



MTSF SECTOR STRATEGIC PLANNING

Contribution towards implementation of ECD services

NATIONAL DEPARTMENT OF HEALTH
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*Park Inn Hotel
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PRESENTATION OUTLINE



- Background
- Priorities for the next MTSF
 - Nutrition guidelines for ECD programmes
 - New Road to Health Book
- Challenges
- Conclusion



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BACKGROUND



- Roles and responsibilities: Chapter 6 (page 75 – 81)
- Page 76 indicates that DoH is responsible for health care and nutrition programme for pregnant women, infants and children and for parenting support programme with emphasis on the first 1000 days
- Chapter 8 on funding for the policy indicates that DoH is responsible for cost with regard to health related development for children aged birth to 2 years.
 - CHW home visit
 - Pre Natal, Ante Natal and Post Natal Care (ANC & PNC)
 - Micronutrient supplementation and IYCF
 - Expanded Programme of Immunisation (EPI)
 - Deworming
 - Growth monitoring and promotion
 - IMCI
 - Nutrition, oral health, hygiene and food safety education, counselling, treatment and support

PRIORITIES FOR THE NEXT FIVE YEARS (MTSF)



IMPLEMENTATION OF:

- 1. Nutrition Guidelines for Early Childhood Development Programmes
- 2. New Road to Health Book- side by side campaign



Road to Health

IMPORTANT: Always bring this book when you visit any clinic, doctor, or hospital.

- Nutrition
- Love
- Protection
- Healthcare
- Extra Care

Child's name: _____

Date of birth: _____

Gender: _____

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NATIONAL DEVELOPMENT PLAN

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NUTRITION GUIDELINES FOR ECD PROGRAMMES



GOAL

To improve nutrition status of infants and young children attending ECD programmes

OBJECTIVES

- To improve nutrition knowledge and skills of key stakeholders.
- To communicate and advocate for good nutrition and appropriate health care.
- To mobilise resources for the implementation of the plan.
- To develop referral system for linking children to appropriate service/s.
- To monitor and evaluate implementation of the guidelines.



OBJECTIVE	ACTIVITIES
Improving nutrition knowledge and skills	<ul style="list-style-type: none">• Design, printing and dissemination of material• Development of training guide and materials• Training of ECD provincial and district coordinators• Training of ECD practitioners, cooks and other categories of employees and stakeholders involved in ECD programmes
Communication & advocacy for good nutrition and appropriate health care	<ul style="list-style-type: none">• Develop and disseminate nutrition and child health care key messages for ECD programmes through the media
Resource mobilization	<ul style="list-style-type: none">• Establish a resource mobilization team• Develop terms and conditions for donation and sponsorship• Conduct audit of food preparation facilities and equipment, serving utensils, etc.• Solicit resource allocation-write proposals for sponsorship

NUTRITION GUIDELINES FOR ECD PROGRAMMES



OBJECTIVE	ACTIVITIES
<p>Development of the referral system for linking children to appropriate service/s</p>	<ul style="list-style-type: none"> • Assess referral system used for children in ECD programmes needing health and nutrition intervention related services • Develop referral protocol for ECD programmes. The protocol should include: <ul style="list-style-type: none"> • Criteria for referral, Where to refer, Tracking system to ensure feedback (ECD ↔ service ↔ parent/caregiver), Referral tools/forms • Create database of social protection programmes that ECD programmes can utilize to refer families of ECD beneficiaries that require further assistance regarding food security
<p>Monitoring and evaluation</p>	<ul style="list-style-type: none"> • Monitor ECD development programmes using the integrated monitoring tool • Establish a core set of ECD nutrition indicators for monitoring progress and impact • Conduct evaluation through research

HIGH-LEVEL RESOURCE REQUIREMENTS



Production and distribution of:

- Nutrition Guidelines for ECD Programmes
- Posters of Standard Operating Procedures
- Menus and standardised recipes
- Monitoring tools and referral forms
- IEC material (nutrition, handwashing, oral health)

