Implementation Research and Practice for Early Childhood Development

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Executive Summary

This Annals of the New York Academy of Sciences Special Issue is intended to advance evidence on implementation research and practice, including improved reporting of systems and processes when implementing early childhood development programs.

Papers authored by global researchers and practitioners in the field of Early Child Development, and including academicians, funders, think tanks, UN agencies and non-governmental organizations, cover topics related to costing and financing interventions that support ECD, shaping demand, supporting ECD in fragile contexts, capacity building, and transitioning to scale, with global programmatic experience.

Science has demonstrated that while genes provide the blueprint for the developing brain, a young child’s environment shapes early development and lays the foundation in a relatively short period of time for a lifetime capacity to learn, adapt to change, and develop psychological resilience.

Infants and children who do not receive adequate nutrition, stimulation, learning opportunities, care and protection early in life tend to have lowered cognitive, language, and psychosocial outcomes. Nurturing care is necessary for children’s healthy development, yet there is little understanding of how best to deliver these interventions across the full range of existing systems and in a wide diversity of settings.

Implementation research is central to understanding context, assessing performance, improving quality, facilitating systems’ strengthening, and informing large-scale use and sustainability of interventions. The intent is to understand what, why and how interventions work in real-world settings and to test approaches to improve them.

“What implementation evidence matters: scaling up nurturing interventions that promote early childhood development” introduces the domains and components of implementation, identifies key ingredients of the implementation process and discusses strategies to embed programs into existing platforms for scalability and sustainability.

“Reporting guidelines for implementation research on nurturing care interventions designed to promote early childhood development” introduces the C.A.R.E. (Consolidated Advice for Reporting ECD
Implementation Research) guidelines, to standardize reporting of implementation research in order to generate a body of evidence to evaluate and understand what works and what does not.

Few studies have investigated the short- and long-term impacts of dosage on children’s development. Moreover, few of the studies have been conducted with providers within existing health, education, and social welfare systems, providers who are likely candidates in scaled up programs; it will be necessary to design interventions from the outset with the characteristics of the provider taken into consideration. Several papers in this series highlight issues concerned with adapting program delivery and workforce training to the context.

It is recognized that interventions for promoting ECD are not stand alone, but part of a broader framework of nurturing care. Implementation strategies focus on how best to embed individual interventions within existing systems to increase coverage and scale. There are six key strategies that emerge from the series as a whole:

First, adopt multisectoral intervention packages. An enabling environment for multisectoral strategies requires coordinated national policies with implementable budgeted action plans that are governed by a coordinating body at national and subnational levels.

Second, strengthen the system to deliver quality of care through a trained workforce. Here, an examination of competencies is needed: what knowledge and skills are common for effective delivery across a number of interventions and what are unique to ECD?

Third, broaden data and evidence system to enhance the ability to measure change, monitor progress and use the data and evidence to inform improvements.

Fourth, cost and finance for sustainable and scaled up program delivery. Program implementation should be documented through costing and expenditure modeling.

Fifth, advocacy and communication strategies are important for building demand for services.

And sixth, differentiate strategies based on country context.

In this series, the papers encompass contexts affecting implementation, adaption and feasibility testing of programs for scales, documenting processes of implementation, evaluations of fidelity, description of how interventions are introduced into systems, and implications for scale and sustainability.

The seven cases highlight the breadth of interventions that can potentially promote children’s development and the range of intervention settings, including Australia, Brazil, Colombia, Jamaica, Malawi, Pakistan, South Africa, and Zimbabwe, that will influence program planning with respect to dosage, delivery and demand.

Understanding the context for adaption is underscored by Murphy and colleagues who describe the urgent need for implementation of ECD support services in humanitarian contexts where evidence building must be responsive to rapidly changing situations and embedded in practice partnerships.
Retaining fidelity to a program is considered a critical feature in achieving desired impacts. Goldfeld and colleagues report three important factors that influence effectiveness of sustained nurse home visiting programs and how these were addressed in the right@home program.

The value of implementation evaluation depends on how data are used to inform decisions about quality improvements. Data from program monitoring and implementation evaluations need to be made available in a timely manner to providers, as demonstrated in the large-scale implementation of an early childhood program in Colombia (aeioTU program).

Jain and colleagues demonstrated that although parents value early care interventions, they and their children may benefit from the intentional efforts of organizations to shape demand for quality improvements.

The framework reported by Nores and Fernandez shows taking interventions to scale requires not only evidence-based models, but also leadership, adequate workforces, effective partnerships with a range of implementation stakeholders, financing, and governance.

Cost data about nurturing interventions that might inform financial planning for programs at scale are limited but employing standardized costing tools outlined by Gustafsson-Wright and Boggid-Jones provides a way forward.

Radner and colleagues identify a series of lessons that support evidence building for scale and sustainability including strong entrepreneurial leadership, rigorous measurement and active use of data in support of adaptive learning, and champions acting at subnational levels.

If the evidence in these papers is to lay a foundation for future progress, greater attention to reporting implementation processes is needed. Yousafzai and colleagues describe guidelines developed through an expert e-Delphi process that provide an approach to systematically report program implementation that might facilitate shared learning.

Aboud and Prado present guidance on monitoring and evaluating implementation processes for interventions that promote ECD, reinforcing the need for rigorous program measurement of the variables outlined in the reporting guidelines. These include mixed method approaches to evaluating provider competencies, quality of the program, and stakeholder engagement, among others.

Qualitative research suggests that simple, scientifically robust programs can be scaled up, in the context of strong leadership, engagement with local implementers, when run in a phased manner. As noted by Nores and Fernandez, taking interventions to scale typically requires integration into existing delivery platforms.

Identifying and strategically strengthening gaps in service delivery capacity raises programmatic costs, threatening financial sustainability of a program. As recommended by Gustafsson-Wright and Boggid-Jones, systematically gathering comprehensive costing data for ECD interventions will allow for more direct comparison between programs and an assessment of a comprehensive return on investment.

Conclusion
As we look toward strengthening implementation practice, there are key areas that need to be informed by
research. Some of these are highlighted in a final chapter on “State of the Science on Implementation Research.”

For example, more attention needs to be paid to the role of private sector in the provision of services and shaping demand for servings. Also, understanding that often private and public are not separate, implementation research needs to investigate local or community-level partnerships, for example, public-private, that enable the scale-up of services.

We know very little about how to shape demand which occurs at several levels from the beneficiaries to the policy makers. And there is a need for systemic investigation in public finance, cost to expenditure data, and understanding of effective models of resource allocation.

This Special Issue shares research suggesting ways to strengthen interventions and strategies of embedding them within systems, making significant progress in unpacking the “how” of implementation. However, greater efforts will be needed to operationalize the multisectoral delivery through evidence-based practice for the different delivery systems that support early child development.