



Resource Brief: Global Parenting Programs for Social and Behavior Change

Comparative examples of global parenting initiatives
with unique delivery methods in varying contexts

ECDAN Knowledge Fellows
program project

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ECDAN
Early Childhood Development Action Network



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Abbreviations

ACT	Adults and Children Together
COVID-19	coronavirus disease 2019
ECD	early childhood development
ECDAN	Early Childhood Development Action Network
FMD	Families Make the Difference
GISP	Global Initiative to Support Parents
HEW	health extension worker
HIPPY	Home Instruction for Parents of Preschool Youngsters
REAL	Responsible, Engaged, And Loving (Fathers program)
RRPK	Rastriya Rojgar Prawardhan Kendra
SBC	social and behavior change
SEL	social-emotional learning
UNICEF	United Nations Children's Fund
VHT	Village Health Team
VYA	very young adolescent
WDA	Women's Development Army



1. Introduction

1.1 Parenting programs for social and behavior change (SBC)

SBC, as defined by [UNICEF](#), is a multifaceted set of approaches designed to bring about positive and measurable changes in environments, societies, and individual behaviors. It serves as a practical framework for addressing diverse and evolving challenges, employing processes, tools, and strategies that collaborate with communities, individuals, and partners. The primary focus of SBC is to use evidence and inclusive approaches in co-designing solutions for both development and humanitarian challenges. Human rights take center stage in SBC, involving a systematic analysis of cognitive, social, and structural factors driving change.ⁱ

In recent decades, SBC has evolved rapidly due to factors like changing demographics, globalization, regional conflicts, climate change, epidemics/pandemics, and urbanization. This evolution has prompted the need for constant innovation in development and humanitarian efforts. SBC also presents new opportunities for engaging people in social change processes, making it a crucial tool for organizations like UNICEF in their pursuit of a more equitable and sustainable world.

Aligned with the principles of SBC, this project aims to contribute to the work of the Global Initiative to Support Parents (GISP) by curating a purposive sampling of diverse programs for supporting parents, caregivers, or families impacted by adversity. Through this collaboration, effective strategies for SBC can be implemented, reducing inequalities, improving the transition from childhood to adulthood, and perhaps also enhancing human capital.

1.2 Need for a parenting program repository

Leveraging the strengths within parenting and equipping parents to provide responsive and nurturing care to their young children and adolescents can promote substantially positive child and adolescent development. It is imperative to ensure that evidence-based parenting interventions are readily accessible to all implementing partners to provide informed support to parents and caregivers of children, especially those affected by poverty or conflict.

This project addresses a pressing global issue, seeking primarily to solve the stark disparity that exists globally in opportunities and support systems available to families with children, particularly those at risk for poor developmental outcomes. Evidence of this issue can be found in several key indicators: First and foremost, countless children worldwide are exposed to adversities like poverty, conflict, inadequate health care, limited access to education, and various forms of abuse, placing them at a higher risk of physical and emotional harm and hindering their overall development. Moreover, disparities in available resources and interventions for supporting parents can lead to unequal outcomes for children, perpetuating cycles of disadvantage. To address this, the project aims to enable informed implementation practices to create fairer and more supportive environments for families worldwide, reducing the risks and challenges they encounter. The ultimate goal is to help children reach their full potential through informed support for and by parents. This effort aligns with the global

ⁱ Petit V. SBC global course introduction. UNICEF. Accessed May 25, 2024. <https://agora.unicef.org/course/info.php?id=35185>



agenda, specifically contributing to the Sustainable Development Goal 4 (Quality Education), which seeks to enable every child to not just survive but also thrive and fulfill their developmental potential.

1.3 About this parenting program repository

The objective of this project is to assist implementing partners in enhancing the adoption of effective parenting programs for low socioeconomic and/or conflict-affected populations, each offering specific delivery methods and potential advantages. The purpose of featuring diverse global parenting programs is to equip practitioners with the tools to effectively reach and support caregivers with a range of needs. Through this repository, comparative examples are provided to inspire and guide dedicated individuals and organizations, offering a spectrum of options for practitioners to assess and implement within their unique contexts.

The repository aims to provide examples of programs from a range of contexts that decision-makers and implementors might refer to when selecting or designing interventions to support families with young children. It acts as a valuable tool, offering resources, strategies, and approaches adaptable to the unique challenges faced by caregivers of young children. It aims to support implementers and organizations working to improve parenting practices. By collating resources to respond to parenting needs, it potentially can encourage further collaboration and knowledge exchange between implementers, governments, nongovernmental organizations, and other stakeholders. Ultimately, this aspires to be a crucial resource hub, assisting organizations and individuals worldwide in supporting families. It aligns with GISP's goal of enhancing parenting support at different vulnerability levels and fostering healthier environments for children.

1.4 Program selection methodology

The project began by defining its objective: to curate a comprehensive repository of family support programs and interventions that implementers or practitioners can potentially fine-tune for maximum impact in adverse contexts. In compiling this repository of parenting programs, the methodology focused on starting with determining the ultimate beneficiaries and context—caregivers (including parents and families) of those at different stages of childhood based in adversity-affected geographical and sociocultural contexts. This emphasis aimed to address the unique support interventions for a range of settings by identifying parenting efforts and initiatives by relevant philanthropies, nongovernmental organizations, research institutions, public departments, and multilateral organizations.

Next, a list of relevant search terms or keywords was generated, including but not limited to the following: family support programs, parenting interventions, adversity, child development, deprivation, caregiving, caregiver support, child welfare services, positive parenting, responsive care, family resilience, early childhood interventions, parental policy, socioeconomic disadvantage, trauma-informed care. These terms were then used in searches across credible digital platforms and databases to conduct a comprehensive search for global parenting programs. Beginning with websites of most relevant or recommended organizations and individuals, the search extended to include platforms such as Google Scholar, GISP, ERIC (Education Resources Information Center), PubMed, PsycINFO, UNICEF Innocenti Research Centre, National Institute of Child Health and Human Development, and similar sources. References to these are also provided in “suggested reading” at the end of each program section. Organizational websites, government reports, white papers, nongovernment reports



and articles by relevant experts, and other gray literature sources were considered with equal importance to ensure that even the most remote programs with potential for adaptability could be identified and made accessible to implementers.

The programs then were carefully shortlisted to ensure a broad and comprehensive representation across various aspects of parenting initiatives. Broadly, the selection process filtered programs based on their potential adaptability to inspire implementing partners working locally. Considerations included the intended beneficiaries, target age groups, organizing institutions, launch timelines, regional and socioeconomic contexts, project outcomes, and available evidence and resources. By considering these diverse elements, the aim was to ensure that the chosen programs, through their potentially contextualized implementation, would be well-suited to meet the varied needs and circumstances of families and communities. For the sake of uniformity, each delivery modality offers a list of five programs. While it cannot be guaranteed that these programs are universally adaptable, the hope is that implementing organizations can draw inspiration from them to modify interventions to their specific contexts.

It is important to acknowledge that the limited number of specific references within the compiled data is a result of the methodology rather than a lack of due diligence. The primary sources used, including searches through academic databases, often provided information without explicit references. Additionally, many programs were documented through gray literature, reports, and organizational websites, which typically do not adhere to traditional citation practices. Despite this limitation, rigorous efforts were made to ensure the reliability and validity of the gathered information through adherence to ethical guidelines. While the absence of references may impact the traceability of individual program sources, it does not diminish the overall integrity of the repository. Moreover, the suggested readings provided for each program offer supporting evidence and facilitate an advanced understanding of their conceptualization, implementation, learnings, and recommendations. This aspect also distinguishes this project from elementary meta-analyses of parenting programs.

These shortlisted programs have undergone rounds of iterative review through peer and expert feedback from the ECDAN Secretariat, taking into account the defined context, emerging evidence (where applicable), and adaptive needs.

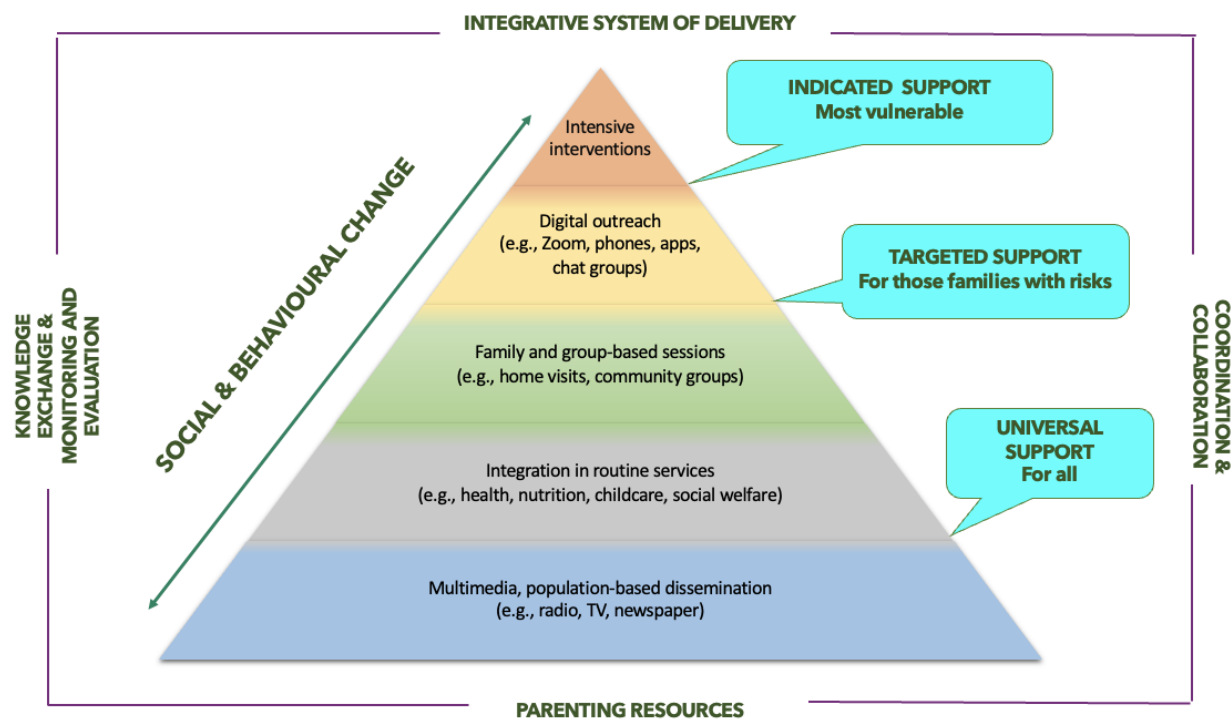
2. Programmatic Pyramid Framework

2.1 Overview

In response to the growing need for parental support, the project presents a practical pyramid framework illustrating how various approaches to intervention delivery have the potential to address the diverse needs of the beneficiaries—in this case, parents and caregivers. This pyramid framework, adapted from the Nurturing Care Framework (developed by the World Health Organization, World Bank Group, and UNICEF) and UNICEF Jamaica, is a simple yet impactful tool, offering accessible and adaptable support for parents and caregivers across various levels of need.