Training and facilitation costs for the capacity building of:

- ECD practitioners, cooks and other staff
- Health professionals (Dietitians and Nutritionists, Child Health Coordinators, Health Promoters, Environmental Health Practitioners and Oral Health Practitioners)
- Social Workers and Social Worker Auxiliaries
- National ECD NGOs
- WBPHCOT, Community Development Workers and other staff



Training packages that meet your needs



Monitoring and evaluation:

- Planning, data collection and management
- Monitoring, evaluation and feedback mechanisms



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IMPLEMENTATION FRAMEWORK: SPECIFIC OBJECTIVES AND COST



Specific objective	Budget estimates R millions 2018-2022	Source of funding
Improve nutrition knowledge and skills of key stakeholders	R12.30	NDoH: Nutrition Directorate
Communicate and advocate for good nutrition and appropriate health care for children in ECD programmes	R20.56	NDoH: Phila
Mobilise resources for the implementation of the plan	R0.05	NDoH: Nutrition Directorate
Develop referral system for linking children in ECD programmes to appropriate service/s	R22.23	NDoH: Nutrition and DHS Directorates
Monitoring and Evaluation	R10.08	NDoH: Nutrition
Total cost estimate	R66.22	



SIDE-BY-SIDE CAMPAIGN

NDoH has revised The Road to Health Booklet as tool to deliver comprehensive ECD services The new Road to Health book is a central part of this campaign.



NEW RTHB: SIDE-BY-SIDE CAMPAIGN



GOAL

To ensure that children receive nurturing care and protection to enable them to reach their full health, educational and earning potential – **optimum child development.**

OBJECTIVES

- Improve primary caregivers' understanding of the full scope of care required for ECD and their role in early childhood care and education
- Shift healthcare workers' focus from *survive* to *thrive*
- Increase uptake of the new RtHB among primary caregivers & HCWs
- Increase conversation and collaboration among HCWs and primary caregivers
- Mobilise communities to identify, support and demand quality ECD.

CAMPAIGN IMPACT MODEL



Optimum child development



Changes
in the home



Health system
improvements



Changes in
the community



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COMMUNICATION STRATEGIC FRAMEWORK

CREATE AWARENESS AND SHIFT THINKING

Radio
In person
Electronic/mobile
Community
Printed take home
RTHB
Materials in clinic

The caregiver is made aware that:

1. Her actions are central to child's development.
2. It starts earlier than she thinks.
3. She is not alone - health worker is side-by-side with a tool (RtHB).

She is moved to take conscious action to partake in her child's development.



EDUCATE

Radio
In person
Electronic/mobile
Community
Printed take home
RTHB
Materials in clinic

The caregiver is provided with practical and easy-to-understand information to assist her behaviour change around:

1. Providing good nutrition
2. Loving, playing and talking with child
3. Protecting child from injury and disease
4. Providing healthcare when child is sick or injured
5. Asking for extra care if you or child needs it



