

Bridging the Early Childhood Development Gap

Working in Partnership to Strengthen the Jordanian Health System

The impact of prolonged stress and adversity during children's early years can have serious negative consequences on their mental and physical health. In a world where nearly 40% of young children risk falling developmentally off track, the stakes could not be higher—especially for 53 million children in the Middle East and North Africa who are in dire need of humanitarian support.¹

When children do not develop to their full potential it puts whole communities at risk. Creating conditions that help children thrive as they grow and develop is crucial. Supportive policies, resources, and services centered around early childhood development (ECD) can significantly reduce the harmful effects of adversity, positively influencing lifelong economic and social outcomes.

Aligned with the Government of Jordan's national priorities, the Ministry of Health (MoH) partnered with the International Rescue Committee as part of the Ahlan Simsim initiative to co-develop an ECD Health Integration program. This program works with the national health system and healthcare providers to bring critical resources on responsive caregiving and social-emotional development of children to parents and other caregivers of children ages 0 to 5.



1. UNICEF. "Humanitarian Action for Children in the Middle East and North Africa for 2023." UNICEF Middle East and North Africa, 1 Dec. 2022, www.unicef.org/mena/reports/humanitarian-action-children-middle-east-and-north-africa-2023.

What is Ahlan Simsim?

In 2018, the International Rescue Committee (IRC) and Sesame Workshop came together to launch Ahlan Simsim (“Welcome Sesame” in Arabic), a groundbreaking initiative that delivers early childhood development and playful learning to children affected by conflict and crisis in the Middle East. Global TIES for Children at New York University is the external evaluation partner for the project.

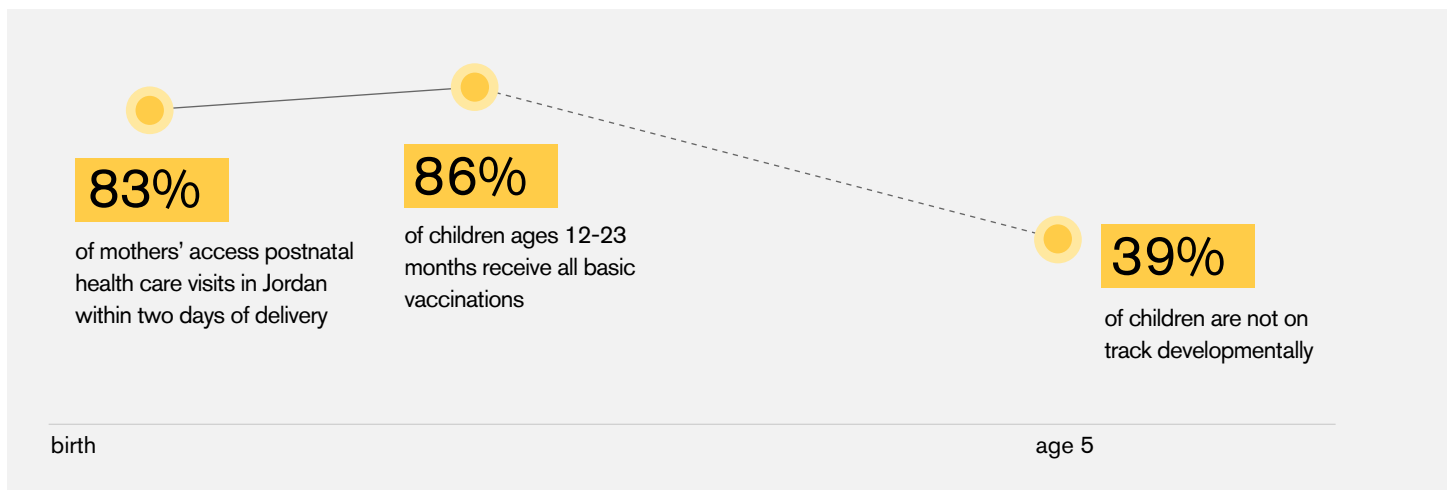
By merging IRC’s expertise in crisis response with Sesame Workshop’s award-winning educational media, Ahlan Simsim offers comprehensive resources to families, covering health and developmental milestones to foundational cognitive and social-emotional skills in every setting they encounter.

