Tajikistan ECD Key Preliminary Findings

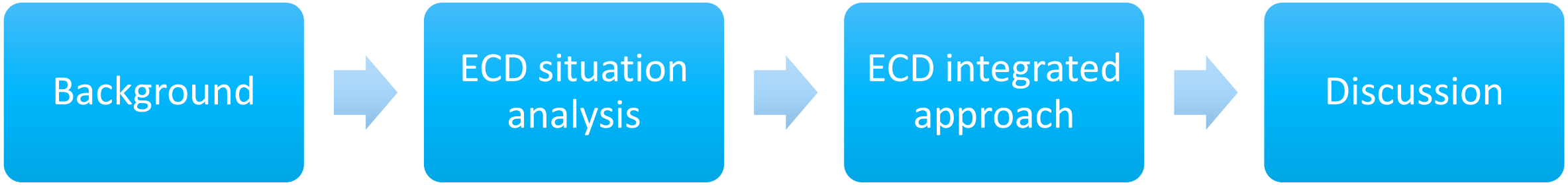
March 2019

World Bank

A quick reminder of why this matters….

If this little girl is healthy and happy, by age 5, what percentage of her brain will be developed?

An overview of today's presentation



Background

Desk review on ECD situation, legal framework, ECD programs and policies

Interviews with key Ministry of Health and Social Protection staff related to norms, standards, current ECD situation and interventions