ACTION: DESIRED BEHAVIOUR CHANGE TAKES PLACE

REWARD

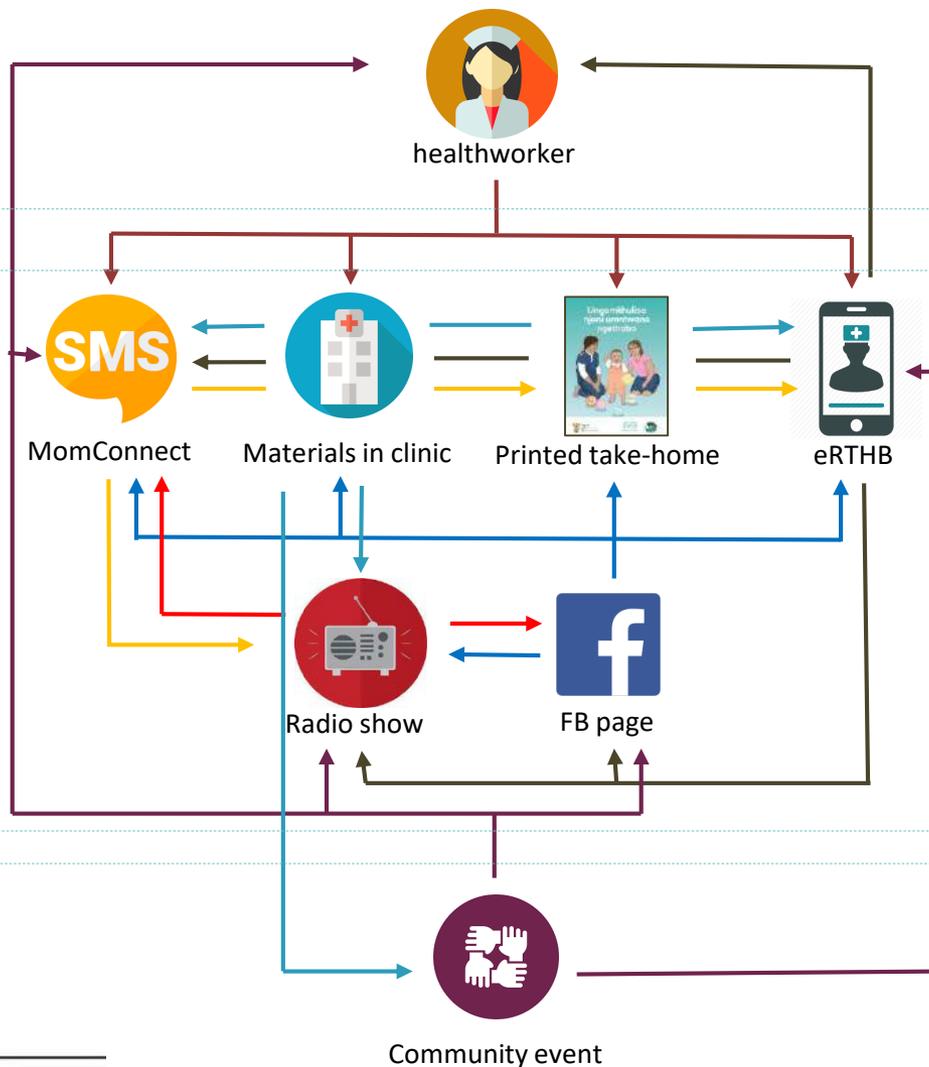
In person
RTHB

The development milestones are met and recorded in the RtHB by the healthcare worker. She communicates them clearly to the caregiver, along with positive feedback. The caregiver's behaviour change is rewarded.

Reward incentivises caregiver to continue learning and changing behaviour as child grows.



CAREGIVER CAMPAIGN JOURNEY



Create awareness,
shift thinking
educate, reward

Create awareness,
shift thinking
educate

Create awareness,
shift thinking
educate, prompt
action



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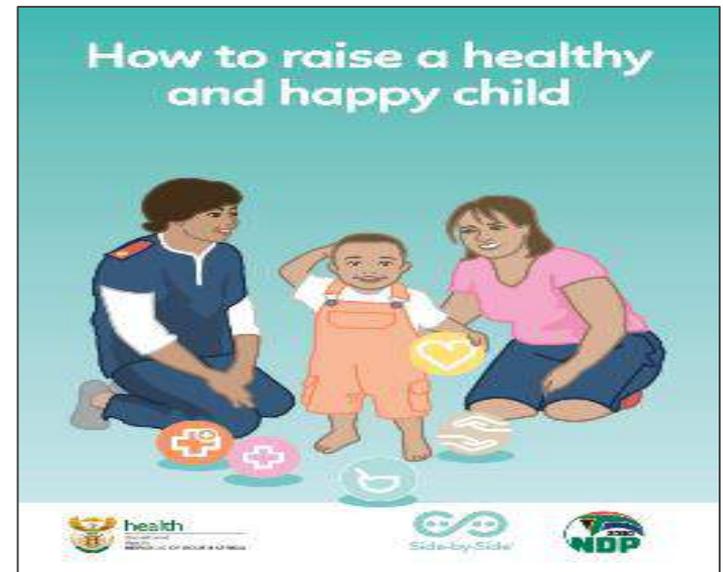
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CHANNEL FOCUS: TAKE-HOME MATERIALS