An integral part of the Ahlan Simsim approach is enhancing existing systems in Iraq, Jordan, Lebanon, and Northern Syria to support vulnerable populations, ensuring service sustainability, and achieving broad reach at scale. National health systems present a critical entry point for reaching young children and their parents as well as an important, yet often untapped, opportunity to provide holistic services to promote nurturing care.

Reaching the Youngest Children in Jordan

Jordan (population of 11.5 million) currently hosts more than 700,000 refugees, half of whom are children.² From prenatal care through age 5, children in Jordan—including both host and refugee communities—attend regular well-child check-ups at primary health clinics. The regularity of and high adherence to these check-ups make these spaces a unique entry point for reaching caregivers and providing them with the tools they need to support their children’s development. 83% of mothers access postnatal health care visits in Jordan within two days of delivery and 86% of children ages 12-23 months receive all basic vaccinations. However, an estimated 39% of children are not on track developmentally.

While primary health care presents a promising route to reaching a majority of families nationwide with critical ECD information, well-child visits and healthcare worker training have focused exclusively on physical health such as weight, height, vaccines, hygiene, and breastfeeding. Physical health is an important aspect of child development. It is not, however, all of child development and many healthcare workers do not receive formal training to address other key aspects, such as healthy cognitive or social emotional development and responsive caregiving.



2. UNHCR. “Jordan Operational Update - February 2024.” UNHCR Operational Data Portal (ODP), United Nations High Commissioner for Refugees, 19 Mar. 2024, data.unhcr.org/en/documents/details/107382.

Leveraging Existing Health Systems and Strategic Partnerships

With a joint commitment to child outcomes, the Jordan MoH and Ahlan Simsim teams co-designed a program to enhance the knowledge and practices of healthcare workers to support holistic ECD. The goal of the program was to ensure that healthcare workers (in this case, primarily midwives, although some nurses were included) have the knowledge and tools to provide relevant information on holistic ECD and nurturing care to caregivers during routine well-child check-ups.

To achieve this, the MoH and Ahlan Simsim teams developed a training for midwives as well as ECD tips and resources the midwives could use during check-ups, including child development milestone posters and a dialogue tool that aimed to facilitate conversations between caregivers and midwives.

As of December 2023, 267 nurses and midwives have been trained. In turn, these providers have conducted well-child visits with over 325,000 caregivers and 490,000 children. Caregivers and children come from both host and refugee populations residing in Jordan. This reach is expected to grow at an annual rate of 150,000 new children per year based on birth rate and national health coverage data.

In addition to using the materials as provided, some individual nurses and midwives have adapted Ahlan Simsim program materials to best support their own work styles. For example, one midwife printed copies of the ECD tips from the dialogue tool, labeled by topic, and put them in paper pockets on their walls for caregivers to read and take home. Another health worker printed and framed a tip of the week to display in her consultation room for caregivers to read during visits. Both examples highlight the importance of allowing for creative flexibility from within the system.

"Playful learning corners" (see image) were also installed in 100 clinic waiting rooms for children to engage with while waiting for appointments, reinforcing the importance of play in a child's development. To further support caregivers after the appointments, the IRC and MoH piloted an automated messaging service via WhatsApp in 10 primary healthcare centers. The program allows caregivers to receive additional activities and tips tailored to children's age groups directly to their phones on demand.



