

Providing a path to early success: securing the foundation for learning

By Joan Lombardi, Senior Fellow, Bernard van Leer Foundation, and Rebecca Sayre, International Early Childhood Development Consultant

What policies and programmes can promote learning among the 0–3 age group? This article examines what we know about the status of children of this age; outlines why early childhood policies need to be integrated and comprehensive, providing a continuum of support; and suggests an agenda for change to assure that young children survive and thrive, grow and learn.

The lack of proper nutrition or stimulation in the earliest years – particularly pregnancy to age two – has lifelong negative impacts on a child’s ability to learn, grow and contribute to society.

Jim Yong Kim, President, World Bank Group, 2013

The idea that children begin to learn when they reach the door of the schoolhouse – or even preschool – is gradually being replaced with a growing understanding that ‘learning begins at birth’ (Haddad *et al.*, 1990). Mounting evidence, from neuroscience to economics, is deepening our understanding that what happens during the prenatal period and first 3 years of a child’s life has a profound impact on their capacity to succeed when they encounter more formal education, and beyond into later life.

However, early childhood policies and services have been slow to reflect this growing understanding. For very young children, responsive interactions with parents and other caregivers is where learning begins. It is the relationship with caring adults that provides the earliest educational environment for children. Babies and toddlers depend on caring adults to meet their basic needs, to be responsive to their cues, to help establish a secure attachment. This in turn leads to self-confidence, curiosity, persistence and other behaviours that are so essential to lifelong learning. At the same time, children at home and in childcare need to be bathed in language, right from the start, in order to be able to grow to be successful learners in primary school.

While good health and nutrition are critical to development, particularly during the first few years of life, these essential services alone are not enough. Parenting and family support, as well as quality

childcare for working families, are essential to get children off to a strong start.

This article explains why a recognition that learning begins early calls for more integrated and comprehensive services, and what policy priorities that implies. First, though, it sets the scene by surveying some of what we know about the status of young children globally, in terms of factors that underpin their healthy overall development and therefore, consequently, their capacity to learn.

What do we know about the status of young children?

Every year, more than 130 million children are born, most of them in low- and middle-income countries (UNICEF, 2012a). Although child mortality has fallen by 41% since 1990, in 2011, 6.9 million children died before reaching their fifth birthday, many from causes that are both treatable and preventable. More than one-third of these deaths are attributable to undernutrition; leading causes also include birth complications, pneumonia, diarrhoea and malaria (UNICEF, 2012b).

The factors that threaten or promote a child’s survival are most often those that either support or undermine a child’s healthy development and early learning. Some of the most important among these factors – poverty and inequality, maternal health and well-being, early health and nutrition, and early experiences – are considered below. Unfortunately, data are limited, and where they do exist they are often for the 0–5 age group as a whole, making it difficult to focus on the first 3 years.

Poverty and inequality

An estimated 25% of the population lives below the international poverty level of USD 1.25 per day (World Bank, 2008), with many more barely doing better. In 2007, it was estimated that 200 million children under age 5 in low- and middle-income countries fail to reach their developmental potential due to poverty and stunting (Grantham-McGregor *et al.*, 2007) – see Table 1. Inequality is also growing in wealthier countries, where children and young adults are now 25% more likely to be poor than the population as a whole (OECD, 2008).

Table 1 Prevalence and number (in millions) of disadvantaged children under 5 years by region

	Population younger than 5 years (millions)	Percentage living in poverty	Number living in poverty (millions)	Percentage stunted	Number stunted (millions)	Percentage stunted, living in poverty or both	Number stunted, living in poverty or both (millions)
Sub-Saharan Africa	117.0	46%	54.3	37%	43.7	61%	70.9
Middle East and North Africa	44.1	4%	1.6	21%	9.1	22%	9.9
South Asia	169.3	27%	46.3	39%	65.6	52%	88.8
East Asia and Pacific	145.7	11%	16.6	17%	25.2	23%	33.6
Latin America and the Caribbean	56.5	10%	5.9	14%	7.9	19%	10.8
Central and Eastern Europe	26.4	4%	1.0	16%	4.2	18%	4.7
Developing countries	559.1	22%	125.6	28%	155.7	39%	218.7

Source: Grantham-McGregor *et al.*, 2007

While many children survive the adverse conditions that come with an early life in poverty, such conditions undermine the potential of this developmental period. They can contribute to family stress, compromise family well-being, and prevent access to health services and the enriched experiences that are crucial for early learning. The cumulative impact increases the chances of long-term consequences.