Already developed:

1. The *Road to Health Booklet* - a health card given to mothers at birth with educational content, health records, immunisation schedules and growth charts to track babies development.
2. The *How to Raise a Healthy and Happy Child* - a 16 page A5 booklet which contains exactly the same educational content as the Road to Health book. The difference is that *How to Raise...* does not contain any health records, immunisation schedules or growth charts. It is an important tool because it is available in all 11 official languages, unlike the *Road to Health* which is English only.
3. *Supporting breastfeeding booklets including an A5 breastfeeding sticker* which supports employers and staff to create a breastfeeding friendly workplace.
4. Side-by-Side posters on main messages of the campaign:
Introductions to 5 pillars, Danger Signs, Immunisation, Breastfeeding, Breastfeeding HIV+
5. Side-by-Side breastfeeding ICON identifiers.
6. Side-by-Side banners for immunisations and ICONs.



CHANNEL FOCUS: EVENTS AND MEDIA



Events

- Ekurhuleni Africa vaccination event
- Support to DSD for Child protection Week
- Mandela Day intervention in Alexandra Township in partnership with Save the Children

Media Features

- SABC 2 House Call
- Ukhozi FM

Newsletter



CHANNEL FOCUS: MATERIALS IN CLINICS



Still to develop:

- Side-by-Side complete toolkit with posters for Developmental delays, Love/Play/Talk poster (with book sharing messages), Complementary feeding (+ possible pamphlet), Hygiene in the home, Oral rehydration therapy, Health & Safety in home, Oral Health, Disability, Social services, Vulnerable services
- Nalibali hanging library (incorporating book sharing messages)
- The *Side-by-Side antenatal care pamphlet* introduces pregnant women to the Side-by-Side knowledge pillars, applied with antenatal messages.



Kom ons werk saam om 'n gelukkige en gesonde kind groot te maak

Side-by-Side

Alle kinders benodig:

 <p>VOEDING</p> <p>Goede voeding is belangrik vir jou en jou kind se gesondheid. Dit begin met bervoeding.</p>	 <p>LIEFDE</p> <p>Jou kind leer om deur na jou te lyk wanneer jy hom/haar naby hou en liefhat, speel en met hulle praat.</p>	 <p>BESKERMING</p> <p>Jou kind kan beskerm word teen kindersiektes en beserings deur insettings te kry en om tuis versigtig te wees.</p>	 <p>GESONDHEID-SORG</p> <p>Jou kind het sorg wanneer hulle siek of beseer is om hulle te help om beter te word.</p>	 <p>EKSTRASORG</p> <p>Jou kind mag spesiale sorg of ondersteuning benodig. Om te weet wat om te doen of waarheen om te gaan, sal beide julle help.</p>
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A long and Healthy life for all South Africans

CHANNEL FOCUS: RADIO SHOW



Close to implementation:

1. Side-by-Side radio drama on 11 SABC's African Language stations starting at the end of September.
2. Side-by-Side post drama discussion show on 11 SABC's African Language stations starting in September

*The weekly 7 minute serialised drama will be followed by a 7 minute Q&A with expert guest discussing the main health message of the drama. All of the messages in the show are aligned to Side-by-Side messages and to MomConnect messages. MomConnect and the Road to Health book are referenced frequently in the content.

