



# PEDIATRICIANS PROMOTING EARLY CHILDHOOD DEVELOPMENT IN KENYA & TANZANIA

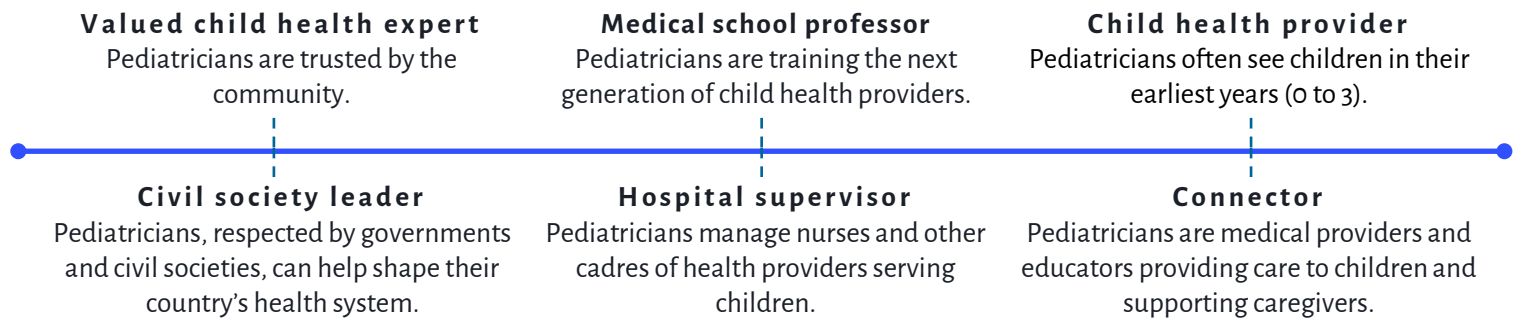
Nutrition and health. Protection from harm. Nurturing care and stimulation. These are the ingredients children need for a healthy start to life. The science behind early childhood development (ECD) is clear – a child’s brain is built, not born. The time between pregnancy and age three is the most critical period in shaping their lives during childhood, adolescence, and into adulthood. Unfortunately, 250 million of the world’s children under five are at risk of not reaching their full developmental potential. Almost 1 in 5 experience in stunting from malnutrition early in life. More than 300 million children under five have been exposed to societal violence. These conditions directly impact a child’s development today and their ability to contribute to society in the future.

In partnership with the Conrad N. Hilton Foundation, Kenya Paediatric Association, and Paediatric Association of Tanzania, the American Academy of Pediatrics seeks to leverage the clinical expertise, patient experience, and expansive networks of pediatricians to ensure national and sub-national health care systems are responsive and inclusive of nurturing care for early childhood development.

**Our approach leverages the AAP’s expertise and guidelines on early childhood interventions in the United States but is country-led by our partner societies in Kenya and Tanzania.**

## WHY PEDIATRICIANS?

Pediatricians & national pediatric societies are uniquely qualified to promote nurturing care for early childhood development in their communities and countries. They reach children and caregivers across the health system.



## IMPLEMENTATION APPROACH

Phase One

### ASSESSING

Understand the organizational and ECD advocacy capacity of national pediatric societies in Kenya and Tanzania

### PREPARING

Participate in an on-line learning platform for ECD skills-building ahead of in-person workshop

### TRAINING

Hold advocacy workshop to train ECD champions and identify national and sub-national priorities

Phase Two

### IMPLEMENTING

Engage with multiple sectors and levels of government to address ECD advocacy priorities

Phase Three

### LEARNING AND SUSTAINING

Share learnings across sectors to promote institutionalization



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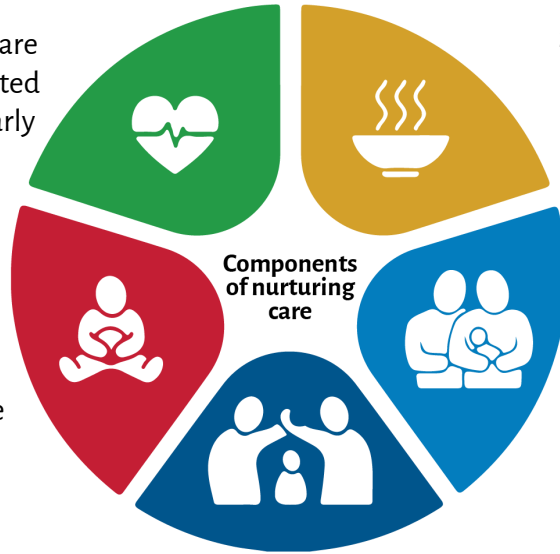
# Child Health Providers & Nurturing Care

