Creciendo Sanos: An Early Childhood Health and Development Program in Southwest Guatemala

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Trifinio region in the south-west
Public-Private Partnership
Dimensions of Child Well-Being

1) **Health** (survival, infections)
2) **Nutrition** (growth)
3) **Development** (sensory-motor, cognitive, and socio-emotional)

- Global research has demonstrated the importance of interventions that combine these three areas into an integrated model of care

Pilot Study: Guatemala, July 2012

- Study included 75 children ages 12 – 48 months from 8 different communities in the Trifinio
  - Demographic survey
  - Developmental screening with Ages and Stages Questionnaire (ASQ)
    - 30-item questionnaire completed by parent at specific ages
    - 5 developmental categories:
      - Communication
      - Gross Motor
      - Fine Motor
      - Problem Solving
      - Personal Social
Pilot Study: Guatemala, July 2012

- Demographic survey results:
  - 37% of mothers could not read or write
  - 32% of mothers had not received any formal education
  - Many mothers did not stimulate their children through behaviors such as reading and story-telling
    - 53% of mothers reported reading books to their children (16% read books > 3 times per week)
    - 65% reported telling their children stories (15% tell stories > 3 times per week)
Percentage of children at the Trifinio communities with cumulative delays in any of the 5 ASQ categories.

- No delays: 41%
- 1 or more delays: 59%
- 2 or more delays: 38%
- 3 or more delays: 18%
- 4 or more delays: 9%

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Effect of specific risk factors on the frequency of having 2 or more ASQ delays

- **Mother's literacy**: 28% Yes, 56% No
- **Mother's primary education**: 27% Yes, 63% No
- **3 or fewer pregnancies**: 30% Yes, 54% No
- **Plays with toys**: 32% Yes, 78% No
- **Reads books**: 28% Yes, 49% No
Pilot Study: Guatemala, July 2013

• Intervention:
  – Flipchart instructional talks with mothers covering age-related topics
    • 0-6 months: post-partum depression, child health, development, hygiene, nutrition
    • 6-12 months: child health, development, hygiene, injury prevention, nutrition

• Learning assessments:
  – Pre: before the flipchart talk
  – Post-1: immediately after the flipchart talk
  – Post-2: 1-2 weeks after the flipchart talk
Pilot Study: Guatemala, July 2013

- **0-6 month flipchart**
  - 38 mothers completed learning assessments (12 questions worth 25 points)
Pilot Study: Guatemala, July 2013

• 6-12 month flipchart
  – 38 mothers completed learning assessments (11 questions worth 20 points)
Creciendo Sanos (Growing Up Healthy)

• Neonatal Visits (individual home visits)
  1. Birth visit (~3 days of life)
     – CHW assessment of danger signs (jaundice, respiratory distress, convulsions, lethargy, poor feeding, temperature instability, umbilical infection), growth monitoring, EPDS screen
  2. 2-week visit
     – CHW assessment of danger signs, growth monitoring, EPDS screen
  3. 1-month visit
     – Flipchart with anticipatory guidance, growth monitoring, EPDS screen
Creciendo Sanos (Growing Up Healthy)

- **Group Health Visits (3-10 mother-child pairs)**
  1. **6 month visit**
     - Flipchart with anticipatory guidance, growth monitoring and promotion, developmental screening, immunization verification
  2. **12 month visit**
     - Flipchart with anticipatory guidance, growth monitoring and promotion, developmental screening, immunization verification, hematocrit
  3. **24 month visit**
     - Flipchart with anticipatory guidance, growth monitoring and promotion, developmental screening, immunization verification
  4. **36 month visit**
     - Flipchart with anticipatory guidance, growth monitoring and promotion, developmental screening, immunization verification
Creciendo Sanos (Growing Up Healthy)

- Monthly mother-child Care Groups (2-36 months)
  - Developmentally stimulating activities
    - Language Power (Bonnie Camp)
    - Learning Games (Abecedarian curriculum)
  - Health topic reinforcement (5-10 minutes)
    - Diarrhea/ORT, cough, hand washing, crying baby, clean water, injury prevention, complementary feeding
  - Growth monitoring and promotion (weight, height, and mid-upper arm circumference)
Early Childhood Interventions

• Characteristics of interventions that research shows have the greatest impact:
  – Integrate health, nutrition, and development
  – Occur during the earliest periods of life
  – Provide both direct services to children (child focused) and support/education for parents (caregiver/parent focused)
  – Utilize several types of interventions (education, micronutrient supplementation, demonstration of stimulation activities)
  – Include more than one delivery method (home visits, group counseling, childcare centers, mass media)
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Questions??
References