Preliminary findings from the ECD situation analysis

A range of **sectors** are needed to improve early childhood development

Nutrition

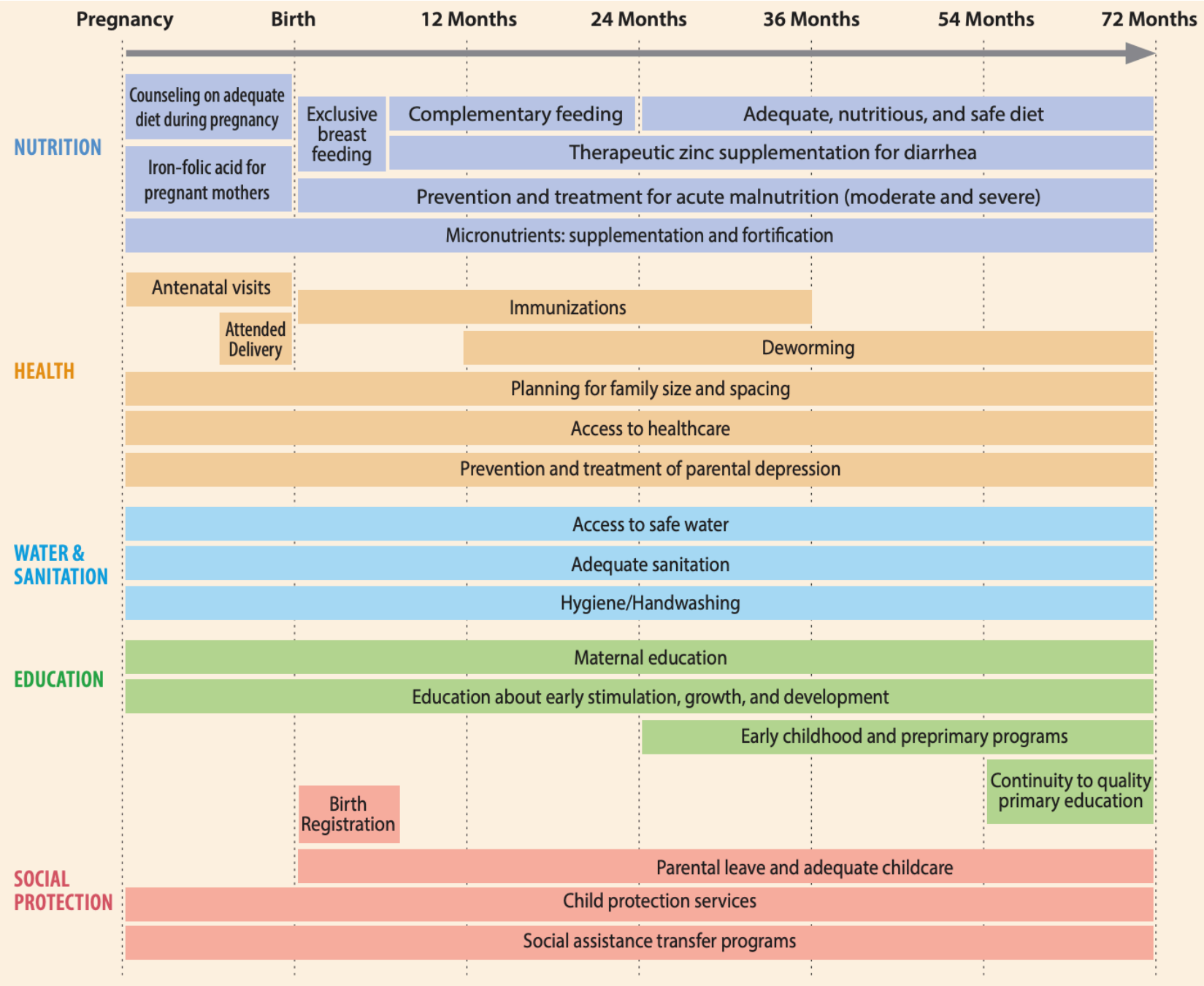
Social Protection

Health

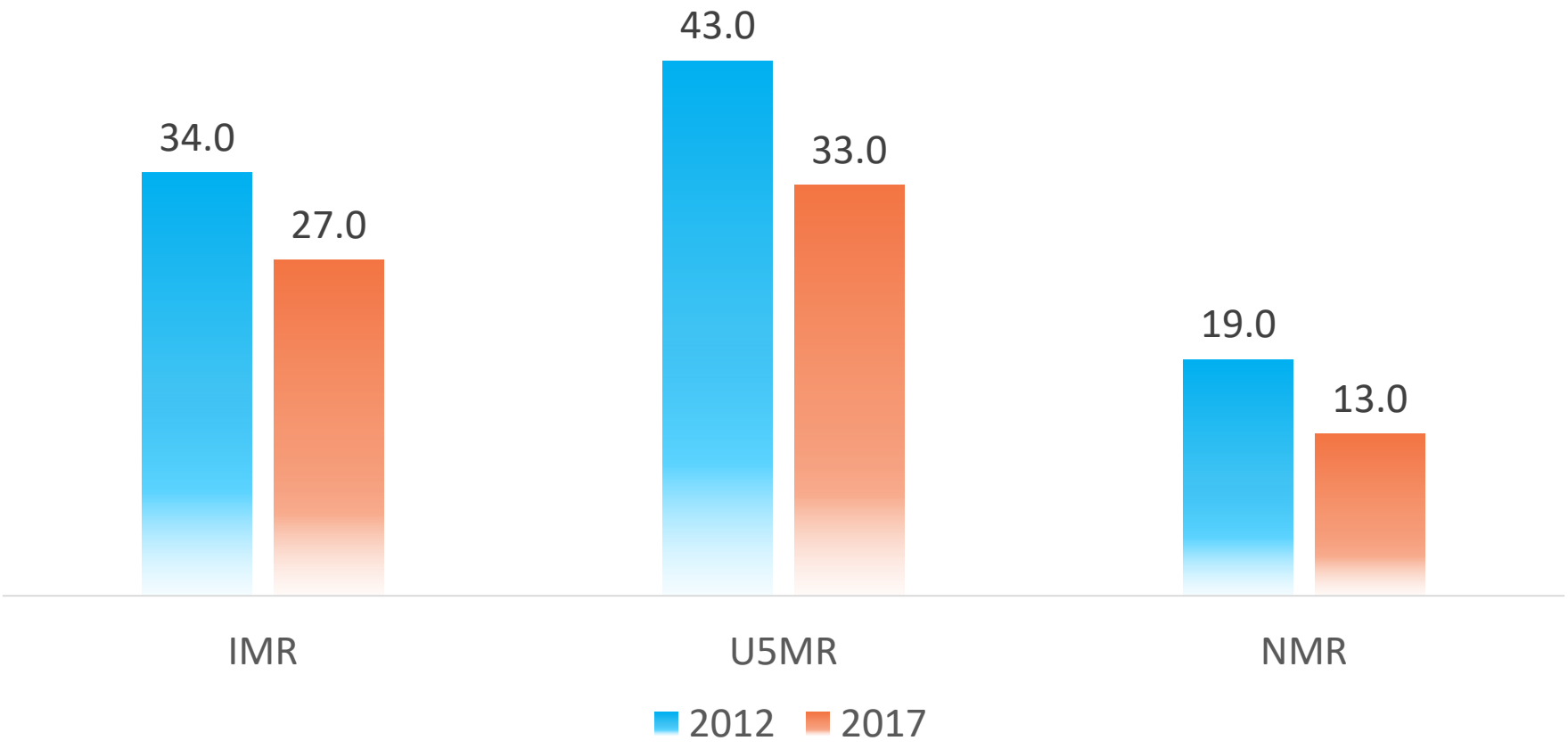
Education

Water and Sanitation

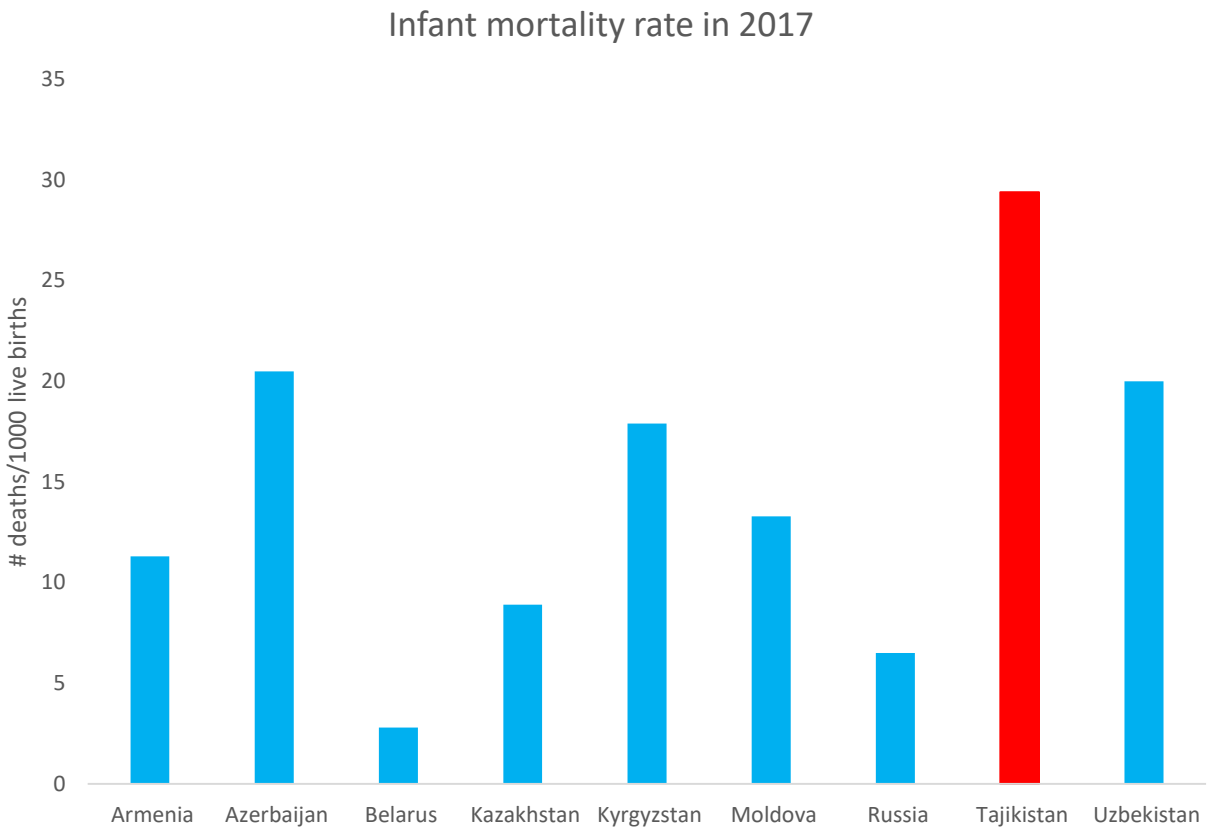
A framework for ECD looks across the sectors and across the life course



