Early Childhood Development

Protecting Children Early

Early Childhood Development (ECD) interventions are among the most cost-effective for improving the mental, physical, social, and developmental outcomes of all children. Research and experience have shown that children who benefit from quality ECD services are healthier, eager to learn, less likely to drop out of school, and – later in life – more likely to have a qualified job. Besides, ECD programs can ‘level the playing field’ for disadvantaged children.

Some of the benefits of ECD intervention include:

- Reduced stunting, heart disease and mental illness.
- Improved school attendance and achievement
- Improved social and gender equity through safeguarding.
- Better prospects for income generation

CRS ECD Programming

CRS Tanzania’s ECD program engages local partners and communities to serve thousands of children and their families. Our approach integrates ECD into on-going maternal, child health, and nutrition interventions within existing national and sub-national systems. By collaborating with other stakeholders, we can share resources and thereby increase the efficiency of our work. By strengthening the capacity of government ministries and national service providers to implement ECD, we ensure the sustainability of these programs.

THRIVE and THRIVE II

CRS Tanzania’s THRIVE ECD projects (2012-2018) provided thousands of children under the age of 5 affected by HIV in Tanzania, Kenya, and Malawi, with culturally appropriate ECD services while strengthening the capacity of community-based organizations to improve the quality of care and support for vulnerable children. THRIVE projects built on CRS’ experience working to serve orphans and vulnerable children in these countries and included key support to health, education, and child protection programs. THRIVE in Tanzania, funded by the Conrad N. Hilton
Foundation and in partnership with PASADIT, the Diocese of Geita, and the Mwanza Outreach Care and Support Organization (MOCSO), aimed to complement multisectoral programs to support vulnerable children affected by HIV and AIDS through:

**Capacity-building of partners and community-based organizations** aimed to improve these groups’ ability to lead and expand ECD services for vulnerable children.

**Direct provision of services** (training, home visits, creation of child-friendly spaces, and Child Health Days) to the critical factors for child development such as stable and responsive relationships, safe and stimulating physical environments, and adequate health and nutrition.

**Improving knowledge and expertise** across CRS and the ECD sector by active cross-country learning.

*THRIVE has serviced 3,593 children (0-5 years) and their caregivers through 24 partner health facilities and the 10 child-friendly spaces established by CRS.*

Children take part in an activity at a kindergarten satellite school in Mngorongoro village as part of the CCD. [Will Baxter]

**Care for Child Development**

Care for Child Development (CCD) (2018-2019) is a UNICEF-funded project aimed to train caregivers in appropriate early childhood stimulation and positive parenting behaviors. CRS implemented the CCD program in the Mbeya region to complement nutrition and WASH interventions. The project established 31 child-friendly spaces attached to health facilities and integrated with ECD activities in 50 pre-primary satellite schools. A total of 8,668 pregnant women and 34,452 children and their mothers and caregivers were trained in ECD skills by health facility workers, community health workers, and paraprofessionals at pre-primary schools. This capacity-building activity included key messages on the role of parents and caregivers in child safeguarding, child stimulation, child protection, and issues of birth registration.

**Management of PSBI and Neonatal Survival**

The “Integrating Care for Child Development into Management of Possible Severe Bacterial Infections (PSBI) and Neonatal Survival” project (2020-2022) aimed to reduce preventable deaths caused by malaria, pneumonia, and diarrheal diseases in the regions of Mbeya, Njombe, Iringa, Songwe, Runge, Unguja, and Pemba. Funded by UNICEF and in partnership with the Ministry of Health, Community Development, Gender, Elderly and Children MOHCDGEC and the President’s Office Regional Administration and Local Government (PORALG), CRS sought to improve healthcare systems and services resulting in 1) improved workforce knowledge and competence; 2) improved mentorship and supervision of healthcare staff & services; 3) improved maternity waiting homes and learning; 4) improved infection prevention and control (IPC) behaviors and systems; and 5) and improved ECD collaborations and reporting systems. With MOHCDGEC and other ECD stakeholders, the project contributed significantly to the launch of the National Multi-sectoral ECD program in December 2021.

**Strengthening Faith Systems for ECD**

In 2022, CRS committed to build stronger relationships with faith-based organizations with shared values and missions to advocate for transformational change and social justice in Tanzania. Leveraging on our partnership with the Diocesan Caritas in Mbeya and Tabora with links to 78 parishes, we aim to deliver quality nurturing care through 1) **Improving maternal mental wellbeing** through the Integrated Mothers and Babies Course and Early Childhood Development’ (IMBC/ECD) intervention for young mothers and caregivers of children 0-3 years old; 2) **Strengthening capacity of Diocesan-level Caritas** to deliver quality IMBC/ECD services; and 3) **Improving the capacity of faith-based leaders in advocating for ECD programs** in other different faith-based organizations and governmental levels.

**Looking Forward**

In the coming years, CRS Tanzania’s ECD Programming looks forward to building multi-sectoral and standalone ECD programming. We look forward to collaborating with Local Government Authorities (LGAs) in community mobilization and data management to influence national policies and guidelines in the years to come.