

ADAPTING EARLY CHILDHOOD PARENTING EDUCATION INITIATIVES IN SECONDARY AND PRIMARY HEALTH CARE SETTINGS: A PRACTICE MODEL

Shelina Bhamani^{1*}, Kiran Aslam², Sanober Nadeem³, Ghulamuddin Deelwar⁴, Sara Sheikh⁵, Misbah Shams⁶, Haseeb Khan⁷, Lumaan Sheikh⁸

¹Asst. Prof, Dr., Aga Khan University, Pakistan, Shelina.bhamani@aku.edu

²Ms., Aga Khan University, Pakistan, kiran.aslam@aku.edu

³Ms., Aga Khan Health Services, Pakistan, Sanober.nadeem@akhsp.org

⁴Dr., Aga Khan Health Services, Afghanistan, Ghulamuddin.delawar@akdn.org

⁵Ms., Aga Khan University, Pakistan, sara.sheikh@aku.edu

⁶Ms., Aga Khan University, Pakistan, misbah.shams@aku.edu

⁷Mr., Aga Khan University, Pakistan, Haseeb.khan@aku.edu

⁸Assoc. Prof, Dr., Aga Khan University, Pakistan, Lumaan.sheikh@aku.edu

*Corresponding Author

Abstract

Responsive parenting is one of the most crucial elements in early childhood development. Various platforms have reported that children provided with such interactions in the earliest years of life tend to thrive better in their early childhood and later life. However, parenting interactions are widely dependent upon parenting confidence and their knowledge and understanding regarding early years. Several initiatives focus on early childhood responsive parenting but there remains a vacuum of providing core support in the first six months of life. This support is essential and fundamental to establishing the foundations of early parent-child relationships. Healthcare settings could play a pivotal role in providing basic parenting education around newborn parenting and responsive caregiving. In this paper, we will discuss the model adopted in two of the primary and secondary healthcare settings of Pakistan and Afghanistan whereby we have implemented an early childhood newborn parenting education program. The descriptive paper details the concept taken to place parenting education as a center of women and children healthcare center, the content that is developed to provide training to the parents of newborns, the process applied to implement the parenting intervention training in both field sites, its financial implications and how the effectiveness and feasibility of this intervention are planned. Additionally, it could provide insights to the practitioners pertinent to how and what of implementation of parenting interventions in healthcare settings.

Keywords: Early childhood, health promotion, parenting

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INTRODUCTION: THE IMPORTANCE OF EARLY CHILDHOOD DEVELOPMENT

Early childhood development (ECD) is crucial for a child's future learning, behavior, and health (Duncan et al., 2010, p.306-25). The first thousand (1,000) days of life shape a child's foundation for all future development and lifelong learning, nurturing care, including adequate nutrition, responsive caregiving, opportunities for learning, and protection from harm, enables children to reach their full potential during this critical period (Britto et al., 2017, p. 91-102). Early childhood development programs, such as preschool interventions, have shown potential for positively affecting children's lives in affordable and effective ways (Reynolds & Temple, 2008). It lays the foundation for lifelong learning and success in primary, secondary, and tertiary education. Therefore, access to early childhood education and care services must be enabled for all young children (Skattebol, 2016). Failure to invest in early childhood development is costly and difficult to compensate for later in life as a result, underprivileged children are least likely to reach their developmental potential due to exposure to multiple risk factors, leading to lower school participation, milestone achievement, and future development (Attanasio, Cattan, & Meghir, 2022).

