



Supporting Children Affected by HIV/AIDS: Using Implementation Science to Improve Community-Based Early Childhood Development Programming

Purpose of Request

The goal of this program is to **use implementation science methods to evaluate strategies that increase the effectiveness of Early Childhood Development (ECD) programming and improve developmental outcomes for infants and young children affected by HIV/AIDS.** This goal will be achieved by working with local partners and community based organizations to implement evidence-based family oriented and community based ECD strategies and, using implementation science methods, testing participatory social accountability tools to increase effectiveness and sustainability.



Home-based ECD programs will be implemented for children from birth to age 5 based on the Essential Package model that was recently

tested in Zambia and Mozambique, and experience from our programs in Rwanda and India. Important lessons will be drawn from our recent experience in using Essential Package methodologies and tools in Zambia. We will work closely with local partners and government in implementing these programs and the participatory social accountability framework, with the goal of measuring the contribution and potential of participatory social accountability to the effectiveness of community and home based Early Childhood Development programs. As the goal of implementation science is to document replicable models, tools and strategies that improve effectiveness in implementing best practices, it is important that we use scientifically valid approaches to test the impact of participatory social accountability frameworks. We will compare communities where the participatory governance strategy is implemented with those where exposure starts later.

Issue and Need

Global evidence supports the effectiveness of early childhood development programming. However, the science around **what** to deliver is better established than is the science on **how** to do it effectively and efficiently for the greatest impact. “Implementation science” is required to fill this evidence-to-program gap and is defined as the study and development of models, systems, methods and tools to improve the uptake, implementation, and translation of best

and promising practices into routine and institutionalized models. Implementation science will be used to improve ECD program performance using scientifically sound methods to assess the factors associated with success and impact.

In 2007, evidence-based reviews published in

performance and adult earnings, highlighting the potential of this intervention to break the intergenerational cycle of poverty.¹ Updates of the earlier evidence-based reviews published in 2011 strengthen these conclusions and emphasize the benefit accruing for the most vulnerable children including those affected by HIV.² Effective intervention strategies that have been documented include strengthening caregiver support and skills and increasing the capacity of community-based organizations to support ECD programming.

Results from a recent randomized evaluation of a preschool intervention in rural Mozambique demonstrated that children who attended preschool programs were 24% more likely to enroll in primary school and were significantly better equipped to learn than children not covered by the program.³

Urgent to Address This Need Now

¹ Engle PL, Black MM, Behrman, JR, et al. Strategies to avoid the loss of developmental potential in more than 200 million children in the developing world. *Lancet* 2007;369:229-42.

² Walker SP, Wachs TD, Grantham-McGregor S, et al. Inequality in early childhood: risk and protective factors for early child development. *Lancet* 2011;378:1325-38.

³ The World Bank Group and Save the Children. The Promise of Preschool in Africa: A Randomized Impact Evaluation of Early Childhood Development in Rural Mozambique. February 2012. <http://www.savethechildren.org>

Priorities for further research, identified in two 2011 *Lancet* publications, include, “Assessment of interventions to support caregivers and promote development of children affected by HIV”, and identifying “factors [that] increase effectiveness of parenting programmes.”⁴ Given the strong evidence of the value of providing ECD programming to young, vulnerable children

next step is to more thoroughly understand **how** to best deliver and sustain ECD programs to achieve the greatest impact for these vulnerable children. The proposed initiative, through the use of an implementation science approach, will allow us to identify critical factors leading to more positive child and caregiver outcomes and to a sustainable approach for effective ECD programming. This work is timely for CARE as we extend the use of implementation science to improve our programs in ECD, using lessons learned and knowledge from current work in Malawi in maternal and neonatal health programming.

Addressing this issue in Mozambique is timely given the recent report noting the effectiveness of preschool programs for children in Mozambique. The proposed intervention is aligned with Government Policies such as the recently developed Accelerated Child Survival and Development strategy and the Multi-Sectoral Action Plan to Reduce Malnutrition. Both documents emphasize a “**family-oriented, community-based approach**”. The current ECD strategy, however, promotes a center-based approach, whose financial viability in rural areas with extremely poor communities is questionable. Finding ways to reach the most

⁴ Engle PL, Fernald LCH, Alderman H, et al. Strategies for reducing inequalities and improving developmental outcomes for young children in low-income and middle-income countries. *Lancet* 2011;378:1339-53.

vulnerable households, through home-based and community-based approaches such as those proposed in the Essential Package is an important step in promoting optimal development in these communities. Building on recent pilot work with the Essential Package in Zambia and Mozambique by CARE and Save the Children, the current project is in an excellent position to explore factors leading to successful implementation of ECD programming and positive child and caregiver outcomes.



CARE USA Headquarters
151 Ellis Street, Atlanta, GA 30303
404-681-2552 | www.care.org

Copyright ©2011 by Cooperative for Assistance and Relief Everywhere, Inc. (CARE). All rights reserved.
Photo credit: ©Bob Stephenson

CARE/2011