3. Radio Show jingle

*A distinct tune for the show

CHANNEL FOCUS: FACEBOOK PAGE



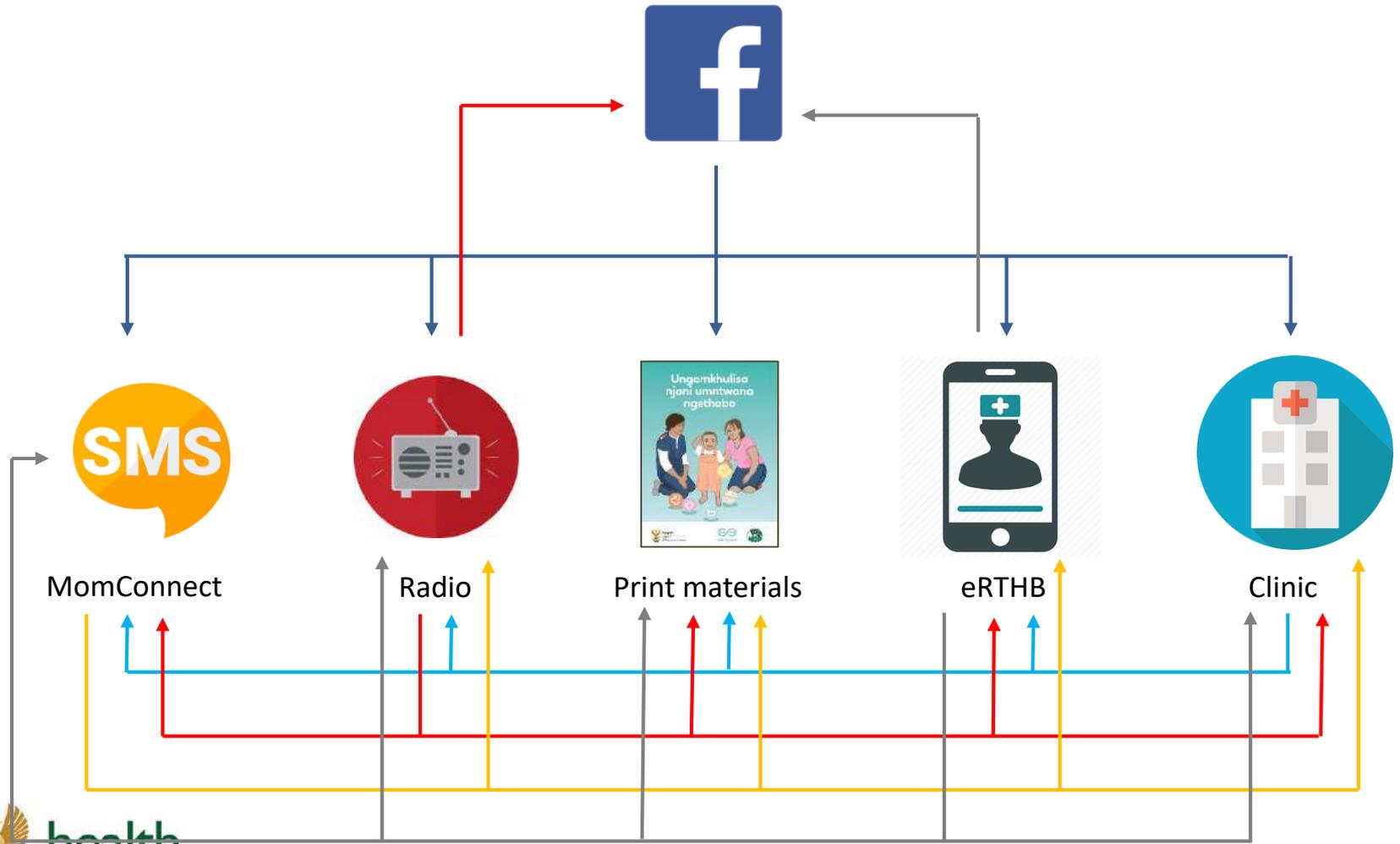
1. Sharing: key educational messages of the campaign, which would also be shared in the printed materials, RTHB, posters, radio and in-person. Facebook will be an additional opportunity to broadcast the message. The advantage of sharing information on this channel is:

- the ability to repeat it often which will aid understanding and message absorption.
- the ability to align the tone of voice of the message to the ethos of Side-by-Side

2. Engage: give Side-by-Side target audience the opportunity to engage in two way conversation about the content in safe and supportive community environment. Giving caregivers the opportunity to ask questions and receive feedback which is crucial for building trust in the campaign and understanding the message.