Figure 1. Integrative system of delivery pyramid for parenting resources.



Adapted from the Nurturing Care Framework and UNICEF Jamaica

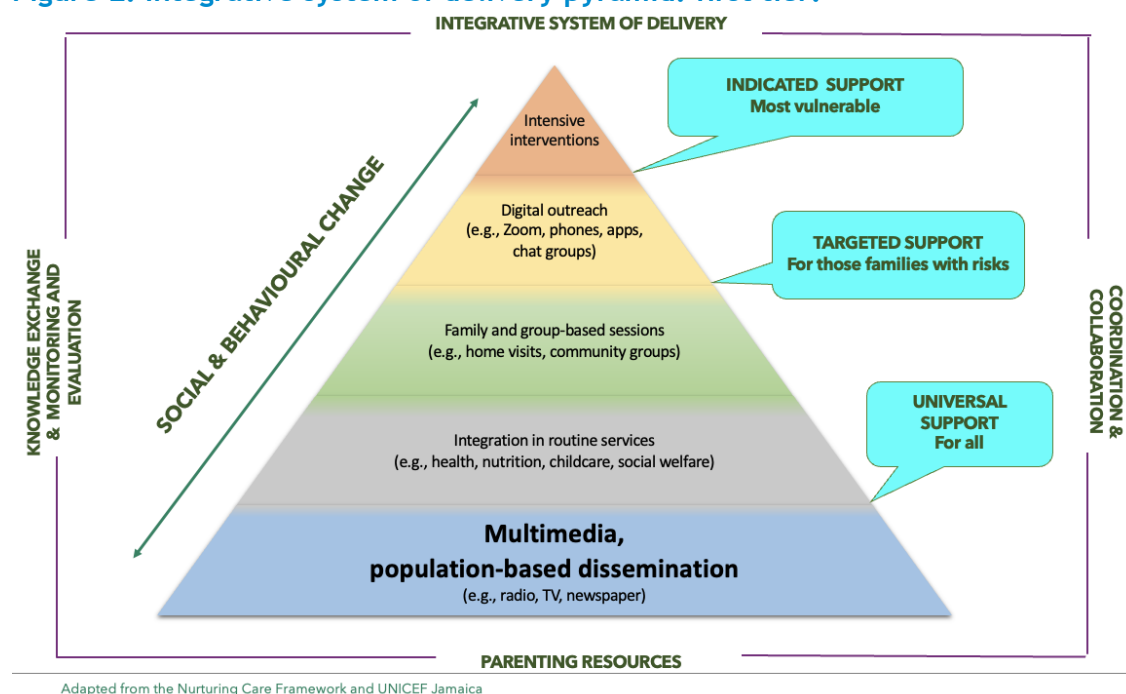
Each approach holds its own value; none outweighs the other. Approaches vary in the scope of their implementation, costs, and reach, as well as in their respective advantages. Intensive interventions come at a higher cost but cater to specific family needs. Targeted interventions fall on middle ground, particularly relevant for addressing a broader range of needs while still maintaining a level of scalability and cost-effectiveness. Universal interventions, while more general, reach the widest audience and can be scaled up efficiently. Ideally, a comprehensive strategy would include overlapping interventions at each tier, ensuring support across the spectrum of needs within a community or country context.

By offering a range of interventions, an integrated system of delivery ensures that, through contextually informed program outreach and implementation, every parent receives the support he or she requires in navigating the challenges of raising children and adolescents, especially in deprived contexts. In curating a digital repository through extensive research and desk reviews of evidence-based family support programs and interventions, the project emphasizes various aspects of these programs. This includes specific descriptions, target audiences, intervention methodologies, primary approaches and sources, geographical scope, and program provisions. The main goal is to compile and disseminate a globally informed repository, enhancing access to research-guided tools and resources, to strengthen families with children affected by deprivation.

2.2 Multimedia, population-based dissemination

The base of the pyramid includes universal approaches to program delivery aimed at disseminating to a wide and large population using multimedia sources (Figure 2).

Figure 2. Integrative system of delivery pyramid: first tier.



2.2.1 Fostering Playful Homes – Magic Bag Radio Program by Save the Children

Program name:	Fostering Playful Homes — Magic Bag Radio Program
Organization:	Save the Children; Rastriya Rojgar Prawardhan Kendra (RRPK)
Implemented in:	Nepal
Year of launch:	2020
Aimed at:	Early childhood
Delivery mechanism:	Radio program

The Mero Sathi Magic Jhola radio program, part of the Fostering Playful Homes project, jointly initiated by Save the Children and RRPK, distributed Magic Bags containing diverse child-centered learning and play materials to children 3 to 5 years old attending early childhood care and development centers. A local radio station broadcasted a program daily for one month on how to use the Magic Bag, which helped parents acquire the knowledge needed to use the tools inside the bag with their children. To ensure that children make the most of the bag, Save the Children and RRPK distributed a guideline along with the Magic Bag. Additionally, to enhance the bag's effectiveness and assist parents and guardians facing challenges in teaching their children, the Mero Sathi Magic Jhola radio program provided guidance on how to use the tools inside the bag.

Suggested reading:

- Magic Bag Radio guide / sample content. Save the Children; 2020.
<https://resourcecentre.savethechildren.net/document/magic-bag-radio-guide/>

2.2.2 Play with Me ([Juega Conmigo](#)) by [Childfund International](#)

Program name:	Juega Conmigo (Play with Me)
Organization:	ChildFund International
Implemented in:	Guatemala and Honduras
Year of launch:	2020
Aimed at:	Early childhood
Delivery mechanism:	Radio- and video-based program

Juega Conmigo (Play with Me) is a universal programmatic approach aimed at engaging families with children 0 to 4 years old through playful parenting and expansion of early childhood interventions within rural indigenous communities in Guatemala.

The program conveys playful messages to parents, families, and caregivers through 20 informative capsules, using mediums such as radio, public address systems, and video. These capsules showcase positive parenting examples for mothers, fathers, and caregivers of girls and boys, covering topics like prioritizing health and nutrition through doctor visits, fostering responsive care through effective communication, and teaching children how to express and manage their emotions.

To enhance parents' awareness and comprehension regarding the significance of learning and holistic development through play, the program involves content creation and delivery, along with specific play activities to promote positive parenting.

Suggested reading:

- Childfund International. Play With Me radio theater. Accessed May 25, 2024. <https://juega-conmigo.org/radioteatro/>
- Alejandro Sierra. KAP Survey results summary. ChildFund Play With Me blog. Accessed May 25, 2024. <https://www.juega-conmigo.org/posts/summary-of-the-results-from-the-knowledges-attitudes-and-practices-kap-survey-cycle-1>

2.2.3 [Radio School Program](#) by [BRAC](#)

Program name:	Radio School
Organization:	BRAC
Implemented in:	Bangladesh
Year of launch:	2020
Aimed at:	Early childhood
Delivery mechanism:	Radio program

The Radio School program aimed to reach over 51,000 children and their parents using 11 community radio stations situated across various regions of Bangladesh. Parents received guidance on how to support their children in a step-by-step manner, such as instructing them on writing a Bangla letter of the alphabet. BRAC pre-primary school teachers residing within the community were expected to assist parents in connecting to the Radio School and facilitate their participation. Additionally, the BRAC radio program disseminated health and sanitation messages to parents, offering guidance on keeping children safe during the COVID-



19 pandemic. According to BRAC officials, implementing the radio program proved challenging as it necessitated collaboration with external partners for delivery.

The primary objective of the radio program was to assist parents in establishing a favorable learning environment at home and engaging with their children's education in a systematic manner.

Suggested reading:

- Rahee FS. BRAC Radio School: Education at scale during pandemic. Scaling Community of Practice. March 5, 2021. Accessed May 25, 2024. <https://scalingcommunityofpractice.com/brac-radio-school-education-at-scale-during-pandemic/>
- Nicolai S, Rui T, Zubairi A, Seluget C, Kamninga T. *Edtech and Parental Engagement*. UNESCO; 2023. Background paper for the Global Education Monitoring Report: Technology in Education. <https://unesdoc.unesco.org/ark:/48223/pf0000386106>

2.2.4 Choices, Voices, Promises Program by Save The Children

Program name:	Choices, Voices, Promises
Organization:	Save the Children
Implemented in:	Nepal, Kyrgyzstan
Year of launch:	2009
Aimed at:	Middle childhood
Delivery mechanism:	Curriculum; multimedia; discussion groups

Choices is a gender-focused curriculum for very young adolescents (VYAs), fostering positive SBC. It challenges restrictive gender norms, promotes gender equity, and encourages dialogue with peers and family. By intervening during early adolescence, it lays the groundwork for lifelong gender-equitable attitudes. An external evaluation found significant improvements in gender attitudes and behaviors among participating VYAs.

Voices, tailored for parents of VYAs, features six short testimonial videos promoting gender-equitable behaviors. These prompt reflection and discussion on fostering gender equity within households.

Promises is a community-wide intervention addressing gender equity, early marriage, and violence through six large posters. Weekly discussions among influential community members stimulate proactive conversations about gender norms, fostering broader social change.

In response to compelling evidence highlighting the imperative to address societal layers, Save the Children has devised a comprehensive program aimed at instigating SBC concerning adolescent gender equity within communities. Program objectives include:

- Enhancing boys' and girls' access to activities that challenge restrictive gender norms and promote gender equity through the Choices curriculum.
- Facilitating increased dialogue between parents and children to improve equity within households through the Voices intervention.
- Initiating a shift in community norms to establish an environment where boys and girls are equally valued through the Promises intervention.



By employing an ecological model, the expectations, constraints, and opportunities for VYAs are more likely to undergo positive transformations when these three interventions are implemented simultaneously in a community.