1. ROLE OF RESPONSIVE PARENTING

Therefore, responsive parenting in the early years is crucial for a child's development and well-being. Responsive parenting is one of the most crucial elements in early childhood development (Bhamani et al., 2024). Studies in various platforms have reported that children provided with such interactions in the earliest years of life tend to thrive better in their early childhood and later life. However, parenting interactions are widely dependent upon parenting confidence and their knowledge and understanding regarding early years. Responsive parenting refers to the sensitive and prompt response of the parent to the child's needs. Responsive parent-child interactions not only strengthen the parent-child bond but also allow the child to feel safe, secure, and connected to the parent. It entails being attentive and receptive to the child's needs, encouraging their individuality, self-regulation, and self-assertion (Newland, 2015). Reflective functioning (RF), or a parent's ability to recognize and respond to their child's physical, emotional, and mental needs, is an important aspect of responsive parenting. It promotes safe bonding and healthy Parent-Child connections (Landry et al., 2001). Responsive parenting helps a child develop future social competency, psychosocial functioning, and behavioral control (Hammer & Sawyer, 2016). It entails creating a nurturing environment, being sensitive to the child's developmental needs, and encouraging emotional and cognitive development (Aboud & Yousafzai, 2016). Parental reflective functioning is an important strategy for developing child attachment security and providing long-term mental and physical health advantages. Improving parental capacity for RF can help foster good parent-child connections. Strategies such as reading, storytelling, and introducing children to varied experiences can encourage culturally responsive participation from families (Tran, Luchters, & Fisher, 2017). Parenting confidence is strongly influenced by awareness and knowledge about ECD and newborn care. This highlights the importance of good communication and educational efforts to raise parental awareness and knowledge about ECD (Jeong et al., 2021).

2. THE ROLE OF HEALTH CARE PROVIDERS IN PARENTING EDUCATION

Healthcare professionals are essential to parenting education because they provide parents with invaluable advice, resources, and support while they manage the challenges of childrearing (Jones et al., 2021). Healthcare providers provide parents with vital information and skills about child development, health, and safety through a variety of interactions, including regular check-ups, consultations, and educational sessions (Ertem et al., 2022). They provide parents with the knowledge they need to make well-informed decisions about their kids' health, covering everything from behavior management and developmental milestones to nutrition and hygiene. Healthcare professionals create supportive environments where parents feel comfortable asking questions and sharing concerns because they encourage open communication and trust. Healthcare providers also serve as the primary opportunity to reach parents during the early years as they serve as the primary source of information. (Thompson et al., 2020).

Literature evidence also reflects that to help parents understand child development, educators and community-based professionals play a crucial role by providing information and guidance. Teachers provide information about educational needs, while community workers can provide specialized assistance with a range of family issues. By empowering parents together, they promote more robust family dynamics and resilient communities (Boelsma et al., 2021).

3. THE MODEL OF ECD PREP AT OBGYN AGA KHAN UNIVERSITY

Early Childhood Development is a fundamental stage that starts from conception to eight years of age. Responsive and nurturing interventions during the early years lead to better physiological and psychological outcomes. Moreover, such children also thrive better in the future at all aspects and stages of life. Keeping in mind the vital importance of early childhood development the Department of Obstetrics and Gynaecology at the Aga Khan University in 2020 established an early childhood newborn parenting education model. This initiative known as Early Childhood Development, Parenting Readiness Education Program (ECD PREP) encompasses an array of services focusing on parenting education and responsive caregiving. By seamlessly integrating education, research, and services, this model aimed to provide comprehensive support in nurturing young children (Aga Khan University, 2024). The comprehensive model of ECD PREP was offered to delivering parents, covering various modules including the "Introduction to ECD, Antenatal Education, Newborn Parenting Education, Parenting Education Consultation, School-based Parent Education Programme, Community Outreach Programme, and Systems Strengthening and Advocacy (Aga Khan University, 2024).

Antenatal education consultations were the first initiative of the ECD PREP that offered to pregnant couples encompass topics such as pregnancy navigation, healthy pregnancy, communication with the baby in the womb, preparing for parenthood, the involvement of fathers, early learning and stimulation, and playful parenting. In the newborn parenting education model, parents are grouped into cohorts for learning from experts and peers.

Another initiative was public awareness sessions/workshops focused on responsive caregiving, healthy child development, and school readiness. Weekly parenting education consultations were also offered in in-person or tele-clinic meetings for addressing developmental milestones, school readiness, parental engagement, and responsive caregiving. The module also includes grandparenting, social learning, and parenting in the 21st century. Moreover, in the school-based parent education program collaboration was done with schools for conducting workshops, group consultations, and school-based sessions to tailor education support. The module covered the topics of parent partnerships in learning, home-supported learning, screen time versus hands-on learning, age-appropriate parenting, and referral pathways for health and developmental needs.