Maternal health and well-being

Mothers and children need a continuum of care from pre-pregnancy through pregnancy and childbirth and through the early years of life (CSDH, 2008). As Save the Children put it in releasing their annual *State of the World's Mothers* report (2012):

If a mother is impoverished, overworked, poorly educated and in poor health, she may not be able to feed the baby adequately, with largely irreversible effects.

Not only maternal health but also maternal education is important to the long-term development of children. Over the past four decades, the global increase in women's education has prevented more than 4 million child deaths. Educated women are more likely to delay child rearing, be able to resist violence, and participate in the political process. Yet female adult literacy continues to be an issue. In at least 63 countries around

the world, young women from poor households are significantly less educated than in other sectors of society (UN Secretary General, 2012).

Early health and nutrition

Lack of access to healthy living conditions and adequate nutrition continues to have a serious impact on the development of young children around the world. An estimated 15% of births result in low-birthweight babies and 27% of the children under age 5 around the world are moderately or severely stunted (UNICEF, 2012a). These children are at an obvious disadvantage for healthy development, as are the many children made vulnerable to disease through inadequate water, sanitation and hygiene. Only 37% of babies around the world are exclusively breastfed within their first 6 months (UNICEF, 2012a) – and while this is often seen as a health issue, responsive breastfeeding also promotes nurturing interactions and stimulation that support development and early learning.

Early childhood experiences

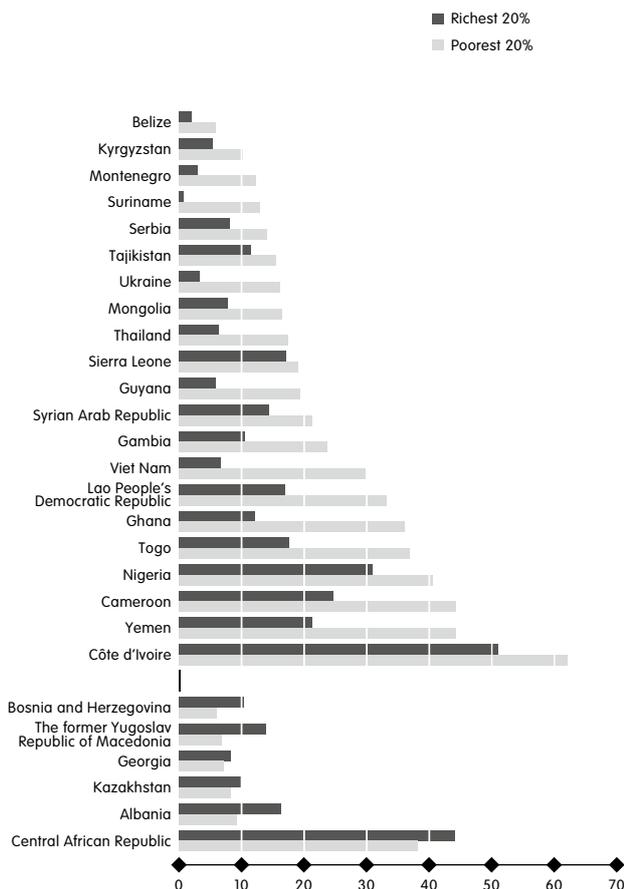
The science of early childhood tells us that what happens in the early years of life can have a profound impact on the developing brain (Shonkoff and Phillips, 2000). The quality of relationships that children have with parents and other caregivers affects areas of development that

are fundamental building blocks for early learning, including social-emotional, cognitive/language and physical well-being (CSDH, 2008). While most parents want the best for their young children, many are unprepared for parenthood – lack of information, family support, and economic resources undermines the kind of responsive parenting practices that allow quality caregiver–child relationships to develop.

For example, based on data from more than 30 countries, among children 2–4 years old, violent forms of discipline, including physical punishment and psychological aggression, are widespread (UNICEF, 2012c). Based on data from more than 20 countries on children under 5, the poorest children are at greatest risk of being left alone or with inadequate care (see Figure 1), exposing them to increased risk of injury as well as abuse and neglect (UNICEF, 2012c). Lack of paid leave and

Figure 1 Children under 5 left alone or with inadequate care

Percentage of children under 5 left alone or in the care of another child under 10 years old in the past week, by household wealth quintile