Suggested reading:

- Save the Children. *Choices, Voices, Promises*. Save the Children; 2015.
<https://www.savethechildren.org/content/dam/global/reports/health-and-nutrition/CVP-brief-2015.PDF>
- Breakthrough ACTION. *Gender Synchronization and Child, Early, and Forced Marriage Programming*. Breakthrough ACTION; 2021.
<https://breakthroughactionandresearch.org/wp-content/uploads/2021/10/CEFM-Technical-Brief-Gender-Synchronization.pdf>
- Haver J, Kainazarova A, Kamyztzanova G, et al. *CHOICES: A Curriculum for 10 to 14 Year Olds in Kyrgyzstan*. Save the Children International; 2018.
<https://resourcecentre.savethechildren.net/document/choices-curriculum-10-14-year-olds-kyrgyzstan/>
- Lundgren R, Gibbs S, Kerner B. (2018, April 30). Does it take a village? Fostering gender equity among early adolescents in Nepal. *International Journal of Adolescent Medicine and Health*. 2018;32(4). <https://doi.org/10.1515/ijamh-2017-0164>

2.2.5 Magic Moments and Beautiful Moments by [Hop! Media Group and Bernard van Leer Foundation](#)

Program name:	Magic Moments and Beautiful Moments
Organization:	Hop! Media Group and Bernard van Leer Foundation
Implemented in:	Israel, Middle-East Asia
Year of launch:	2019
Aimed at:	Early to middle childhood
Delivery mechanism:	Online and offline media

Two comprehensive and cross-sector campaigns in Israel targeted behavioral changes in parenting: the Magic Moments campaign (2019) targeted the Hebrew-speaking population, while the Beautiful Moments campaign (2020) focused on the Arabic-speaking population.

The Magic Moments and Beautiful Moments initiatives were designed with three main objectives in mind:

- To increase parental awareness regarding the significance of using their time spent with children to foster child development.
- To provide parents with practical, evidence-based suggestions for simple activities to incorporate into daily routines, thereby promoting child development and nurturing stronger bonds between parents and their children.
- To inspire parents to adopt new behaviors that could positively impact their children's development, while also enhancing parental well-being and self-efficacy and fostering positive and meaningful interactions with their children.

Magic Moments employed a blend of online and offline media, incorporating social media promotions and a children's television series aired on Hop! TV channels. The campaign also engaged partner organizations, including the supermarket chain Rami Levy, which executed activities such as distributing activity booklets and displaying signs in their supermarkets.



Additional initiatives occurred at playgrounds (36 in Petah Tikvah and 41 in Herzliya), daycare centers (an activity trail through Women's International Zionist's Organization daycares), health organizations, and museums. QR codes in the playgrounds provided families with ideas for parent-child activities.

In contrast, Beautiful Moments focused exclusively on online and offline media, as other activities were canceled due to the COVID-19 pandemic. Beautiful Moments aimed to spread information effectively by presenting experts' insights in an engaging manner, enhancing parents' enjoyment of the videos. To achieve this, they brought on Mama Muna, a popular influencer among Arabic-speaking parents in Israel, as the campaign host. It was noted that involving celebrities in Beautiful Moments was highly successful in reaching out to parents (see Baruch et al. under "suggested reading" below).

These initiatives in Israel were crafted to enhance parental understanding of how much impact the time they spend with their children has on child development. The campaigns also sought to motivate parents to embrace new behaviors that could positively contribute to their child's development.

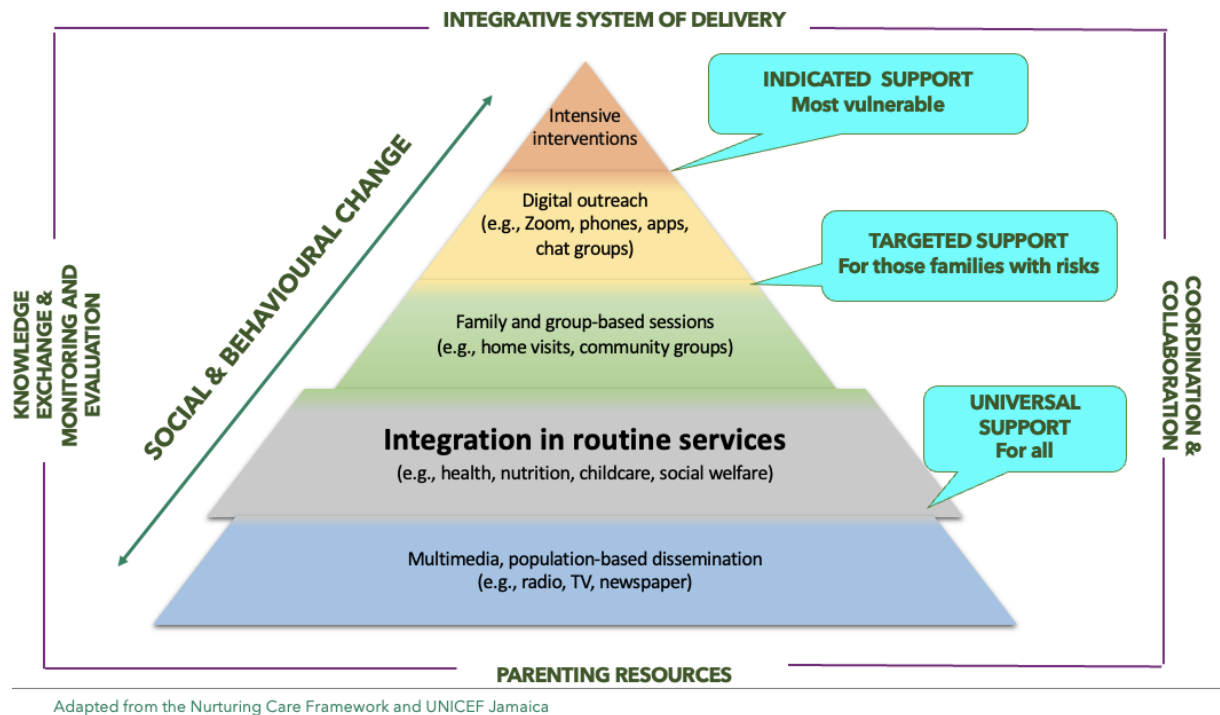
Suggested reading:

- Baruch B, Leenders E, Disley E. *Supporting Parental Behavioural Change: Multichannel and Cross-Sector Campaigns in Israel: A Case Study*. RAND Corporation; 2021. https://www.rand.org/pubs/research_reports/RRA245-10.html
- Campaign encourages parents to create "magic moments" with their children. Van Leer Foundation. May 23, 2022. Accessed May 25, 2024. <https://vanleerfoundation.org/cases/tv-series-encourages-parents-to-create-magic-moments-with-kids/>

2.3 Interventions in routine services

The second tier of the pyramid is for programs that integrate with service-providing institutions within the public system (Figure 3).

Figure 3. Integrative system of delivery pyramid: second tier.



2.3.1 Health Extension Program by the Federal Ministry of Health, Ethiopia

Program name:	Health Extension
Organization:	Federal Ministry of Health
Implemented in:	Ethiopia
Year of launch:	2004
Aimed at:	Early childhood
Delivery mechanism:	Nutrition and health care services

In Ethiopia, the Women's Development Army (WDA) was set up in 2011 to support the work of health extension workers (HEWs). The Health Extension Program combines primary health care with community-based services. The HEWs deliver a broad spectrum of health services, encompassing maternal and child health, family planning, immunizations, and health education. In this context, they perform growth monitoring, conduct developmental screenings, and offer guidance to families on early childhood care.

HEWs are paired up and assigned to each *kebele*, the smallest administrative unit in Ethiopia. They work from health posts and engage with the local community. The WDA helps organize community groups from neighboring households, with each group selecting a volunteer who

demonstrates healthy behaviors. Currently, Ethiopia has approximately 40,000 HEWs and an estimated 3 million WDA Volunteers.

The program aims to achieve several critical outcomes: (1) enhance access to essential health care services in rural areas, (2) promote greater use of maternal and child health services, (3) decrease both maternal and child mortality rates, and (4) raise community awareness about health by encouraging increased participation in health-related activities.

Suggested reading:

- Workie NW, Ramana GNV. *The Health Extension Program in Ethiopia*. World Bank; 2013. Universal Health Coverage Studies Series (UNICO), UNICO Studies Series No. 10. <https://citeseerx.ist.psu.edu/document?repid=rep1&type=pdf&doi=800fad33e58229702092fef358f2d54bdcf761e2>
- Assefa Y, Gelaw YA, Hill PS, Taye BW, Van Damme W. Community health extension program of Ethiopia, 2003-2018: successes and challenges toward universal coverage for primary healthcare services. *Global Health*. 2019;15(1):24. <https://doi.org/10.1186/s12992-019-0470-1>

2.3.2 Village Health Team Program by Ministry of Health, Uganda

Program name:	Village Health Team (VHT)
Organization:	Ministry of Health, Uganda
Implemented in:	Uganda
Year of launch:	2001
Aimed at:	Across childhood
Delivery mechanism:	Nutrition and health care services

In Uganda, community health workers work as part of VHTs comprising four members each that offer home visits and health management services to local communities. Despite lacking regular and consistent supervision due to limited funding, these VHTs have had a significant impact. Their efforts have contributed to reductions in morbidity and mortality rates among children in the country (see Musoke et al. under “suggested reading” below).

VHTs provide basic health services and health education at the grassroots level. They offer prenatal care, child health checkups, vaccinations, and health education to families. Within these services, they incorporate developmental screenings and guidance to parents on early childhood stimulation and care. The main objectives of the VHTs are to expand access to basic health care services in rural areas, increase awareness and use of maternal and child health services, and enhance the community's understanding of health, sanitation, and disease prevention. Most importantly, it aims to reduce child mortality rates and improve overall child health outcomes.



