identification of needs at regular intervals (across all three levels) can ensure timely identification and response. The Framework will clarify these and include a visual.

Reviewers proposed a range of responses to the question on suggested milestones (implementation of the Framework, results, impacts). The focus of this section is on the Framework – what change will it bring. Results and impacts will be captured in subsequent monitoring guidance. However, readers are reminded that the Framework is aligned with the SDGs and the goals of the Global Strategy on Women’s Children’s & Adolescent’s health. As such, indicators will be derived from these two agendas.

The Nurturing Care Framework is being developed by WHO and UNICEF, in collaboration with The Partnership for Maternal, Newborn & Child Health (PMNCH), the ECD Action Network, and many other partners. For more information, visit [http://nurturing-care.org](http://nurturing-care.org).