3. Connecting: Side-by-Side target audience to other communication channels of the campaign; reminding them to tune into radio, sign up for MomConnect, pick up brochures in the clinic, etc.

CHANNEL FOCUS: FACEBOOK PAGE IN CONTEXT



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ENGAGING COMMUNITIES GOALS



- To support and reinforce mass media messaging on the ground by engaging communities in face to face settings.
- To provide a platform for mothers and caregivers to ask question and clarify misunderstanding from mass media.
- To identify champions and foot soldiers who will keep the campaign conversation going on the ground and ensure local ownership and sustainability.
- To tap into existing networks and partner with stakeholders to realise activities.

COMMUNITY ENGAGEMENTS OBJECTIVES



(Green- Low. Yellow- Medium, Red-High)

Inform (speaks to campaign objective 1&2)

- Provide the public with information to assist them in understanding existing problems in early childhood development and inform them on mass media campaign activities.

- Public participation tools examples- information sessions, fact sheets, website and Facebook redirect



Involve (speaks to campaign objective 4&5)

- Work directly with public representatives throughout the process to ensure local project ownership.

- Public participation tools examples- appointing local SbS champions, orientating them and supporting them with skills development.



Empower (speaks to campaign objective 3)

- Share SbS informed solutions to existing problems. We will keep our communities informed on best practices in child rearing

- Public participation tools examples – community discussions on childrearing, on issues raised in the radio show, discussions on RTHB pillars.



Collaborate (speaks to campaign objective 1,2,3,4 and 5)

- Partner with local stakeholders, local interest groups and community leaders to realize each aspect of the engagements.

- Public participation tools examples- Hosting SbS dialogues events led by local organizations.

ACTIVATION SITES RATIONALE



Coverage will be increased over the MTSF period

Selected implementation sites are informed by

- High numbers of teenage Pregnancy^{1*}
- HIV Prevalence per sub-district^{2*}
- Child Health Indicators per district ^{3*}
 - Diarrhoea fatality cases children under 5 years
 - Pneumonia fatality cases children under 5 years
 - Severe Acute Malnutrition fatality cases children under 5 years
 - Infant exclusive breastfeeding rate
 - Immunisation coverage for children under 1 year

HEALTHCARE WORKERS CHAMPIONS



INCENTIVES FOR HCW CHAMPIONS



HCW CHAMPIONS

- Existing MomConnect ambassadors will be recruited for this role (details in separate document)
- HCW champions will be the face of the campaign at healthcare facilities.
- They will influence colleagues on best practices as informed by SbS ethos.
- They will be safe spaces for parents and caregivers during clinic visits.

INCENTIVES FOR THE REST OF THE STAFF

- Portrait of staff
- SbS nurse of the month feature on social media and clinics.
- Partner with nurses council and unions for donation of scholarships to annual nurse conferences and development workshops.



COMMUNITY HEALTH WORKERS CHAMPIONS



ROLE OF CHW CHAMPIONS

- Partner with Grow Great in future when areas overlap
- They will drive campaign in their communities
- They will support HCW by reinforcing Side by Side messages in home environments – possibly using Ibhayi Lengane approach

INCENTIVES FOR COMMUNITY HEALTH WORKERS

- Certificate of participation from NDoH.
- Media mentions
- Social media profiles
- Attendance of yearly Side by Side conference.