Suggested reading:

- Ministry of Health. *Village Health Team Facilitator's Training Manual*. Republic of Uganda; 2023. <https://www.health.go.ug/2023/05/19/village-health-team-facilitators-training-manual/>
- *Village Health Team Handbook*. Johns Hopkins University Center for Communication Programs; 2019. <https://thecompassforsbc.org/project-examples/village-health-team-handbook>
- Musoke D, Gonza J, Ndejjo R, Ottosson A, Ekirapa-Kiracho E. Uganda's Village Health Teams Program. CHW Central. January 13, 2021. Accessed May 25, 2024. <https://chwcentral.org/ugandas-village-health-teams-program/>
- Omni Med. Uganda programs: The Village Health Team (VHT). Accessed May 25, 2024. <https://www.omnimed.org/vht-deo-project>
- Mays DC, O'Neil EJ, Jr, Mworozzi EA, et al. Supporting and retaining Village Health Teams: an assessment of a community health worker program in two Ugandan districts. *International Journal for Equity in Health*. 2017;16(1):129. <https://doi.org/10.1186/s12939-017-0619-6>

2.3.3 **Bebbo parenting app** by UNICEF

Program name:	Bebbo parenting app
Organization:	UNICEF
Implemented in:	Albania, Belarus, Bulgaria, Greece, Kosovo, Kyrgyzstan, North Macedonia, Montenegro, Serbia, Tajikistan, Ukraine, Uzbekistan, Moldova, and Romania
Year of launch:	2021
Aimed at:	Early childhood
Delivery mechanism:	Mobile application

The Bebbbo parenting app, developed by UNICEF's Regional Office for Europe and Central Asia, is a mobile app designed to engage and assist parents of children 0 to 6 years old. The app was launched in Kyrgyzstan and Uzbekistan in 2021 and is now available in 14 countries across Europe and Central Asia, including in 15 local languages.

Bebbo offers extensive, evidence-based information and interactive tools covering a broad spectrum of issues around children's health and development, as well as parental well-being. Through a user-friendly format, the app allows parents to track and record health visits, vaccination status, and important developmental milestones. It also aids in disseminating messages and information regarding COVID-19 prevention and protection for children.

The app features a library of articles and videos organized into thematic categories, including play and learning, nutrition and breastfeeding, responsive parenting, safety and protection, health and well-being, and parental well-being. Using information such as the child's date of birth and gender, provided by the parent, the app recommends appropriate content and offers tailored guidance.

Certain content within the app has been sourced, adapted, and translated with permission from the Raising Children Network Australia, Real Play Coalition, and Afinidata. Internet connectivity is necessary for downloading and displaying media content within the app. However, Bebbbo is designed to function offline in environments with limited internet connectivity. Users must be online at least once during the initial download and log-in. Through the app settings, a user can choose to download content specific to his or her child's current age or download all content for full offline functionality.

Suggested reading:

- *Bebbo app*. UNICEF; 2022. <https://nurturing-care.org/wp-content/uploads/2022/12/Bebbo.pdf>
- UNICEF. Generating demand for services and improving service delivery at scale through integrated multisectoral packages with enhanced support to parents. In: *Global Annual Results Report 2021: Goal Area 1: Every Child Survives and Thrives*. UNICEF; 2022:183. <https://www.unicef.org/media/122421/file/Global-annual-results-report-2021-goal-area-1.pdf#page=189>
- Baghdasaryan B, Ghawi G, Borisova I, Chopra V. *Building Bright Futures: What Is Needed to Expand Early Childhood Education and Care for Ukraine's Refugee Children*. UNICEF Innocenti Global Office of Research, UNICEF Europe and Central Asia Region; 2023. <https://files.eric.ed.gov/fulltext/ED627655.pdf>

2.3.4 Social Protection Sector Programming and Policy Support to Parents by the Ministry of Social Solidarity, Egypt

Program name:	Social Protection Sector Programming and Policy Support to Parents
Organization:	National Committee / Ministry of Social Solidarity
Implemented in:	Egypt
Year of launch:	2021
Aimed at:	Early childhood
Delivery mechanism:	Curriculum development; social welfare service

The National Committee, formed by the Ministry of Social Solidarity and other collaborators, aims to promote responsive care in Egypt, with the capacity to reach 2 million beneficiaries. The national vision focuses on ensuring the well-being of and access to opportunities for children and adolescents, emphasizing positive upbringing across various age groups. A health census in 2021 revealed disturbing statistics on violence and family dynamics: 81 percent of children 1 to 14 years old in Egypt experience violent discipline, and in some areas, over 90 percent of women face violence. This led to the launch of a family program building upon existing national strategies.

Women covered by social insurance are entitled to three months of paid maternity leave for each of up to three children, given they have contributed to social insurance for the previous ten months. Maternity benefits are paid at 75 percent of the last covered wage. Additionally, female workers in establishments with over 50 employees can take up to two years of unpaid childrearing leave per child. All female employees, regardless of establishment size, are entitled to two half-hour nursing breaks per day, or one combined hour-long break, for 24 months after each child's birth.

Efforts are underway to address issues like lack of knowledge, violence, malnutrition, and anemia, aligning with national welfare strategies. The Ministry of Social Solidarity plays a key role in expanding social protection and communication initiatives to promote proper nurturing practices. A comprehensive approach involves multiple ministries and platforms, prioritizing primary health care and education. The Ministry envisions a complete national system by 2030, supported by digital platforms. Four curricula have been developed, including responsive care and early child development, with plans to involve more youth and volunteers

through electronic training guides, in collaboration with UNICEF (see Global Initiative to Support Parents under “suggested reading” below).

Suggested reading:

- Global Initiative to Support Parents (GISP). *Global Initiative to support Parents: Regional Convening in Support of Parents in the Eastern Mediterranean, Middle East, and North Africa Regions*. GISP; 2023. https://support-parents.org/wp-content/uploads/2024/01/GISP-MENA-Convening-Report_D2.pdf
- Wu R. Egypt’s national social protection response to vulnerable groups during COVID-19. *Open Journal of Social Sciences*. 2021;09(09):143-152. <https://doi.org/10.4236/jss.2021.99010>
- Sieverding M, Selwaness I. *Social Protection in Egypt: A Policy Overview*. Population Council; 2012. Gender and Work in the MENA Region Working Paper, No. 23. https://knowledgecommons.popcouncil.org/cgi/viewcontent.cgi?article=1119&context=departments_sbsr-pgy

2.3.5 Maternal, Infant and Young Child Nutrition Program by the Ministry of Health, Republic of Kenya

Program name:	Maternal, Infant, and Young Child Nutrition
Organization:	Ministry of Health, Republic of Kenya
Implemented in:	Kenya
Year of launch:	2012
Aimed at:	Early childhood
Delivery mechanism:	Nutrition and health care services

The Maternal, Infant, and Young Child Nutrition Program integrates nutrition education and health care services, with a specific emphasis on enhancing nutrition for pregnant women, infants, and young children. The program offers counseling on various aspects, including breastfeeding, complementary feeding, micronutrient supplementation, and growth monitoring, all integrated within the existing health care system.

Main outcomes of this program include raising awareness among mothers about the best feeding practices for their children, leading to widespread adoption of these practices. This has resulted in a notable improvement in the nutritional status of infants and young children, with a visible reduction in stunting. Moreover, the community has gained a better understanding of nutrition and its vital role in child development, guiding more informed child-rearing practices. Additionally, collaboration between health facilities and local communities has strengthened, leading to better-coordinated efforts to promote improved nutrition outcomes for children and families.

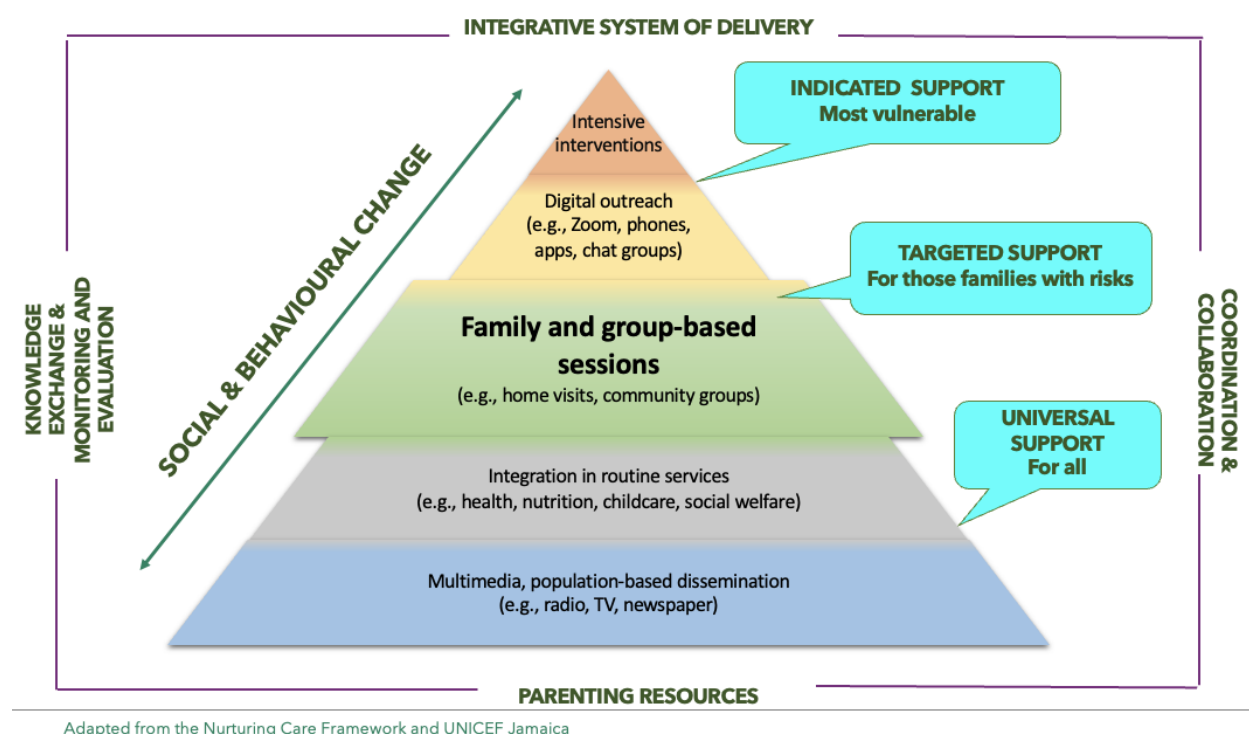
Suggested reading:

- Njiru J, Matiri E. *Maternal, Infant and Young Child Nutrition: National Operational Guidelines for Health Workers*. Division of Nutrition /Ministry of Health, Republic of Kenya; 2013. https://pdf.usaid.gov/pdf_docs/PA00JTGD.pdf

2.4 Family and group-based sessions

The third tier of the pyramid involves programs that involve targeted interactions with parents, families and caregivers through home visits or community sessions (Figure 4).