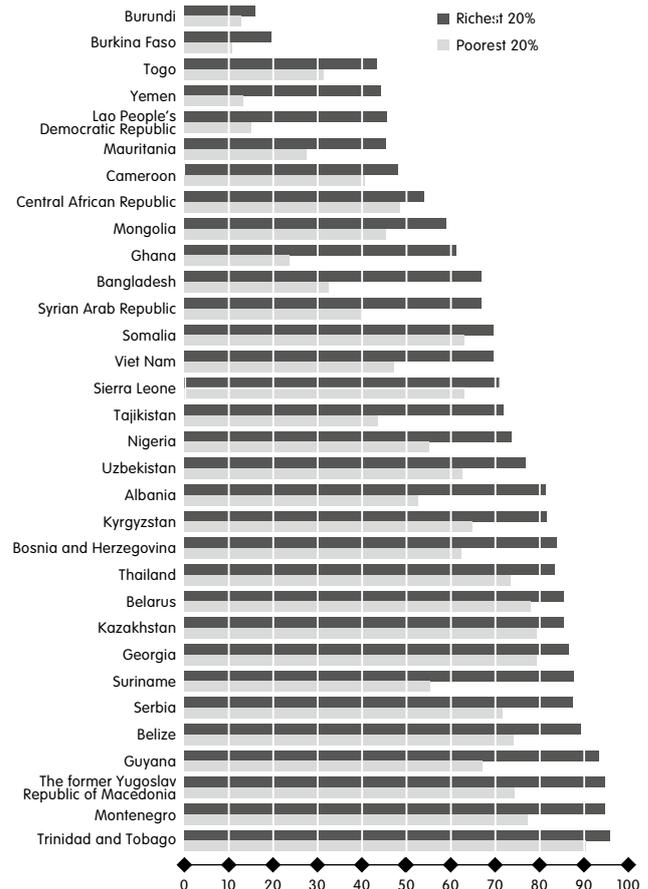


Note: This analysis included 28 countries, one of which (Uzbekistan) did not show a statistically significant difference between the richest and poorest households and was therefore excluded from the graph. Albania, Belize, and Bosnia and Herzegovina showed a statistically significant difference at the 5 per cent level ($p \leq .05$); all other countries showed a statistically significant difference at the 1 per cent level ($p \leq .01$). When the direction of the association was not consistent with the expected pattern, the chart groups the countries accordingly.

Source: UNICEF, 2012c

Figure 2 Children under 5 engaged in early learning at home

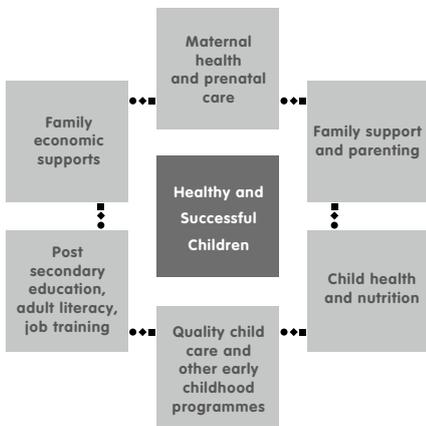
Percentage of children under 5 engaged by an adult household member in four or more activities to promote learning and school readiness in the past three days, by household wealth quintile



Note: This analysis included 34 countries, two of which (Côte d'Ivoire and the Gambia) did not show a statistically significant difference between the richest and poorest households and were therefore excluded from the graph. Burundi and the Central African Republic showed a statistically significant difference at the 5 per cent level ($p \leq .05$); all other countries showed a statistically significant difference at the 1 per cent level ($p \leq .01$).

Source: UNICEF, 2012c

Figure 3 A two generation approach to healthy and successful child development



Source: authors

Figure 4 Essential interventions during young children's development

Parents/ caregivers	Pregnant women	Children			Transition to primary school
		Birth	Age 2	Age 4	
Positive parenting education	Social and child protection	Birth registration			
Enforced domestic violence laws, provisions in judicial system to protect young children, child welfare system, income supports					
Parent education on child health and development	Health	Prenatal care • antenatal visits (at least 4) • skilled attendants at delivery	Expanded program of immunizations	Well-child visits (growth monitoring and promotion)	
Breastfeeding promotion, complementary feeding, dietary diversity	Nutrition	Prenatal nutrition • folic acid • iron supplementation • iodine	Exclusive breastfeeding until 6 months; complementary feeding to age 2	Vitamin A, iodine, iron	
Early stimulation, importance of formal early learning	Education		Early stimulation, at home or through quality child care	ECCE and preprimary education to promote school readiness	
Early childhood outreach should be coordinated with existing health and family support services. Interventions can be center-based, through group programs, or via home visiting			As more children enroll in preprimary school, center-based programs can be used to reach increasing numbers of children.		

Source: Adapted from SABER-ECD Framework, Neuman and Devercelli, World Bank, 2012

quality childcare undermines family well-being and puts children's development at risk.

Based on data from more than 30 countries, on families with children under age 5, children from the poorest households are also less likely than children from the richest households to be engaged in early learning activities (UNICEF, 2012c), see Figure 2 on previous page.