Neonatal, infant and child mortality rates have fallen….



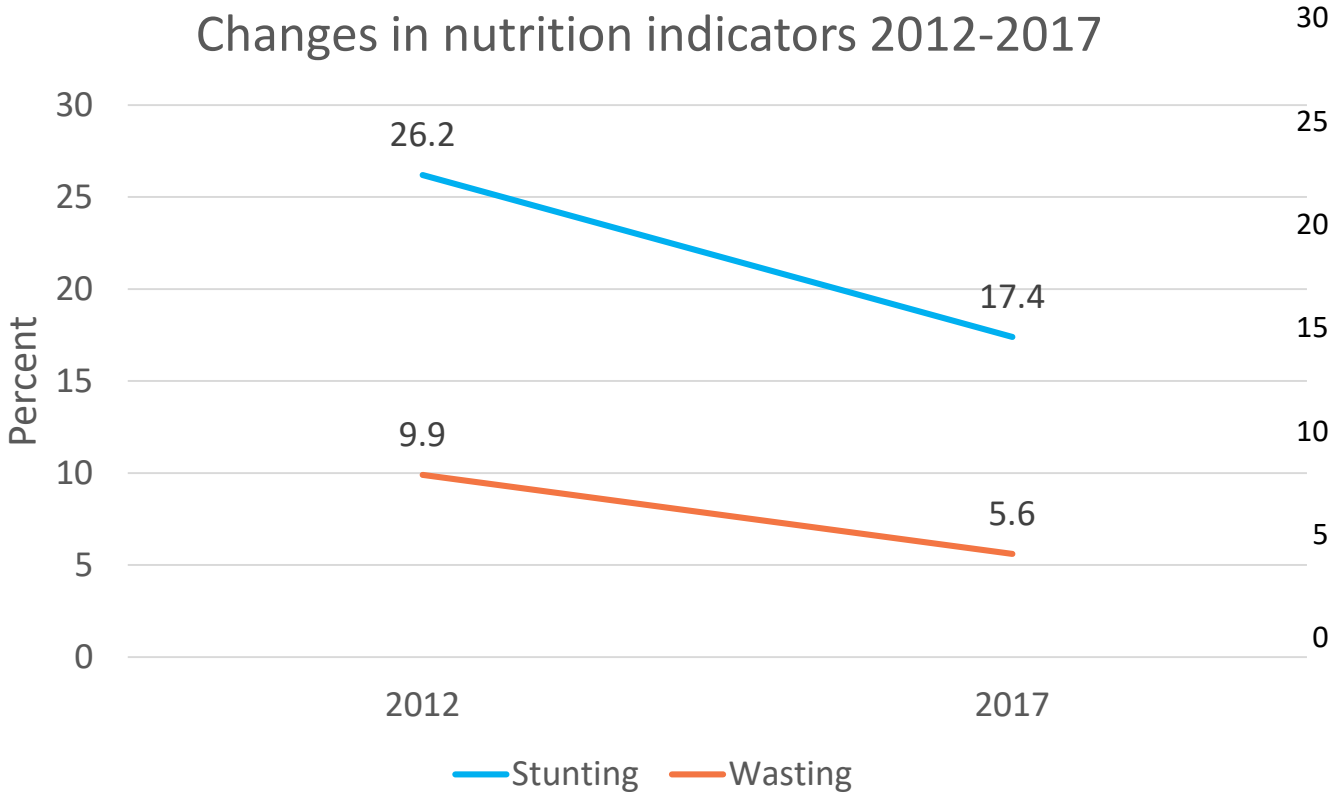
…however, compared with the region, infant mortality is still high