Figure 4. Integrative system of delivery pyramid: third tier.



2.4.1 Home Instruction for Parents of Preschool Youngsters (HIPPY) program

Program name:	Home Instruction for Parents of Preschool Youngsters (HIPPY)
Organization:	Hebrew University of Jerusalem
Implemented in:	Paraguay (also present in Finland, Sweden, Germany, Liberia, Austria, Australia, New Zealand, China, South Korea, Israel, Argentina, Chile, USA and Canada)
Year of launch:	1969
Aimed at:	Early childhood
Delivery mechanism:	Home visits; community sessions

Established in Israel by Prof. Avima Lombard's team of researchers at Hebrew University, HIPPY is a no-cost global program designed for preschool-aged children. It revolves around home visits aimed at equipping parents to take on the role of primary educators for their children at home, offering tools to enhance their skills.

The program provides the following:

- Study plan: the curriculum spans 30 weeks and includes parent-child activities tailored to children's developmental stages.
- Professional coordinator / community tutors: community tutors undergo training and supervision by a professional coordinator to facilitate effective program operation.

- Role-play / instructional technique: role-play is mandated across all HIPPY programs as an instructional technique, used by community tutors and parents.
- Home visits and group meetings: parents receive the curriculum during weekly home visits in all HIPPY programs; additionally, group workshops are organized monthly to provide learning spaces and foster community engagement.

The main objectives of this program are to:

- Allow parents to recognize themselves as primary educators for their children.
- Teach parents and children the joy of learning.
- Stimulate cognitive development in children.
- Improve parent-child interaction.
- Create a home educational environment that fosters literacy.
- Increase opportunities for positive early school experiences, particularly for children at educational risk.
- Break parental social isolation.
- Promote parents' participation in both school and community life.
- Help community tutors gain skills and work experience that enhance their employability in the local job market.
- Provide parents with the opportunity to later become community tutors, fostering collaboration within their own communities.

Suggested reading:

- Smith JM, LaForett DR, Quick K, Villa R. Parent and family engagement in early education programs. In: Morris AS, Mendez Smith J, eds. *The Cambridge Handbook of Parenting: Interdisciplinary Research and Application*. Cambridge University Press; 2022:489-513. <https://www.cambridge.org/core/books/abs/cambridge-handbook-of-parenting/parent-and-family-engagement-in-early-education-programs/F2F6F900961E47548DD5051A3435E1D1>
- Avelar D, Hull DM, Middlemiss W. Children's pre-academic school readiness and home learning activities: a moderated-mediation analysis of home visiting. *Frontiers in Psychology*. 2023;14:1245893. <https://doi.org/10.3389/fpsyg.2023.1245893>
- Brown A, Lee J. School performance in elementary, middle, and high school: A comparison of children based on HIPPY participation during the preschool years. *School Community Journal*. 2014;24(2):83-106. <https://files.eric.ed.gov/fulltext/EJ1048627.pdf>

2.4.2 Improving Early Childhood Development in Rural Ghana Through Scalable Community-Run Play Schemes by Lively Minds

Program name:	Improving Early Childhood Development in Rural Ghana Through Scalable Community-Run Play Schemes
Organization:	Lively Minds
Implemented in:	Ghana, sub-Saharan Africa
Year of launch:	2008
Aimed at:	Early childhood
Delivery mechanism:	Community training sessions (for mothers and teachers)

This program by Lively Minds equips mothers in Ghana to act as volunteers, aiding teachers in facilitating play-based activities using locally produced materials during kindergarten classes.



The focus of the intervention is on unlocking the potential of caregivers, including volunteer mothers and teachers. It entails providing training to equip them with the necessary knowledge, skills, and confidence to conduct daily one-hour educational play schemes in kindergarten classes, targeting children 4 and 5 years old. Additionally, the intervention strives to improve care and stimulation at home, using locally available and cost-effective materials.

During the play scheme sessions, children rotate through six play stations (five indoor and one outdoor), guided by volunteer mothers, in which they actively participate in entertaining and interactive games designed to reinforce cognitive, language, and social-emotional learning (SEL) skills. The play schemes also include a robust component that focuses on water, sanitation, and hygiene.

The primary objective of the Lively Minds program is to train marginalized volunteer mothers and kindergarten teachers, who may not have formal education, so that they acquire the knowledge, skills, and confidence needed to conduct free educational play schemes in kindergarten classes. Additionally, the program seeks to enable these individuals to offer enhanced care and stimulation at home by using educational games crafted from inexpensive local materials.

Suggested reading:

- Amadu S, Attanasio O, Caeyers B, et al. *Improving Early Childhood Development in Rural Ghana Through Scalable Community-Run Play Schemes: Programme Impact Evaluation Report*. Institute for Fiscal Studies; 2019. <https://ifs.org.uk/publications/improving-early-childhood-development-rural-ghana-through-scalable-community-run-play>

2.4.3 Home School (earlier known as Class over Phone) by BRAC Institute of Educational Development

Program name:	Home School (earlier known as Class over Phone)
Organization:	BRAC Institute of Educational Development
Implemented in:	Bangladesh
Year of launch:	2019
Aimed at:	Early to middle childhood
Delivery mechanism:	Community training sessions

In the early stages of the pandemic, BRAC conducted a survey that revealed that 93 percent of households with BRAC students had access to basic feature phones, making it the most suitable medium for reaching children. Through this initiative, BRAC successfully reached over 180,000 primary-school-aged children by conducting biweekly lessons with small groups of three to four children, along with their parents. This educational content was delivered using low-tech, low-cost mobile phones. Women recruited from the children's own communities were trained to virtually conduct lessons through mobile phones. Challenges in implementing the Home School intervention included training teachers in remote areas over the phone, ensuring that concepts were explained adequately to parents, making sure parents left their phones at home during the lesson, and addressing the cost of phone calls. A pilot Home School program was initiated to implement remote learning for learners enrolled in BRAC schools using basic phones.



Suggested reading:

- Chowdhury Z, Al Islam R, Saltmarsh AJ. (2020). How BRAC is supporting Bangladesh to continue education in a pandemic. *BRAC The Good Feed* blog. May 10, 2020. Accessed May 25, 2024. <https://blog.brac.net/how-bangladesh-is-continuing-education-in-a-pandemic/>
- Khan SR. Putting people at the centre: BRAC's phone school. *Dhaka Tribune* op-ed. September 10, 2021. Accessed May 25, 2024. <https://archive.dhakatribune.com/opinion/op-ed/2021/09/10/op-ed-putting-people-at-the-centre-brac-s-phone-school>

2.4.4 Families Make the Difference by the International Rescue Committee

Program name:	Families Make the Difference (FMD)
Organization:	International Rescue Committee
Implemented in:	Côte d'Ivoire, Kenya, Tanzania, Ghana
Year of launch:	2017
Aimed at:	Across childhood
Delivery mechanism:	Community training sessions

Launched in Côte d'Ivoire as part of Transforming Education in Cocoa Communities in 2017, FMD is a program designed for caregivers. The program incorporates content that has demonstrated effectiveness in similar contexts through randomized controlled trials. FMD strives to enhance parenting skills and behaviors, contributing to a positive influence on the physical, intellectual, and emotional well-being of children. In current initiatives in Côte d'Ivoire, FMD training is complemented by the establishment of community-based early learning centers.

Owing to factors linked to rural poverty, malnutrition, inadequate access to quality education, violations of children's rights, and child labor, children in cocoa-farming communities in Côte d'Ivoire face developmental delays with enduring—and at times irreversible—effects on their health, well-being, and prospects.

FMD aims to enhance the care of young children, particularly during the critical first 1,000 days, which begins with a woman's pregnancy and extends to the child's second birthday. This initiative is targeted at cocoa-farming communities. The project establishes a foundation for enhancing the physical, intellectual, and social-emotional well-being of young children in Côte d'Ivoire through the creation of scalable, sustainable, and community-led resource centers. It also provides parenting skills training for caregivers. Groups of 20 to 25 caregivers undergo FMD training in ten sessions, each lasting two hours. Self-sustaining community learning or childcare centers are established to support FMD and other grassroots education endeavors. In collaboration with the government of Côte d'Ivoire, representatives from the Ivorian educational system are trained in FMD curricula and subsequently conduct parenting skills sessions. Additionally, the government permits preschool educators to manage the childcare centers. Ultimately, this effort aims to foster a healthy and supportive community environment for the well-being and prosperity of future generations.

The FMD toolkit for parenting skills training includes a facilitator's guide, a trainer's manual, and program sessions tailored to preadolescents and adolescents (6 to 11 and 12 to 18 years old, respectively). Additionally, there are guidelines for program implementation and a training manual with a focus on early childhood care and development for children 0 to 5 years old. The toolkit can be found [here](#).

Suggested reading:

- Sim AL, Bowes L, Maignant S, Magber S, Gardner F. Acceptability and preliminary outcomes of a parenting intervention for Syrian refugees. *Research on Social Work Practice*. 2021;31(1):14-25. <https://doi.org/10.1177/1049731520953627>
- International Rescue Committee (IRC). *Families Make the Difference: Native-Language Parenting Classes for Refugee Families: Handbook for Facilitator*. IRC; 2020. https://childprotectionpractitioners.org/wp-content/uploads/2020/08/FMD-Handbuch_Englisch.pdf
- International Rescue Committee (IRC). *Parents Make the Difference: IRC Research Brief*. IRC; 2014. <https://www.rescue.org/report/parents-make-difference-irc-research-brief>
- Transforming Education in Cocoa Communities (TRECC). *Transforming Education in Côte d'Ivoire: Reflections, Lessons Learned, Next Steps*. TRECC; 2021. <https://trecc.wpenginepowered.com/wp-content/uploads/2022/03/TRECC-REPORT-ENG.pdf>
- Feintuch S. Implementing parenting programmes in humanitarian crises. Humanitarian Practice Network. November 13, 2018. Accessed May 25, 2024. <https://odihpn.org/publication/implementing-parenting-programmes-humanitarian-crises/#:~:text=Core%20lessons%20teach%20about%20brain,of%20older%20children%20and%20adolescents.>
- **Report:** [Parents make the difference: IRC research brief](#)

2.4.5 **Tunakujenga** by Ubongo

Program name:	Tunakujenga
Organization:	Ubongo
Implemented in:	Tanzania
Year of launch:	2018
Aimed at:	Across childhood
Delivery mechanism:	Educational videos; learning materials

Tunakujenga, which means "We Build You Up" in Swahili, is a family learning initiative that equips caregivers with the skills and initiative to participate in play-based learning and nurturing activities with their children from birth to 14 years old. The program uses highly captivating and educational videos to demonstrate SEL activities, facilitating learning and habit formation through carefully selected delivery channels.