What policies can help lead to early success?

How can policies promote learning from birth? There is increasing evidence from around the world that reducing inequalities requires interventions that are integrated, as well as being of high quality and targeted to the most vulnerable (Engle *et al.*, 2011). The Commission on the Social Determinants of Health called for policies that provide 'equity from the start' and that use a more 'comprehensive approach to the early years of life' (CSDH, 2008). As noted by Margaret Chan, Director General of the World Health Organization:

Three areas are critical foundations for healthy child development: stable, responsive and nurturing caregiving with opportunities to learn; safe, supportive, physical environments; and appropriate nutrition.

(Chan, 2013)

Since the development of young children is shaped by their family and community, policies and programmes must address the needs of two generations – both children and the adults in their lives, most notably their parents and direct caregivers (Ascend, 2012). When it comes to early learning among the 0–3 age group, parenting support, including paid parental leave, family support such as home visiting or parenting groups, and quality childcare, are especially important. In addition, many families need economic support (such as conditional cash transfers) as well as opportunities for maternal education and job training (see Figure 3).

Parenting support can be delivered in a variety of ways: by integrating it into community health or nutrition programmes (such as Care for Child Development, described in the article on page 23), through home visiting programmes (delivered by health, education or social protection) or through group family support programmes such as mothers' groups and special outreach to fathers. A focus on parenting does not have to stop when children enter childcare – in fact, family engagement should be a key element of a quality childcare programme, along with trained staff, adequate space and supplies, and small groups.



While public awareness about the early years has grown, there is still a gap between what science tells us and what the general public understands and demands. Photo • Courtesy Mãe Coruja Programme

It is important to realise that there is no magic age or single programme that can guarantee success. Child development is influenced by cumulative experiences in the early years, with one period building on another. We need to assure a path to success, which includes a series of supports that contribute to child well-being throughout the early childhood period, 0–8 years.

The policies of different countries often vary depending on history, resources and government structure, and there is much potential for countries to learn from each other how best to integrate and align their systems. The World Bank’s Systems Approach for Better Education Results (SABER) – a tool that has been implemented in countries around the world – provides systematic analysis on a comprehensive set of policies and programmes ranging from prenatal care to birth registration, economic supports and pre-primary education, see Figure 4 (Neuman and Devercelli, 2012).

Three next steps to move forward

In recent years, there has been increased public attention to the early years, yet investments in the health and education of very young children still lags farthest behind. What can convince countries and international donors to invest more resources in promoting learning that begins at birth? Three factors are crucial.

1 Improve data

Approximately half of the births in the world still go unregistered (UNICEF, 2012a), the start of serious gaps in data about children’s crucial first 3 years. While UNICEF has made progress in developing indicators for children under the age of 5, and there are an increasing number of birth cohort studies being conducted around the world, new initiatives are needed to expand birth registration, to develop improved measures of child well-being, and to disaggregate international and national data by age, poverty, community, and other demographic characteristics. Only by presenting hard

evidence of the developmental status of children from birth through the first years of life, as well as increasing evidence of what works to improve those developmental outcomes, can we hope to increase investments.

2 Coordinate planning

Given that the domains of development are integrated, early childhood policies must comprehensively address the needs of children. This calls for a coordinated approach across public agencies and throughout the developmental period. Coordinated planning across the sectors of health, education, social protection and child protection is necessary at the international, national and community levels. In recent years, promising examples of intersectoral coordination have emerged in countries such as Jamaica and Chile. Both vertical and horizontal alignment of policies is needed to assure continuity, increase efficiency and encourage better outcomes for children.

'We need to assure a path to success, which includes a series of supports that contribute to child well-being throughout the early childhood period, 0–8 years.'

3 Increase public awareness

While public awareness about the early years has grown, there is still a gap between what science tells us and what the general public understands and demands. In this age of media and emerging technologies, we have new opportunities to increase public awareness and influence the behaviour of parents and policymakers. To make this happen, we need to build partnerships and recruit new allies – from the business community to law enforcement, health professionals, and faith-based organisations. We have to continue to talk about a child's right to a good start in life and the importance of early investments to education, health, and the well-being of nations. Until early childhood becomes everyone's business, it will remain an issue on the sidelines,

without the attention, focus, and sufficient resources to make a difference.

Today more than ever, we understand both the importance of the early years and the key elements of success. No single programme can do it alone. As we move towards the post-2015 period, there is an opportunity to refocus on the earliest years of development. We need to support families across the life course and provide a continuum of quality services that can improve the trajectory that leads to lifelong learning for all children around the world.

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