PLAYFUL LEARNING CORNERS

Program Implementation and Quality

To gain more insight into the intervention's successes and challenges as well as the experiences of midwives and caregivers, Ahlan Simsim conducted implementation research³ over a 6-month period from October 2022 to March 2023, led by NYU's Global TIES for Children and the IRC Jordan ECD research team.⁴ The study collected data from 19 health centers, 36 midwives and 302 caregivers. Data were collected through observations of 148 well-child visits across the 19 centers; surveys with health center leaders, providers, and caregivers; interviews and focus group discussions with providers; and interviews with caregivers.

INSIGHTS BASED ON RESEARCH AND MONITORING DATA

Caregiver Satisfaction and Feedback on ECD-Health Integrated Well-Child Visits



HIGH SATISFACTION:

~95%

of caregivers expressed satisfaction with well-child visits, which now included both standard MoH content as well as the new Ahlan Simsim content on ECD



VALUED COMMUNICATION:

In the same survey, caregivers reported positive interactions with midwives:

88%

felt that midwives listened well

86%

reported that midwives effectively responded to concerns about their child

>50%

remembered midwives providing useful parenting advice



ECD INTEGRATION IN WELL-CHILD VISITS:

Mixed results:

83%

of midwives reported utilizing ECD and parenting information learned from Ahlan Simsim training in at least one well-child visit in the month before the survey

74%

said they had employed the Ahlan Simsim ECD dialogue tool during consultations.

60%

noted incorporating materials from the Ahlan Simsim ECD play kit into their practice.



*Direct observations of health visits during the research showed that **midwives discussed child behavior or other clear uses of Ahlan Simsim ECD materials in about 7-28% of visits.** That said, with this integrated intervention it is difficult to observe what information is from existing MoH content and what is from the new Ahlan Simsim ECD intervention.*

3. An implementation research study is defined as a study used to test the effectiveness of new models or identifying modifications to existing models. It is used to document, test, and refine program models in a structured way.

4. For more information on this study, see TIES for Children, Global (2024). Lessons from an Implementation Study of Integration of Early Childhood Development (ECD) Information and Guidance into Well-Child Visits in Primary Healthcare Centers run by Jordan's Ministry of Health. figshare. Preprint. English: <https://doi.org/10.6084/m9.figshare.25471549.v2>, Arabic: <https://doi.org/10.6084/m9.figshare.25480897>

While it's clear from the outcomes that the program is highly valued, data on midwives' implementation of the ECD intervention were mixed. Based on focus groups with midwives during the research, we believe that midwives faced challenges in the implementation of the ECD integration that future iterations of the intervention should address.

First, midwives reported that the short time (15-30 minutes) of most well-child visits makes it difficult for them to complete all the required tasks and share information on ECD. Adding new ECD information to already short visits was challenging.

Second, midwives reported that caregivers might not have seen them as the most credible sources for parenting and child development advice, especially if midwives' advice differed from that of family members.

However, observations showed that midwives and caregivers discussed feeding practices in 57% of visits. Feeding and nutrition information was already included in well-child visits prior to this intervention, but the Ahlan Simsim training and tools introduced additional information for caregivers to support children who are struggling with eating habits (e.g. refusing new foods).

Despite these challenges, the implementation research further emphasized midwives' interest in integrating holistic ECD information into their day-to-day work. Dr. Areej Hijjawi, Director of the MoH Child Health Unit noted that "there was a shift in the midwives' mindset. Those who hadn't initially received [the Ahlan Simsim] training demanded to take it."

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— **Dr. Areej Hijjawi,**

Director of Child Health Unit, Ministry of Health

As a result of the enthusiasm for the program, the Ministry has requested to expand the program throughout the entire Kingdom. Dr. Hijjawi hopes initiatives like this will help push for more solutions that solve maternal and child health challenges at the policy level, including greater investment in ECD services and support to service providers.

Moving forward, the MoH will continue to integrate the ECD intervention components into its existing policies and processes. The IRC and the MoH will revise the content and implementation to ensure quality programming that addresses challenges identified through the research. We will also work on generating more community and caregiver demand for ECD information from midwives. Continued improvements will ensure that this program is both feasible for healthcare workers to deliver and effective for improving child development outcomes.