## Good Health

Antenatal & childbirth care | Essential care for newborns | Immunizations | Integrated management of childhood illnesses | Early detection of disabling conditions | Prevention & cessation of tobacco & alcohol use | Limit exposure to secondhand smoke

## Early Learning

Support early reading & play | Guidance on low-resource strategies to promote early learning | Monitor cognitive, physical, language, motor, social, & emotional development



## Adequate Nutrition

Support breastfeeding | Monitor weight and height | Management of malnutrition | Promote diet diversity

## Responsive Caregiving

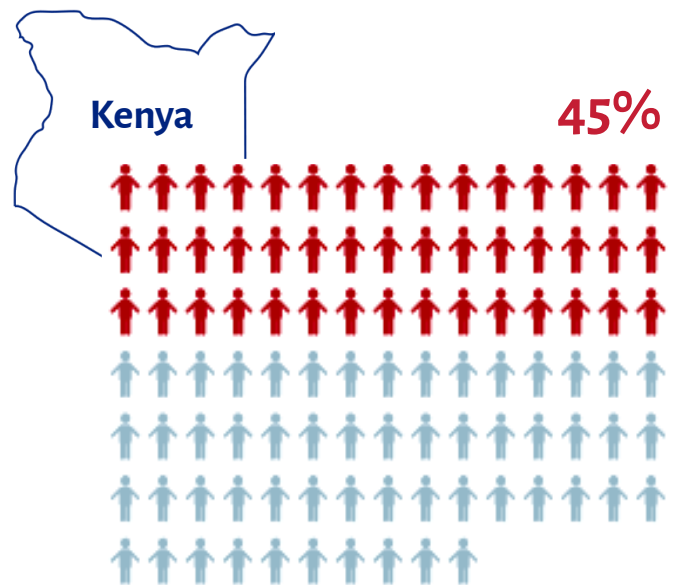
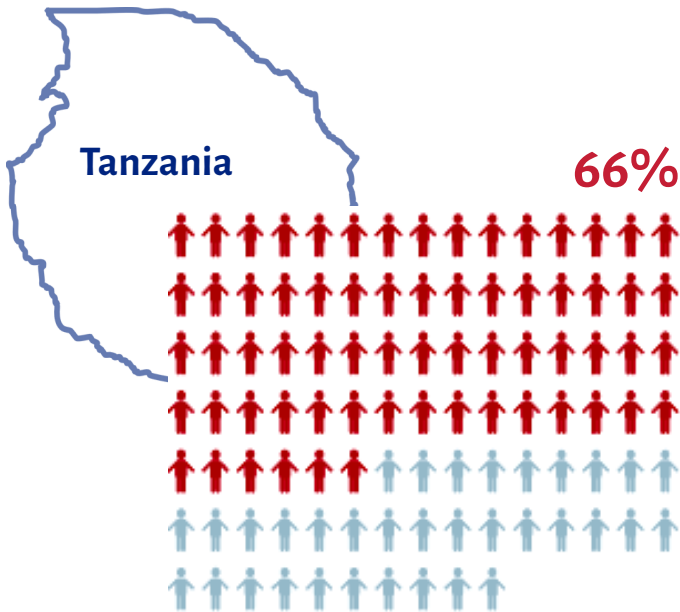
Skin-to-skin & Kangaroo care | Coach caregivers on play & responsive feeding | Milestone tracking

## Security & Safety

Birth registration | Good hygiene practices | Guidance to reduce exposure to air pollution | Advocate for safe family & play places | Ensure social care services understand ECD

*\*Adapted from Nurturing Care for Early Childhood Development: A framework for helping children survive and thrive to transform health and human potential.*

# Children at Risk of Poor Development



**KENYA  
PAEDIATRIC  
ASSOCIATION**



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