Community outreach programs included capacity-building initiatives for nurses, healthcare providers, and stakeholders focusing on nurturing care, responsive caregiving, Parent-Child interactions, and family-centered care to promote health in hospitals and communities.

The systems strengthening and advocacy module focused on evidence-based policies for maternal and child health, advocating for responsive parenting and early childhood development. Activities include developing briefs, position statements, and social media campaigns (Aga Khan University, 2024). The team ECD wanted to scale up these parenting education initiatives from tertiary care to primary care settings in remote areas as well. Hence, a feasibility study on adaptation to ECD newborn parenting was launched which got funding from international organizations to assess the efficacy of implementation and explore if a similar model can be replicated in all contexts.

The feasibility study spans two countries, Pakistan and Afghanistan, with the first phase focused on the implementation of a comprehensive curriculum consisting of six key modules addressing early childhood development. These lessons address critical themes such as breastfeeding, newborn development, infant cues and behavior, maternal postpartum health, play, and parent-child interaction. This curriculum, known as the "Early Childhood Development Newborn Responsive Parenting Handbook," underwent rigorous internal and external validation processes before being produced by an expert team led by an Early Childhood Development (ECD) specialist.

To ensure accessibility, materials were translated into English, Urdu, and Dari. Primary healthcare facilities were identified in coordination with co-investigators using delivery rates and available services. Field investigators and healthcare providers received curriculum and module training from the core research team to deliver effective interventions to parents. The initiative began in November 2023 in Pakistan and January 2024 in Afghanistan.

Given the nature of the study, participants were separated into two groups: intervention and control. Mothers are registered shortly after delivery, with their express agreement. The control group gets baseline data collection, followed by the distribution of control handouts with no extra instructions. The control group's endline data collection will be collected on the sixth, with the provision of incentives.

In contrast, the intervention group receives monthly seminars covering each module for six months,

complemented by take-home handouts, resulting in monthly incentives. Data is collected manually and then typed into a Google form by field research workers. Monthly logs are kept at field sites and by the core research team, which includes attendance sheets and documentation of incentive payments. A data collecting tracker tracked the progress of monthly data collection. Regular meetings with field investigators are held to discuss any difficulties found during data gathering.

4. POLICY RECOMMENDATIONS

The implementation of mandated training and certification programs for healthcare providers is one policy suggestion to support the integration of Early Childhood Development (ECD) parenting education into healthcare sectors. As part of their professional development, healthcare professionals including physicians, nurses, midwives, and other pertinent personnel would be required by this policy to complete extensive training in evidence based ECD parenting education. To guarantee that medical professionals possess the know-how and abilities needed to assist parents in fostering their children's early development, certification may be necessary (Antelman et al., 2023).

Furthermore, this policy may require that paediatric examinations, prenatal and antenatal care visits, and other regular healthcare services for families with young children include ECD parenting education as a required component. Healthcare facilities would have to offer tools to help parents adopt good caregiving practices at home, like workshops, informational materials, and referral services (Hirve et al., 2023).

likewise, this policy may incentivize healthcare providers and facilities to promote ECD parental education through reimbursement mechanisms and quality improvement programs. By linking reimbursement to the provision of ECD parenting education and assessing outcomes linked to child development and family well-being, healthcare systems can encourage wider adoption of evidence-based practices while also ensuring responsibility for providing high-quality care.

Overall, requiring mandatory training and certification programs for healthcare providers, incorporating ECD parenting education into routine healthcare services, and incentivizing its delivery can help establish a comprehensive approach to promoting early childhood development in healthcare sectors. This policy recommendation emphasizes the vital role that healthcare providers play in helping families, as well as the need to invest in early childhood to promote children's and communities' long-term health and well-being.

5. CONCLUSION

In conclusion, this intervention establishes that investing in quality ECD programs, including those focused on newborn and responsive parenting, can yield long-term benefits for individuals and society, such as improved health, education, and economic outcomes. There is a need for policies and funding to support widespread access to high-quality ECD programs and interventions, including those that engage parents as partners to enhance their knowledge and ability for responsive parenting

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