Intervention modalities include:

- Learning through trusted institutions: caregiver clubs in churches with faith leaders and existing groups build trust and support learning.
- Reinforcing daily routines: embedding SEL games into daily routines reinforces existing positive parenting and ensures easy implementation.
- Using supportive materials: SEL reference cards that summarize the activity reinforce habit building, and caregiver certificates with family photos provide motivation.

Tunakujenga provides parents with the tools, skills, and confidence to achieve their parenting goals. Its focus revolves around creating playful learning experiences, ensuring that parents, regardless of their circumstances, can engage meaningfully with their children and support their social, emotional, and cognitive development.



Tunakujenga ("We Build You Up") uses engaging videos delivered through churches and TV broadcasts to instill new SEL behaviors in families, centering on teaching children crucial social and emotional skills, such as grit and problem-solving. Leveraging the extensive reach of television and existing faith-based networks, Tunakujenga aims to connect with caregivers wherever they are, building upon existing community practices to integrate SEL into families' daily home routines.

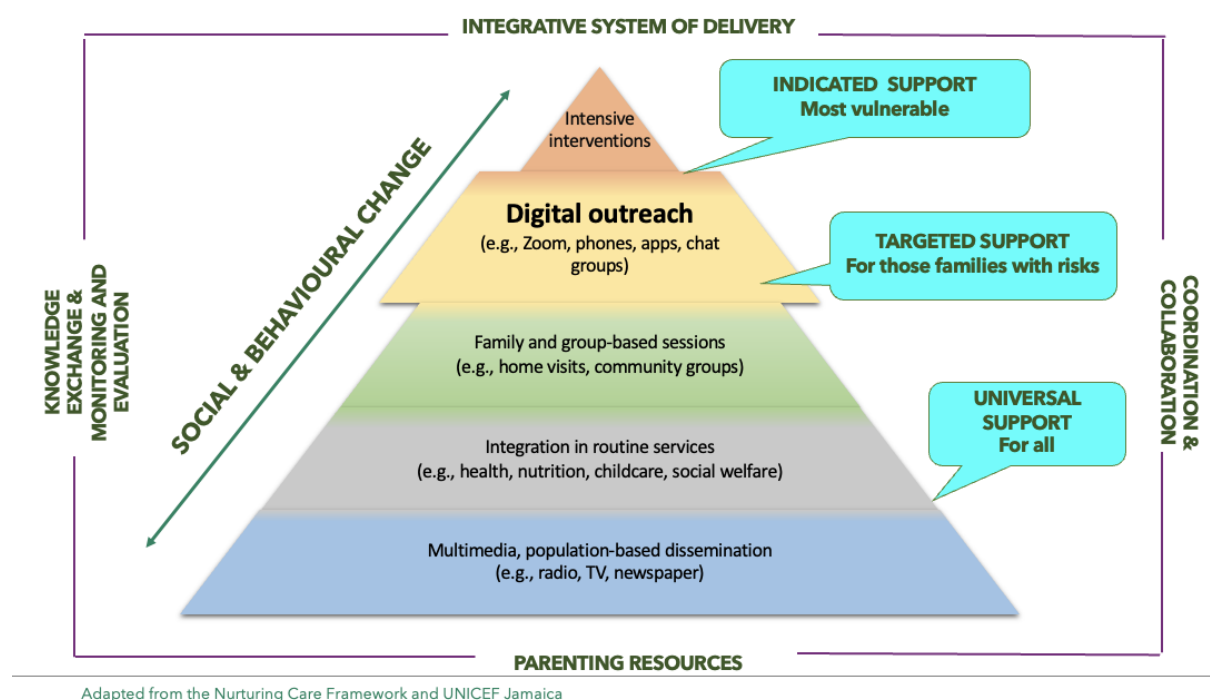
Suggested reading:

- International Rescue Committee (IRC). *Tunakujenga Final Report*. IRC, Airbel Impact Lab, Ubongo; 2019. https://inee.org/sites/default/files/resources/2020April_Tunakujenga-final-report.pdf
- Ubongo. Akili and Me show catalog. [Local language content offering.] Accessed May 25, 2024. <https://www.ubongo.org/shows/show-catalog/>
- Airbel Impact Lab. Tunakujenga. Accessed May 25, 2024.

2.5 Digital outreach

The fourth tier of this pyramid involves intervention through digital sources, such as video conferencing, phone calls, interactive voice response, apps, text messaging, or chat groups (Figure 5).

Figure 5. Integrative system of delivery pyramid: fourth tier.



2.5.1 Pashe Acchi by BRAC Institute of Educational Development

Program name:	Pashe Acchi ("Beside You" in Bengali)
Organization:	BRAC Institute of Educational Development
Implemented in:	Bangladesh
Year of launch:	2020
Aimed at:	Across childhood
Delivery mechanism:	Community training sessions

Implemented during the enforcement of social distancing measures due to COVID, BRAC's preschool Play Labs program is designed for children 4 to 5 years old. The program involves training local women as play leaders who use basic mobile phones to stay in regular contact with children and their primary caregivers, predominantly mothers. Experts from the BRAC Institute of Educational Development developed 20-minute scripts for tele-conversations, to be conducted once a week with caregivers and children. This continued until the reopening of Play Labs in March 2022.

Pashe Achhi offers educational opportunities for children and provides psychosocial support for caregivers. The initiative has persisted and currently aims to reach over 100,000 preschool-aged children.

Suggested reading:

- Shah S, Bassett L, eds. *Young Children in Humanitarian and COVID-19 Crises: Innovations and Lessons from the Global South*. 1st ed. Routledge; 2023.
<https://doi.org/10.4324/9781003415213>
- Mariam E, Ahmad J. Pashe Achhi: Supporting children and caregivers in Bangladesh during the COVID-19 pandemic. In: Shah S, Bassett L, eds. *Young Children in Humanitarian and COVID-19 Crises: Innovations and Lessons from the Global South*. 1st ed. Routledge; 2023:53-67.
<https://doi.org/10.4324/9781003415213-4>

2.5.2 Dost Education

Program name:	Dost Education
Organization:	Dost Education
Implemented in:	India
Year of launch:	2017
Aimed at:	Early Childhood
Delivery mechanism:	Interactive voice response/phone call

Dost Education is a nonprofit EdTech organization that concentrates on early learning and responsive caregiving. Using brief 1-minute audio messages conveyed through phone calls, Dost assists caregivers in establishing a nurturing and engaging home environment conducive to a child's learning, development, and well-being. Dost Education delivers personalized, concise, and friendly audio content via mobile phones to empower parents of all literacy levels to actively participate in their child's early education. Over 200,000 families have benefited from Dost's early childhood development (ECD) programs. Three out of four parents indicate their adoption of play-based learning activities. Additionally, 55 percent of parents



demonstrate high engagement in Dost’s program, in contrast to other online courses with an average completion rate of 7 percent.

Suggested reading:

- Wasan A. Dost Education: a friend along the education journey. *Childhood Education*. 2021;97:1:36-41. <https://doi.org/10.1080/00094056.2021.1873691>

2.5.3 ParentApp by Parenting for Lifelong Health

Program name:	ParentApp (app version of Parenting for Lifelong Health for Parents and Teens)
Organization:	Parenting for Lifelong Health
Implemented in:	South Africa, Tanzania
Year of launch:	2019
Aimed at:	Middle childhood to adulthood
Delivery mechanism:	Open-source online and offline mobile app

ParentApp is the app adaptation of the Parenting for Lifelong Health for Parents and Teens program, specifically designed for parents and caregivers of adolescents 10 to 17 years old. It distinguishes itself as the initial offline-accessible, open-source, evidence-based parenting app tailored and thoroughly tested in low-resource settings. Developed to enhance in-person program delivery, it can function as a self-led alternative or be integrated into a hybrid human-digital approach. The primary goal is to provide free, evidence-based parenting support and child abuse prevention in multiple languages, incorporating an adaptable design.

ParentApp employs straightforward and efficient approaches to cultivate habits, mitigate conflicts, and encourage positive, nurturing parenting for those raising adolescents. The app includes a built-in “self-care package” crafted to boost confidence, recognize parents' daily challenges and achievements, and provide evidence-based, uncomplicated stress reduction tools. Additionally, in response to the significantly elevated rates of sexual and online violence during the COVID-19 pandemic, the app integrates evidence-based strategies for preventing sexual and online violence.

Suggested reading:

- Janowski R, Green O, Shenderovich Y, et al. Optimising engagement in a digital parenting intervention to prevent violence against adolescents in Tanzania: protocol for a cluster randomised factorial trial. *BMC Public Health*. 2023;23(1):1224. <https://doi.org/10.1186/s12889-023-15989-x>



2.5.4 Top Parent app by NudgEd and Central Square Foundation

Program name:	Top Parent app
Organization:	NudgEd and Central Square Foundation
Implemented in:	India
Year of launch:	2020
Aimed at:	Early to middle childhood
Delivery mechanism:	Curriculum-based app

Created by NudgEd and funded by the Central Square Foundation, a nonprofit organization dedicated to enhancing the quality of school education, Top Parent provides a curriculum aligned with the National Council of Educational Research and Training pattern designed for children 3 to 8 years old.

Top Parent serves as a link between a child's learning and parental involvement, aiming to keep parents engaged in the educational process. The app features a dashboard showcasing a child's skills, enabling parents to track their progress along the learning curve. The content within the Top Parent app is meticulously developed to align with India's National Curriculum Framework, research from Harvard University's Center on the Developing Child, and the Ed Tech Developer's Guide. It provides information and strategies for parents on children's cognitive and social-emotional health, well-being, and safety outcomes, as well as fosters responsible digital citizenship in both parents and children. The app offers educational videos, worksheets, and monthly challenges, consolidating all these resources into one accessible platform for monitoring a child's learning progress.

The parent section includes videos offering knowledge and information on various aspects of ECD, extending beyond numbers and letters to cover areas such as SEL, nutrition, well-being, child protection, and more.