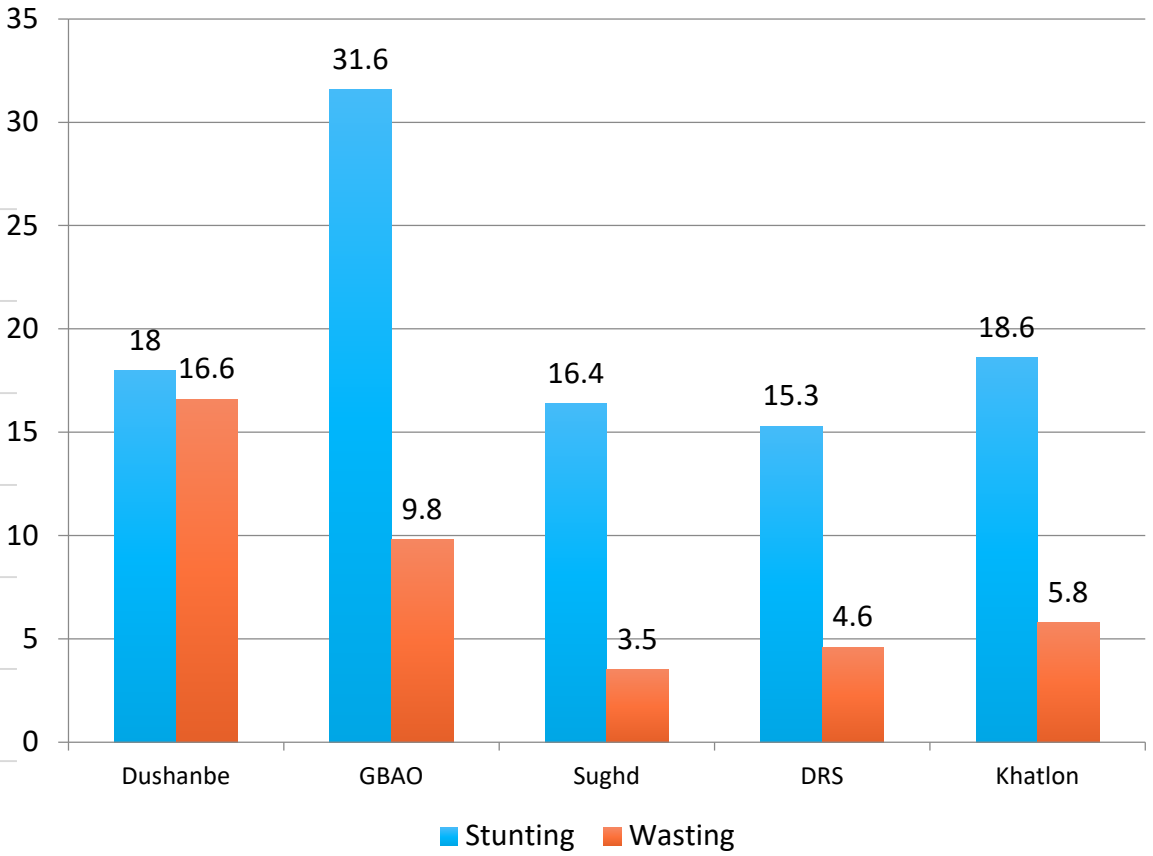


Infant mortality: **highest** among CIS countries

Data source: World Bank

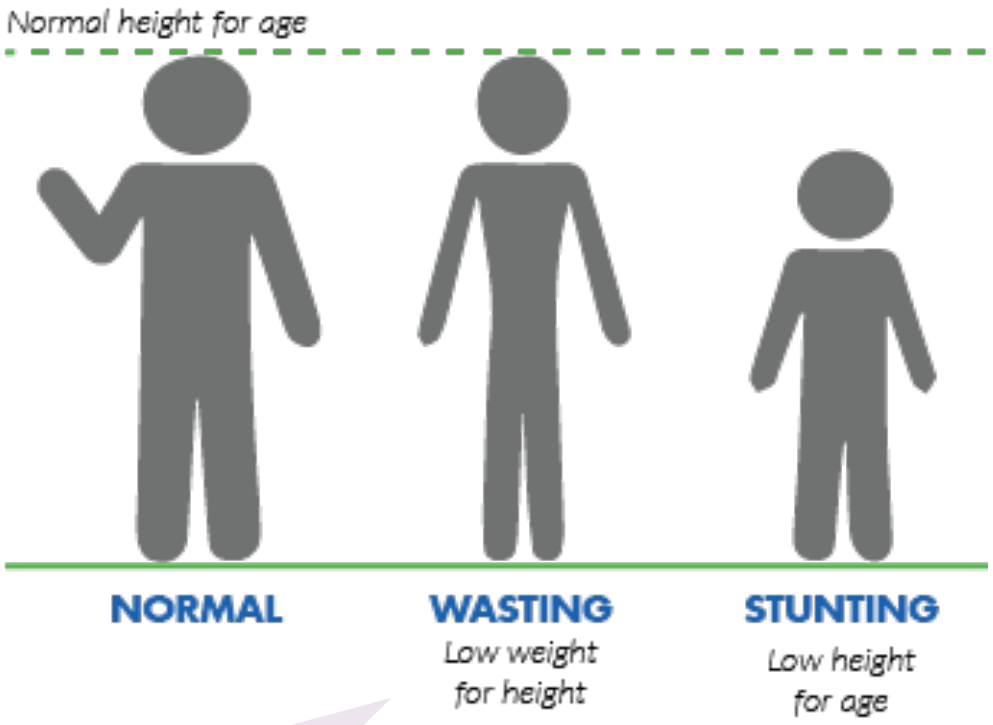
Malnutrition has improved, but still high and picture varies by region





Tajikistan has the highest rate of stunting of any country in Europe and Central Asia

What is malnutrition?



