A focus on the first 1000 days: Research, collaboration, and reflection

This supplemental issue gives clear focus on the early years of the human life cycle as a key to global economic, social and health development.

In 2007, The World Health Organization’s Commission on the Social Determinants of Health recognized early childhood development (ECD), defined as prenatal to 8 years, as a “Powerful Equalizer” and “a critical foundation for their entire life course.” This includes the physical, social, emotional, language, and cognitive domains – strongly influencing basic learning, school success, economic participation, social citizenry, and health.1

Evidence supporting this focus was emerging in 2007 from the International Child Development Steering Group and published in the medical literature.2 The importance of faith and religion on ECD was also evident in the Early Childhood Longitudinal Study.3 The impact of early childhood stimulation on labor markets followed in 2014.4 Then in 2015, evidence from the Joint Workshop by the Institute of Medicine, National Research Council, and The Centre for Early Childhood Education and Development, Ambedkar University, Delhi showed the need for prioritizing early childhood in any development agenda.5

In 2015, the Sustainable Development Goals (SDGs) included target 4.2 “ensure that all girls and boys have access to quality early childhood development, care and preprimary education.” Early childhood outcomes were also linked to SDGs 1 (end poverty), 2 (end hunger and improve nutrition), 3 (health for all at all stages), 5 (gender equity), and 16 (end violence against children).6

Evidence continued to mount for the high value of investing in ECD for sustainable development. There is a demonstrably large downstream return on investment – effecting health, education, just societies, job creation, and poverty alleviation. Key risk factors such as lack of cognitive stimulation, micronutrient deficiencies (iron, zinc, iodine, omega-3, etc), early trauma, lack of social bonding, environmental toxins, and many other factors have been identified. Roger Thurow identified some of these in his book The First 1,000 Days, which is reviewed in this issue.

Dr Bolajoko Olusanya, a member of our Editorial Board and the Executive Director of the Centre for Healthy Start Initiative, Lagos, Nigeria, notes that ECD is, “considered the foundation for subsequent educational and vocational attainment at the individual level and the overall human capital and economic development at the population level.”7 In this issue she offers an excellent editorial on the subject of inclusiveness and the Christian responsibility toward the young and vulnerable.

The World Bank Group’s emphasis on human capital development for poverty alleviation and shared prosperity during this time included early childhood. In 2015, The Moral Imperative to End Extreme Poverty (MI) was formed as a collaborative which brings together religious and faith-based organizations and the World Bank Group into a broad forum to advance a faith-based action framework to end Extreme Poverty and realize Sustainable Development Goals.8 The MI recognized that there are significant evidence and policy gaps in this focus on childhood, especially the first 1000 days. Dr. O’Neill has been working as co-chair of the Evidence Working Group of the Moral Imperative, which works with the Advocacy Working Group to enhance the evidence base from FBOs in this focus area of early childhood as an inter-faith collaborative among other things.
The academic world has begun reinforcing the ECD focus. In 2016, Harvard University’s Center for the Developing Child stated,

> The capacities developed during childhood are the building blocks of a well-functioning, prosperous and sustainable society, from positive school achievement and economic self-sufficiency to responsible adult behavior and lifelong health. When we give children today what they need to learn, develop, and thrive, they give back to society in the future through a lifetime of productive citizenship.9

We published an article by Jose Miguel DeAngulo and Luz Stella Losada from Bolivia in 2016 which gave a comprehensive summation of the emerging evidence as well as a theological perspective on high priority the first 1000 days.10 We have included a link to that article in this issue’s table of contents.

Further momentum for multilateral organizations and networks emerged in 2018. The WHO, along with the World Bank, UNICEF, Early Childhood Development Network (ECDAN),11 Partnership for Maternal, Newborn, and Child Health (PMNCH),12 and Every Woman-Every Child,13 published the landmark work “Nurturing Care for Early Childhood Development: a framework for helping children survive and thrive to transform health and human potential,” launched at the 71st World Health Assembly in May, 2018.14

At the Word Bank annual meetings in Bali, Indonesia in October 2018, the MI met and we subsequently drafted a document “Results for Children: The Moral Imperative’s Core Message for Action to Secure Wellbeing Outcomes for Early Childhood.” This further affirmed this global trend to study and create policies at government level with the strategic cooperation and assistance of FBOs and local faith communities.15 “The resourcefulness of faith, and the assets and services of faith institutions are critical to the wellbeing outcomes.”16 The goal was to sensitize and enhance local faith communities and FBOs to support this important agenda and build capacity locally in each country.

We are pleased to publish the first mixed methods study of its kind by Ruth Lundie and Deborah Hancox from South Africa who describe the Church’s key role in supporting the first 1000 days (F1000D). We hope this will stimulate more research and application at the local faith community level. Building on these collaborations and bolstered by the existing evidence, we call for more study of the role of FBOs and the contextualized application of the teachings of our respective faiths. This will consolidate the guidance on practical approaches to supporting families to provide nurturing care in the earliest years of life, considering policies, enabling health system, and prompting relevant actions in other sectors. We also hope it will provide guidance to countries in their decisions to scale up effective interventions, to mobilize resources, to monitor progress, and to achieve results, demonstrating clear returns on cross-sectoral investments.

There remains a clear call for research and reflection on the interface between the Christian faith and early childhood as formative for the good life. The incarnation gives us a revolutionary model which can change the world. Jesus’ remarkable conception, loving gestation in Mary, humble birth, displaced infancy under parental protection, and Galilean toddler life under foreign occupation gives us all hope that despite all the risks to early life, these tender beginnings can lead to abundant life, and be shared throughout the whole world.

References


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