Launched in April 2020 as part of the Digi Lap program, Top Parent emerged during a crucial period when homeschooling became a necessity, requiring the development of programs to support parents. The app is designed to function as both a progressive web app and an Android app, catering to individuals with basic smartphones or limited storage capacity. Despite its intentionally lightweight size, the app boasts an appealing user experience and user interface to enhance its value.

Suggested reading:

- Central Square Foundation, Saajha Foundation. *EdTech Evidence Factsheet #1*. Central Square Foundation; 20221. <https://www.centralsquarefoundation.org/reports/edtech-evidence-factsheet-1-top-parent>
- Central Square Foundation (CSF), Ashoka University Centre for Social and Behaviour Change. *Using Behavioral Insights to Increase Parents' Engagement on FLN*. CSF; 2023. <https://www.centralsquarefoundation.org/reports/using-behavioral-insights-to-increase-parents-engagement-on-fln>

2.5.5 mBoost by Save The Children

Program name:	mBoost
Organization:	Save The Children
Implemented in:	Bangladesh
Year of launch:	2014; 2023
Aimed at:	Early to middle childhood
Delivery mechanism:	Text and voice messages

The mBoost approach represents a straightforward, innovative, and low-tech solution that uses cost-effective mobile technology to impart concise, action-oriented education strategies to caregivers, educators, and partners. These messages are disseminated through short text or voice messages, intending to foster the development of children's literacy and numeracy skills.

Since 2014, mBoost has been integrated into the Basic Education program supported by Save the Children Sponsorship Programs. Initially launched in the Meherpur rural area, it later expanded to the Dhaka urban program. An impact assessment conducted in 2014 revealed the significant success of mBoost in enhancing the reading skills of first-grade students. Notable progress was observed in reading proficiency, including the recognition of letters, words, and grade-level passages among mBoost beneficiaries.

In Bangladesh, following the evaluation of a report by a Save the Children research fellow on the impact of the first year of the sponsorship's mBoost pilot on children's learning, mobile phone operators decided to waive annual fees (approximately US\$580) in the following years for broadcasting mBoost messages to 3,000 families.

The main goal of mBoost is to address the deficit in parental engagement, especially in settings where face-to-face interactions are challenging. Capitalizing on the extensive use of mobile phones in Bangladesh's lower-middle-income context, mBoost seeks to efficiently provide crucial educational content to caregivers. Its approach acknowledges the pivotal role parents and caregivers play in advancing children's reading and math learning outcomes within the home environment.

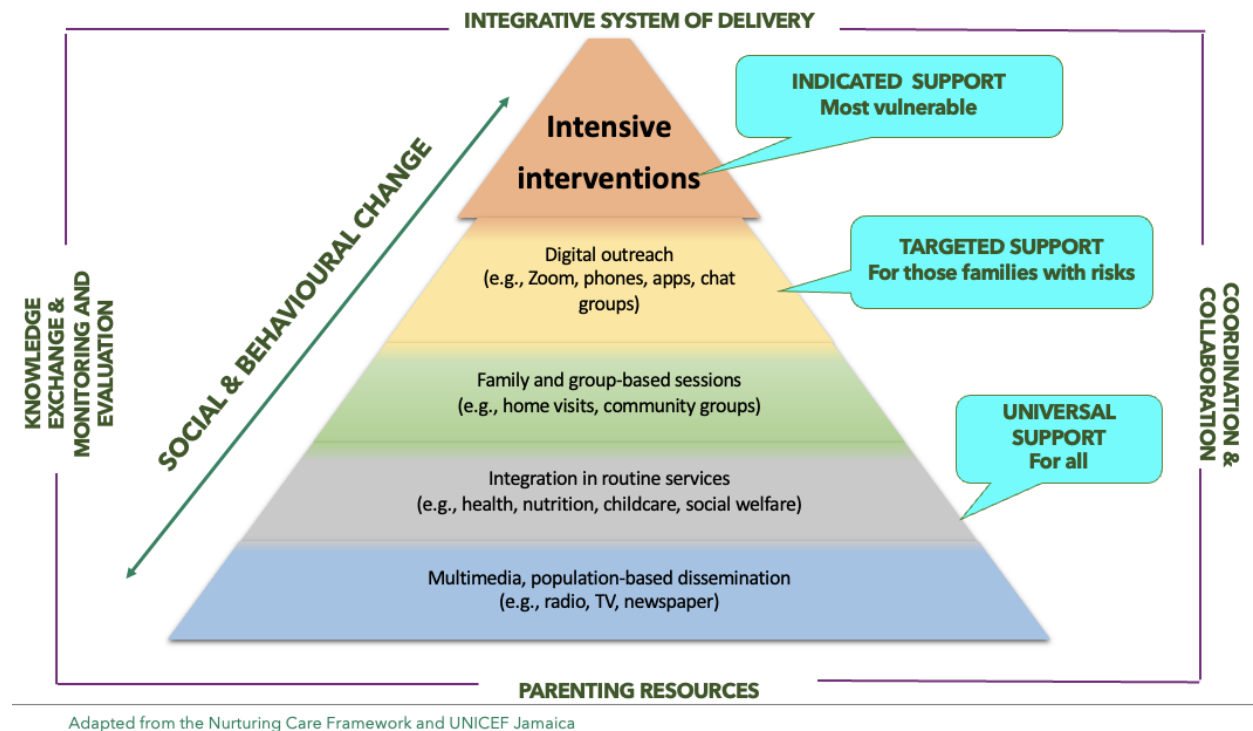
Suggested reading:

- Ahsan S, Hossain MM, Sarwar SM. Possibilities of using mobile technology to improve early grade reading in Bangladesh: towards a practical framework. *Bangladesh Education Journal*. 2019;18(2):47-56.
https://www.researchgate.net/publication/354389068_Possibilities_of_using_Mobile_Technology_to_improve_Early_Grade_Reading_in_Bangladesh_Towards_a_Practical_Framework
- Save the Children. *Transforming Children's Learning in Bangladesh with mBoost*. Case study. Save the Children International; 2023.
<https://resourcecentre.savethechildren.net/pdf/Transforming-Childrens-Learning-in-Bangladesh-with-mBoost.pdf/>
- Hossein M. mBoost: Improving literacy and numeracy: Learning from rural Bangladesh. Presented at: 2021 mEducation Alliance Symposium; September 27-30, 2021: virtual event.
<https://resourcecentre.savethechildren.net/document/mboost-improving-literacy-and-numeracy-learning-from-rural-bangladesh/>

2.6. Intensive Interventions

At the top of the pyramid are intensive interventions, involving programs that provide indicated and high-frequency support to the relatively more vulnerable groups, such as those impacted by adversity (Figure 6).

Figure 6. Integrative system of delivery pyramid: fifth tier.



2.6.1 Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS) by International Rescue Committee and Columbia University

Program name:	Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS)
Organization:	International Rescue Committee (in partnership with Columbia University, funded by the UK Department for International Development)
Implemented in:	Ethiopia, Democratic Republic of Congo, Pakistan
Year of launch:	2014
Aimed at:	Middle childhood and adolescence
Delivery mechanism:	Parent discussion groups; service provider support; adolescent girls' life skills sessions

COMPASS is a program carried out with refugees residing in camps along the Sudan/Ethiopia border, conflict-affected communities in eastern Democratic Republic of Congo, and displaced populations in northeast Pakistan.

The program recognizes and addresses the vulnerabilities of adolescent girls, aiming to establish a foundation for their healthy transition into adulthood during humanitarian crises.

It focuses on enhancing prevention and response to violence against adolescent girls in such settings. The strategies employed encompass safe space programming, including life skills training and asset building; mentoring activities facilitated by older adolescent girls; and collaboration with service providers and caregivers to better prioritize and address the needs of adolescent girls.

Suggested reading:

- Stark L, Seff I, Asghar K, et al. Building caregivers' emotional, parental and social support skills to prevent violence against adolescent girls: findings from a cluster randomised controlled trial in Democratic Republic of Congo. *BMJ Global Health*. 2018;3(5):e000824.
<https://doi.org/10.1136/bmjgh-2018-000824>
- Falb KL, Tanner S, Ward L. et al. Creating Opportunities through Mentorship, Parental involvement, and Safe Spaces (COMPASS) program: multi-country study protocol to protect girls from violence in humanitarian settings. *BMC Public Health*. 2016;16:231.
<https://doi.org/10.1186/s12889-016-2894-3>
- Tanner S, O'Connor M. *A Safe Place to Shine: Creating Opportunities and Raising Voices of Adolescent Girls in Humanitarian Settings*. International Rescue Committee; 2017.
<https://www.rescue.org/report/safe-place-shine>

2.6.2 ACT Raising Safe Kids Program by the American Psychological Association

Program name:	ACT (Adults and Children Together) Raising Safe Kids
Organization:	Leadership Development Institute at the American Psychological Association
Implemented in:	United States, Greece, Japan, China, Brazil, and Spain
Year of launch:	2001
Aimed at:	Early to middle childhood
Delivery mechanism:	Parent and community knowledge dissemination sessions

The ACT Raising Safe Kids Program targets parents and caregivers of children 0 to 10 years old, as well as pregnant mothers and their partners. This parenting initiative is aimed at preventing child maltreatment and advancing positive parenting practices. It focuses on teaching effective, nonviolent discipline methods, enhancing parental knowledge of child development and media literacy, and fostering skills like anger management and social problem-solving. By promoting these practices, it aims to reduce children's aggression and behavior problems while also building a supportive community among participants.

The program's primary goals include educating parents to create safe, nurturing environments and providing research-based tools for effective parenting. It aims to offer a supportive, interactive atmosphere for learning and to cultivate social support networks among participants.

Key objectives for parents and caregivers involve using child development knowledge to guide parenting, fostering safe and nonviolent environments, managing emotions effectively, monitoring children's media exposure, shifting disciplinary approaches toward positive reinforcement, and advocating for and protecting their children within the community.

The program integrates family and support structures into its approach, aligning with existing programs and services offered by various community agencies and organizations, including but not limited to Head Start centers, community health centers, schools, clinics, prisons,



shelters, and places of worship. The program is designed to fit seamlessly into these existing systems of care and support, with the option for accompanying children to participate in a parallel program during the parent sessions, structured to mirror the curriculum of the parent sessions and emphasizing nonviolent problem-solving, anger management, and kindness.