Wasting (acute malnutrition)

- Indicates recent and rapid weight loss, usually as a result of acute starvation or disease
- Can cause increased susceptibility to disease, increased severity of illness, and increased risk for death

Stunting (chronic malnutrition)

- Best indicator of long-term, cumulative effects of undernutrition
- Can have irreversible impacts on cognitive development and reduced productivity later in life

What are the causes of malnutrition?

Inadequate access to food

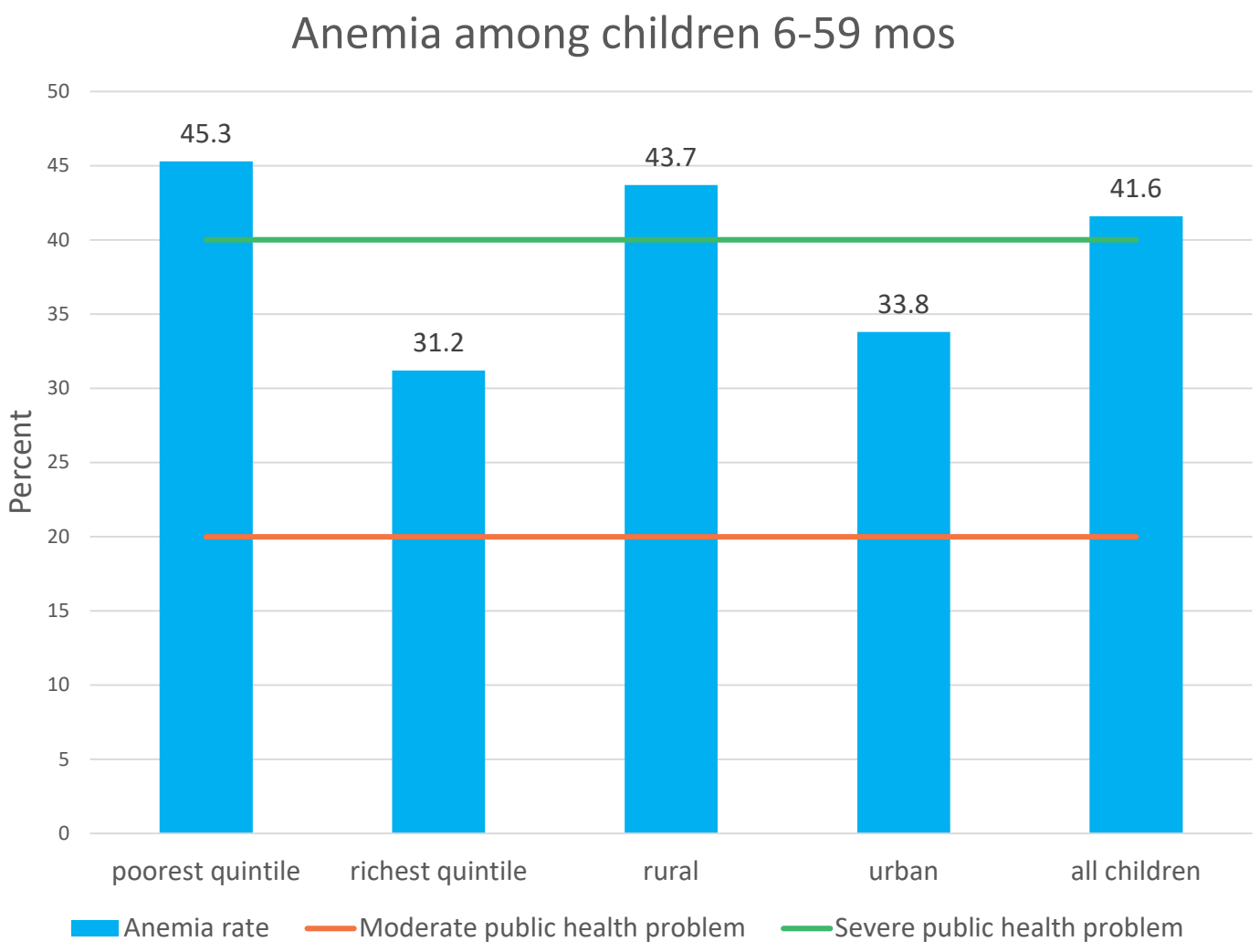
Unhealthy environment and insufficient health services

Inadequate care for children and women

Anemia rates are high, especially among poor and rural children

- Can cause impaired cognitive development, stunted growth, and increased morbidity from infectious diseases

- Maternal anemia is also high at 41.6%
  - Urban-rural and income differences are minimal
  - >55% of women aged 15-19 did not take any iron supplements during pregnancy