Pairing program delivery with systems strengthening for scale

To continue progress in filling identified gaps in supporting holistic early childhood development in the Jordan national health system, the MoH has taken a series of steps to embed the program elements into their existing systems and sought the necessary funding for sustained integration of nurturing care and holistic ECD.

In August 2023, the Jordanian Nursing Council confirmed the accreditation of the MoH-IRC co-developed ECD training as equivalent to 6 hours (out of the 50 required to renew one's license) of ministry-led mandatory training for all healthcare professionals. Additionally, the MoH secured additional funding through USAID to continue through April 2024 to train an additional 120 midwives, to reach a total of 36% of midwives in Jordan by the end of 2024.

To further institutionalize the intervention within the existing national health system, the Head of the MoH Child Health Unit and the IRC are adjusting existing policies to maximize the adoption of the ECD information and tools during well-child visits. The MoH is currently revising the job descriptions for midwives to reflect additional responsibilities related to responsive caregiving and children's social-emotional developmental needs during appointments. ECD tips are being integrated into the well-child visit checklist that is part of children's health files. Including ECD tips as part of this checklist will allow the ministry to monitor the implementation of the intervention and remind busy midwives to discuss the ECD tips with caregivers.

Recognizing the value of the MoH/IRC co-developed ECD intervention in existing health services, the MoH has confirmed that a policy recommendation will be submitted to the Ministers of Health and of Finance to ensure ECD is listed as a budget item for 2025 and 2026.



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Takeaways & Learnings:

System design for scale: This implementation of the ECD health integration program in Jordan serves as a pioneering model in the Middle East for leveraging health system infrastructure to enhance ECD outcomes. By aligning the program's design with the existing health services framework, the Jordanian MoH and the IRC have established a scalable and replicable approach. This ECD health integration intervention has been successfully adopted by the Ministry of Health in Iraq, reaching 225,000 children since its launch in March 2023, and by NGO partners in Northeast Syria, reaching 5,019 children in 2023. The lessons learned from Jordan's implementation have been instrumental in refining and strengthening the integration of core ECD concepts into health systems.

Deepening relationships for long-term development: The IRC's collaboration with the Jordanian MoH transcends the conventional boundaries of maternal and child health care, embracing a holistic approach. This partnership is reflective of a collective commitment to responding to system needs with a focus on improving ECD service quality and outcomes, rather than just outputs, for the well-being of children and their families. By investing in the IRC-MoH relationship, we not only enhanced the current implementation of the intervention but also laid the groundwork for a more comprehensive, long-term, sustainable strengthening of the Jordanian health system.

Embracing adaptability for continuous improvement: The journey of the ECD-Health Integration program underscores the critical importance of adaptability and continuous learning in the face of evolving challenges and opportunities. This initiative, which arose from discussions with the MoH and learning about the needs of the health system in Jordan, shows the importance of flexible, responsive collaboration in addressing a broad spectrum of ECD needs. Our experiences in Jordan, Iraq, and Northeast Syria have shown that success is not static but rather a dynamic process of adaptation and growth.

Looking forward

The ECD-Health Integration program exemplifies the transformative potential of systems-informed interventions in ECD. By co-designing with scalability in mind, deepening our partnerships, and embracing adaptability, we built a solid foundation for expanding our impact and continuing to improve the lives of children and families across the MENA region.

As we forge ahead with our partners, our focus remains on strengthening the health system's capacity to comprehensively support ECD through continuing to iterate and improve this ongoing intervention and

looking for more opportunities to integrate ECD into health systems. The accreditation of our co-developed ECD training by the Jordanian Nursing Council and the integration of ECD content into routine healthcare practices mark significant milestones in the journey towards systemic change. These achievements, coupled with the MoH's commitment to embedding ECD as a priority within its budgetary planning for 2025 and 2026, signal a promising future for the program's sustainability and impact.