Recommended at a frequency of one two-hour weekly session over a duration of nine weeks, ACT Raising Safe Kids is typically conducted in diverse settings such as hospitals, outpatient clinics, community-based agencies or organizations, and school settings, including daycares and day treatment programs. Homework is a vital component of the program, with each of the nine sessions featuring assigned tasks aimed at reinforcing learning, advancing understanding, and encouraging the practice of acquired skills. These assignments also serve to reinforce participants' commitment to attending subsequent sessions.

Materials are available in multiple languages, including Greek, Japanese, Mandarin, Portuguese, and Spanish. Effective program implementation requires one or two trained facilitators, a suitable room, basic presentation tools, and provisions like snacks. Access to a computer with a projector is encouraged. Childcare may be provided, and facilitators are urged to offer incentives to participants.

Suggested reading:

- Knox MS, Burkhart K, Hunter KE. ACT Against Violence Parents Raising Safe Kids program: effects on maltreatment-related parenting behaviors and beliefs. *Journal of Family Issues*. 2011;32(1):55-74. <https://doi.org/10.1177/0192513X10370112>
- Burkhart K, Rasiah SS, Knox MS, Vatti T. Effectiveness of remote implementation of the ACT Raising Safe Kids Program: a pilot study. *International Journal on Child Maltreatment*. 2024. <https://doi.org/10.1007/s42448-024-00198-9>
- National Institute of Justice Crime Solutions. Program profile: Adults and Children Together (ACT) Raising Safe Kids program. May 21, 2013. Accessed May 25, 2024. <https://crimesolutions.ojp.gov/ratedprograms/311#1-0>

2.6.3 **Sugira Muryango** by Boston College, **FXB Rwanda**, University of Rwanda, Rwanda National Child Development Agency

Program name:	Sugira Muryango (also known as Strengthen the Family)
Organization:	Boston College, FXB Rwanda, University of Rwanda, Rwanda National Child Development Agency
Implemented in:	Rwanda
Year of launch:	2019
Aimed at:	Early childhood
Delivery mechanism:	Home visits; coaching

Sugira Muryango (“Strong Families, Thriving Children”) is a home-visiting initiative designed to support families with children who are most vulnerable to poor ECD outcomes by encouraging responsive and playful parenting to promote ECD and prevent violence through active coaching and engagement of the fathers.

Boston College and FXB Rwanda aim to expand Sugira Muryango to 10,000 households across three districts in Rwanda via the Inshuti z’Umuryango (“Friends of the Family”) social protection workforce. Local support and government commitment are crucial to the long-



term sustainability of the program. To achieve this, a collaborative team approach was used, known as the Promoting Lasting Anthropometric Change and Young Children's Development (PLAY) Collaborative, to foster multilevel support across the ECD delivery system in Rwanda.

The program's Family Strengthening Intervention for Early Childhood Development intervention is a home-visiting model crafted to promote playful parenting, engage fathers, improve nutrition, encourage care-seeking behaviors, and enhance family functioning. Its objective is to nurture ECD, cultivate positive parent-child relationships, and support the overall healthy development of children. The aim of the PLAY Collaborative is to establish a community of practice among ECD stakeholders, fostering knowledge sharing and collaborative problem-solving. Sugira Muryango seeks to comprehend the barriers and facilitators influencing stakeholder engagement and long-term sustainability.

Informed by the World Health Organization Care for Child Development package, the intervention:

- Enhances parenting skills and augments knowledge of ECD to create a secure, stimulating, and nourishing environment for the growth of young children, emphasizing nutrition, health, and hygiene promotion.
- Coaches parents of young children in "serve and return" interactions and playful parenting.
- Develops a "family narrative" to instill hope and highlight sources of resilience for addressing challenges and reducing the risk of violence.
- Strengthens problem-solving skills and the navigation of formal and informal community resources.
- Builds skills in parental emotion regulation and alternatives to harsh punishment.

Sugira Muryango integrates these core components into 12 modules and includes two booster/follow-up sessions.

Suggested reading:

- Betancourt TS, Jensen SKG, Barnhart DA, et al. Promoting parent-child relationships and preventing violence via home-visiting: a pre-post cluster randomised trial among Rwandan families linked to social protection programmes. *BMC Public Health*. 2020;20(1):621. <https://doi.org/10.1186/s12889-020-08693-7>
- Johnson T, Betancourt T, Habyarimana E, Asiimwe A, Murray S. Sugira Muryango: scaling home visits in Rwanda through implementation science. *Early Childhood Matters*. 2020. <https://earlychildhoodmatters.online/2020/sugira-muryango-scaling-home-visits-in-rwanda-through-implementation-science/?ecm2020>

2.6.4 **PLAYFVL: Play and Language Access for Your Family through Visual Learning** by **Motion Light Lab** in partnership with SKI-HI Institute

Program name:	PLAYFVL: Play and Language Access for Your Family through Visual Learning
Organization:	Motion Light Lab, in partnership with SKI-HI Institute
Implemented in:	Italy, South Africa, Thailand, United States
Year of launch:	2022
Aimed at:	Early childhood
Delivery mechanism:	Capacity-building; curriculum implementation; mentorship; training and resource development



Ninety-five percent of children who cannot hear, or are hard of hearing, are born to hearing parents facing challenges in communicating with their child due to a lack of knowledge in sign language and an unawareness of their child's visual communication needs. The absence of essential language acquisition during the early years of a deaf child's life has enduring effects on his or her academic, social, and physical well-being.

Intervention modalities include capacity-building and strengthening through a global awareness campaign, the formation of a global alliance with multiple organizations, implementation of an early visual communication curriculum, deaf mentorship, resource development, and global training. These efforts are aimed at providing families worldwide with the necessary tools for language, communication, and resources to foster healthy engagement and play with their deaf or hard-of-hearing children.

The objective of this initiative is to expand its programs and conduct awareness campaigns in communities throughout the United States and Thailand. The goal is to eradicate language deprivation by guiding parents, offering play-based resources, and providing support to families in fostering healthy communication with their young children.

Motion Light Lab and SKI-HI intend to collaborate with various countries in geographically varied areas to implement their activities. They aim to establish robust partnerships with local stakeholders and develop infrastructure for long-term sustainability, with the aim of reaching approximately 15,000 families. Proposed locations include Argentina, Canada, Italy, Netherlands, and New Zealand.

Suggested reading:

- Honeyford MA, Boyd K. Learning through play. *Journal of Adolescent & Adult Literacy*. 2015;59(1):63-73. <https://doi.org/10.1002/jaal.428>

2.6.5 **REAL Fathers** program by **Impact and Innovations Development Centre**

Program name:	Responsible, Engaged, And Loving (REAL) Fathers
Organization:	Impact and Innovations Development Centre
Implemented in:	Uganda, sub-Saharan Africa
Year of launch:	2013
Aimed at:	Across childhood
Delivery mechanism:	Community sessions; mentorship for father engagement

REAL Fathers is a community-driven mentoring program for fathers of toddlers, rooted in evidence and dedicated to instilling positive parenting and nonviolent discipline. It targets fathers 18 to 25 years old with children 0 to 3 years old, with provisions for those under 18 years old (i.e., 16 and 17), tailoring interventions to suit their needs. This demographic is in a critical stage, transitioning to responsibility while being receptive to change. By engaging meaningfully with them, the program disrupts the cycle of violence and fosters ECD and strong families.

Endorsed by the Ugandan government, REAL Fathers is poised for adaptation to local cultures and integration into the national ECD system. It aims to reduce intimate partner violence and violence against children while enhancing ECD. Plans include adapting it across cultures, training more mentors, and tracking its effects with local government support.



The project sets out clear goals: prevent intimate partner violence, enhance positive parenting and nonviolent discipline among fathers, promote nontraditional gender roles in parenting, and encourage the use of voluntary modern family planning methods. These objectives are organized around key themes, each with specific aims:

- “Fatherhood” focuses on encouraging fathers to reflect on their aspirations for their children.
- “Tips & Tricks to Being a REAL Father” provides skills in child communication and positive discipline.
- “Family Dreams” addresses alcohol abuse’s negative effects on family goals.
- “Loving My Family” teaches first-time fathers to foster respectful relationships.
- “Communication” guides couples in effective dialogue.
- “Parenting” assists in establishing parenting goals and commitments.
- “Family Planning” informs couples about child spacing and modern family planning.
- “ECD” equips fathers with knowledge to nurture their children’s early learning and health.

Suggested reading:

- US Agency for International Development. Fathers can prevent violence too: Lessons from REAL Fathers in Uganda. Accessed May 26, 2024. <https://www.usaid.gov/global-health/health-areas/family-planning/fathers-can-prevent-violence-too-lessons-real-fathers>
- *[Brief] REAL Fathers Pilot Results*. Institute for Reproductive Health, Save the Children; 2017. <https://www.irh.org/resource-library/brief-real-fathers-pilot-results/>
- *What Do We Know About the Scale-Up Potential of REAL Fathers?* Impact and Innovations Development Centre; 2021. Brief results, vol. 3. https://gehweb.ucsd.edu/wp-content/uploads/2022/06/geh_real-fathers_brief-scale-up-potential-final.pdf
- Impact and Innovations Development Centre. Real fathers materials. Accessed May 25, 2024. <https://iidcug.org/real-fathers-materials/>



3. Call to Action

This report emphasizes the pressing need for collaborative efforts. It serves as a repository that can be a valuable tool for implementers in tailoring interventions to their specific contexts, thus maximizing impact. It is essential for all stakeholders to advocate for and use these evidence-based parenting programs, enabling adaptable strategies that can foster tangible and transformative change within communities on a global scale.

Although beyond the project's current scope, the following points serve as valuable guidelines for implementers aiming to adopt and adapt the list of programs provided.

- *Collaborative engagement*: collaborating to ensure the repository meets the requirements of stakeholders.
- *Technology and reach*: designing interfaces that are easy to navigate for wider and more effective accessibility across geographies and technological demands.
- *Monitoring and evaluation*: implementing mechanisms for ongoing monitoring and evaluation of the effectiveness of the repository's programs and their impact on child development.
- *Capacity-building*: strengthening local communities' abilities by providing resources and training to implement and adapt the identified programs.
- *Long-term sustainability plan*: developing viability plans for funding and partnerships, as well as a roadmap for updates; anticipations from implementers, such as involving parents as collaborators.





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