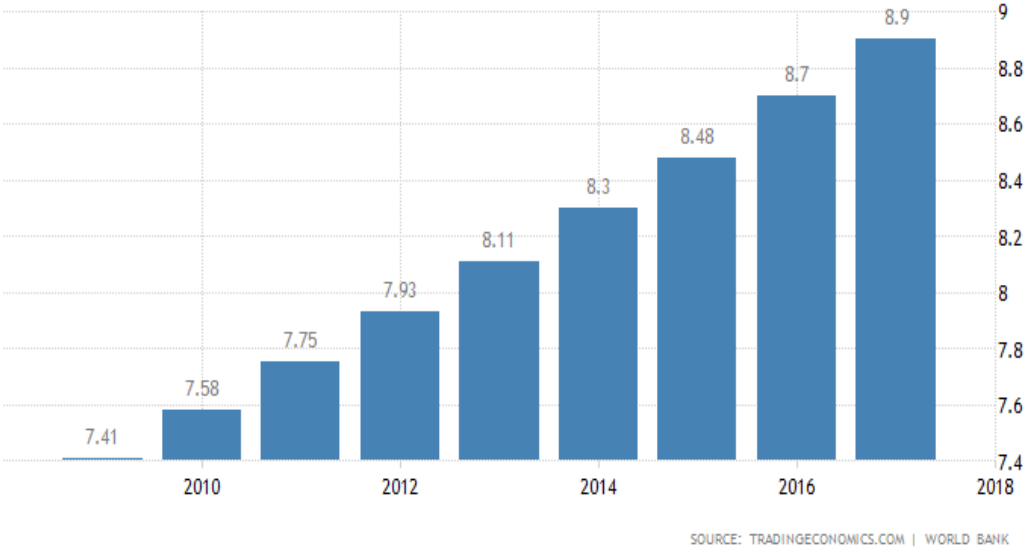


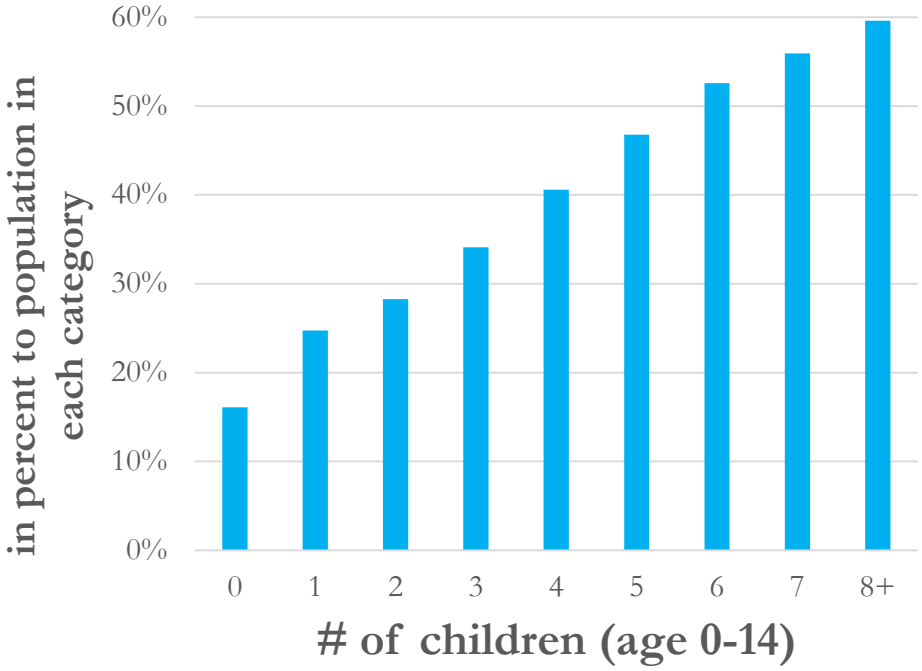
DHS 2017

Parents may struggle to invest fully in the development of each child in very large families

Tajikistan has a very high population growth rate (2.1%)

Only half of the total demand for family planning is satisfied through the use of modern contraception





National official poverty rates increase linearly with the number of children in the household

What are the causes of malnutrition?

Inadequate access to food

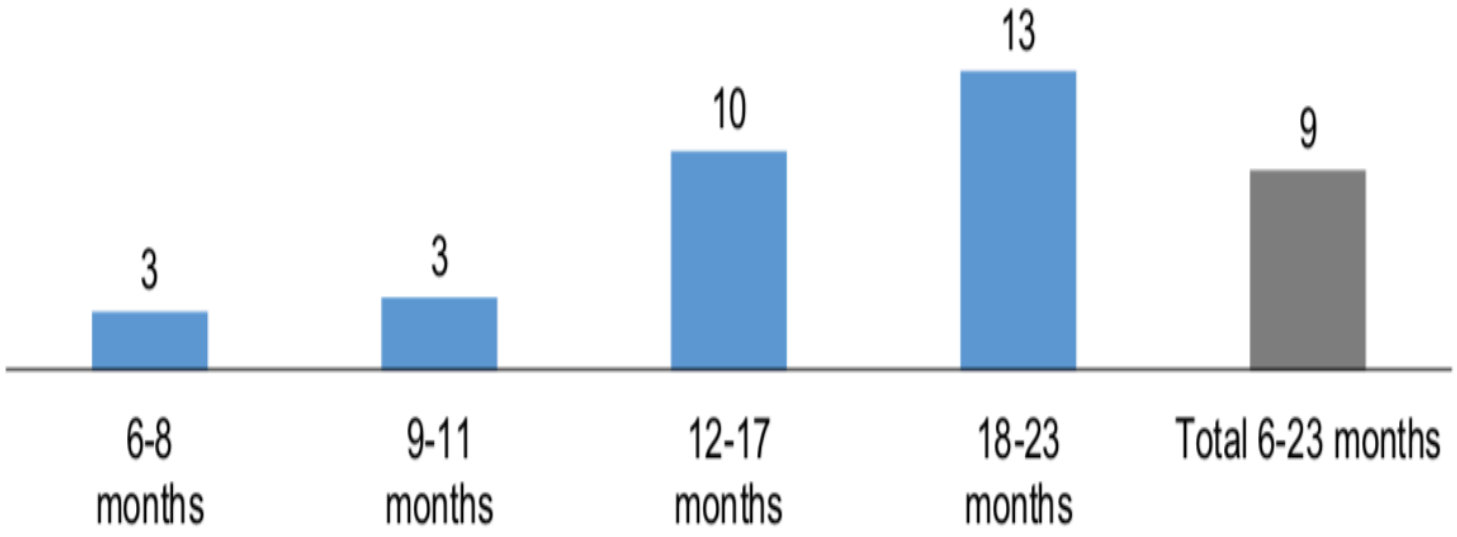
Unhealthy environment and insufficient health services