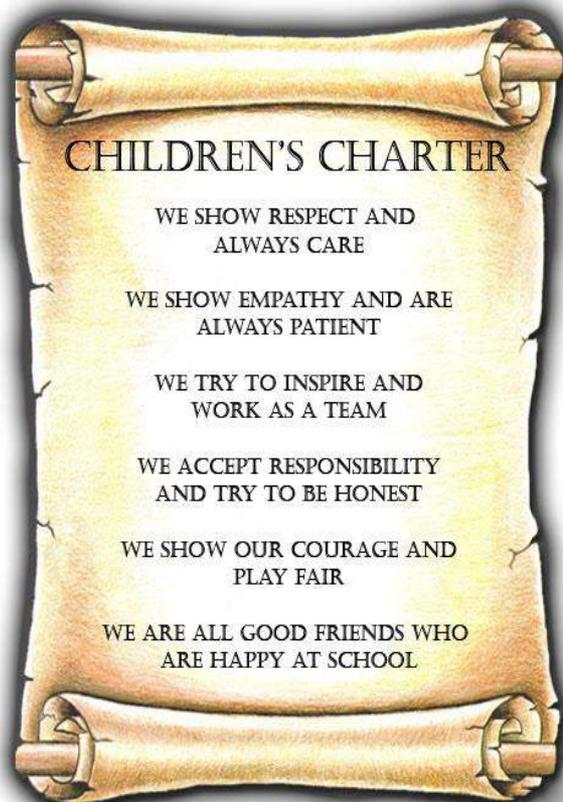
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CAMPAIGN TOOLKIT AND CHARTER



Side-by-Side is developing toolkit to orientate health workers on the RTHB, campaign ethos, messages and practical information on how to use all of the materials.



Supporting orientation workshops:

- To share healthcare worker experiences
- Identify HCW champions
- Identify solution to identified problems
- Create Side-by-Side pledge/ charter that will inform relations between parents, caregivers and HCW in the maternity ward.
- Adopt pledge/charter that the community and HCW agreed on. This will be enlarged and placed in clinics
- This charter can be used to measure impact of the campaign. At the end of the year the champions will have to score themselves on items in the charter.

involve and collaborate



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FLAGSHIP SIDE BY SIDE - NALIBALI CORNERS AT SELECTED PROVINCIAL IDEAL FACILITIES



- Nalibali hanging libraries or reading corners are spaces for mothers to read and play with children while waiting to be serviced at the clinic.
- Story stickers at the back of chairs in the waiting area for mothers to read as they move from seat to seat.
- In addition to the availability of SbS reading materials a partnership can be established with Nalibali to fill these spaces with hanging libraries.
- These spaces can also have manuals on how to make toys from available materials at home and how to create story books.
- Local partners and other stakeholders invested in ECD will be invited to perform monthly workshops in these spaces with the aim of engaging parents on various subjects as informed by the RTHB pillars. I.e. Grow Great can host a session on nutrition.

* Inform, involve and empower, collaborate*

ONE PROVINCIAL HEALTH DAY EVENT ANNUALLY



- The first part of the event can feature a formal programme where communities will be engaged on best practices in child rearing.
- The second part of the event can include exhibitions by partners informed by the five SbS pillars.
- All activities will be carried out in partnership with local ECD stakeholders.
- SAPS, Home Affairs, DSD, DBE can also be invited to be part of the event.
- Health catch ups can also be conducted on the day.

inform, involve and empower



SUPPORTING ACTIVITIES



Media engagements

- All activities will be supported by media features in local media.

Exhibitions at relevant NDoH and partner events

- We will identify relevant events hosted by NDoH and other stakeholder where we will have SbS stalls for information sharing.

inform, involve, empower and collaborate



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ADDITIONAL COMMUNITY ENGAGEMENTS WHICH CAN BE EXPLORED IN FUTURE



- ECD practitioners information sharing workshops through local ECD forums and partnership with partners like Grow Great
- Dialogues with religious leaders
- Engagement with tax/bus associations
- Engagement with stokvels



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CHALLENGES AND CONCLUSION



CHALLENGES

- Database of ECDs to help us scale up provision of health and nutrition services
- Development of process indicators for close monitoring and early identification of areas needing intervention

CONCLUSION

The integrated and multi-sectoral nature of ECD work makes specific planning and collaboration of key stakeholders all-important

**LOVE THEM, IMMUNISE THEM, FEED
THEM AND PROTECT THEM**



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