Inadequate care for children and women

Child feeding practices are insufficient

Inadequate care for children and women

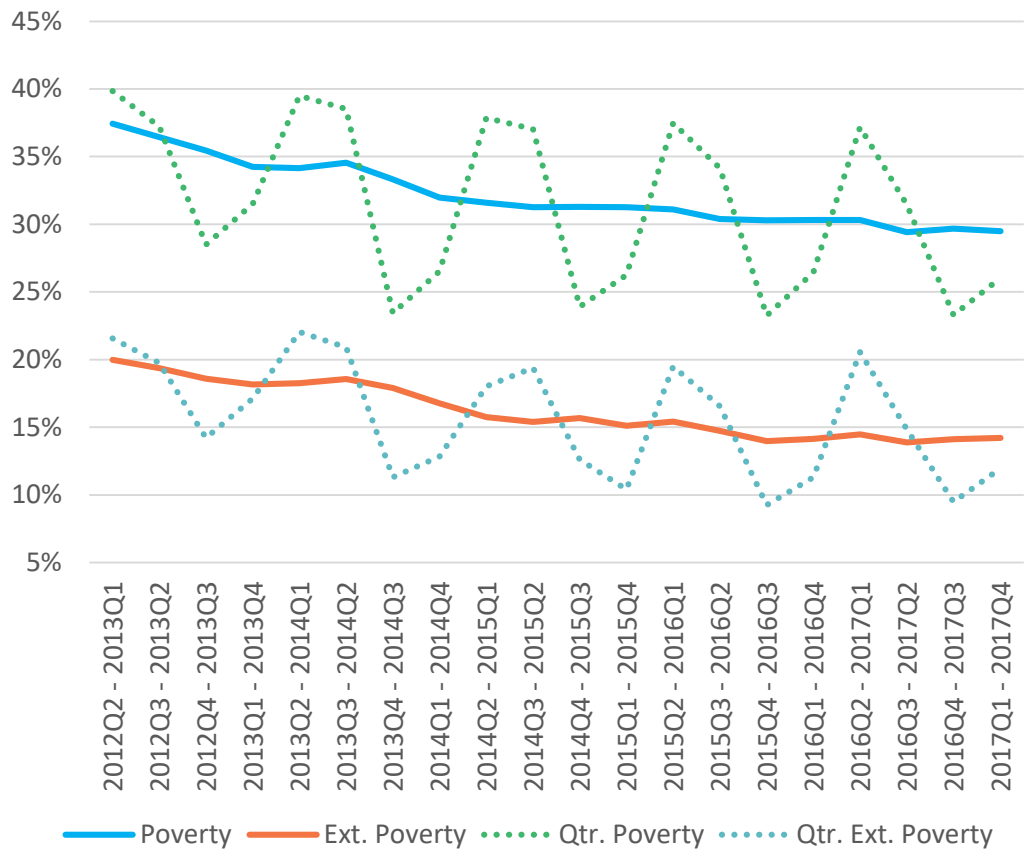
- Only 36% of the infants under age 6 months are exclusively breastfed
- Complementary foods are introduced late and are of poor quality
- Low percentage of children consuming minimum acceptable diet by age



Malnutrition related to seasonal poverty and resulting lack of food…

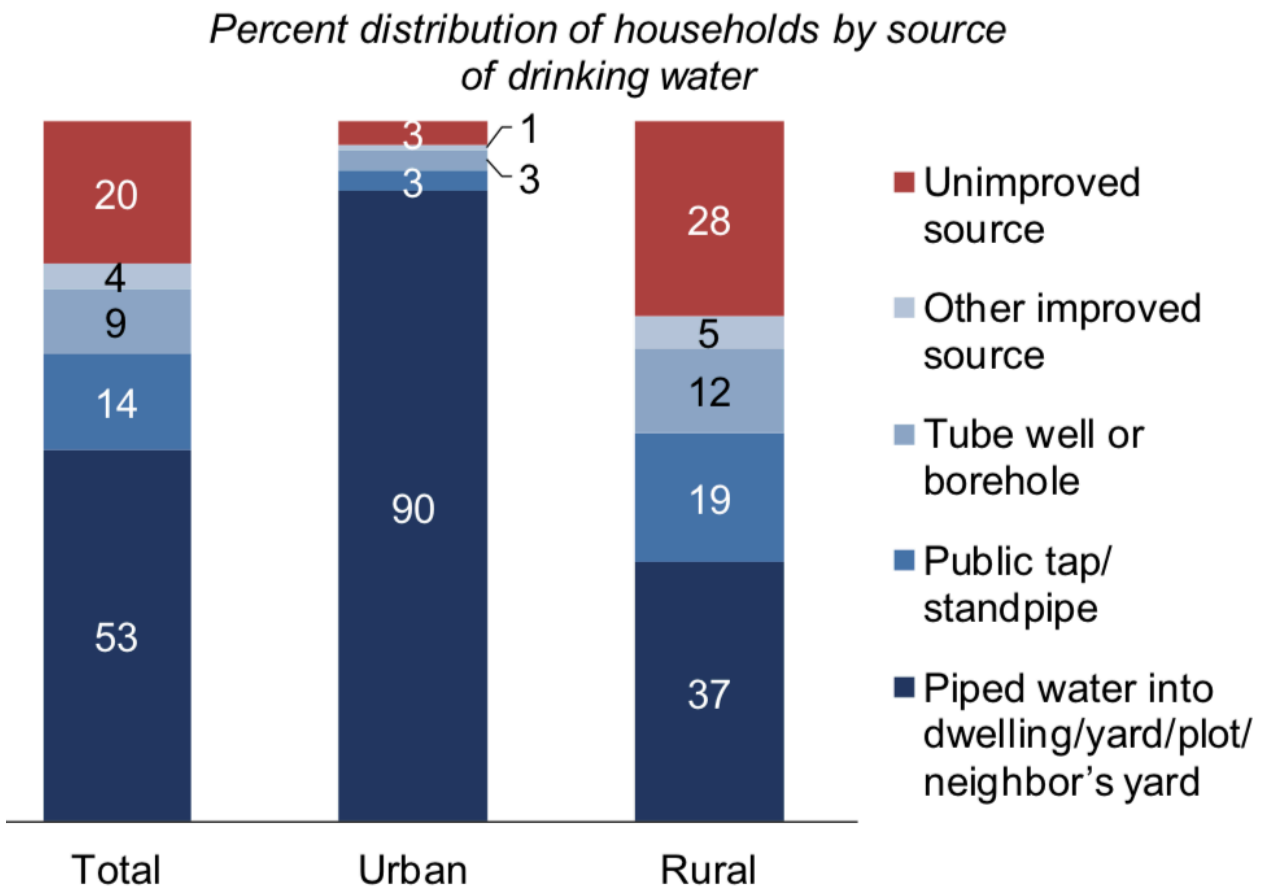
Inadequate access to food

Half the population fall into poverty at least once a year



…and access to clean water and good sanitation

Unhealthy environment and insufficient health services

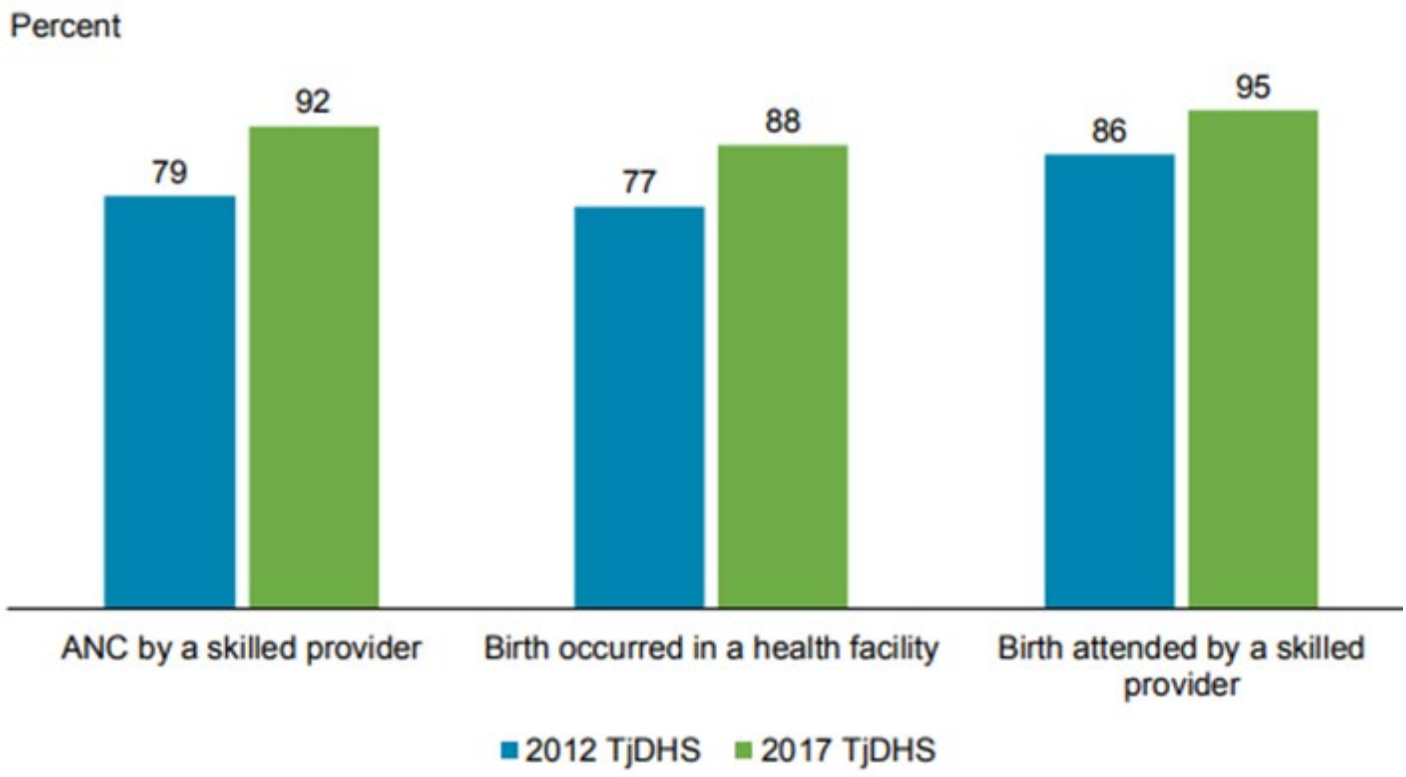


A child living in a household with an adequate water and sanitation environment has a lower relative risk of stunting of about **32%**

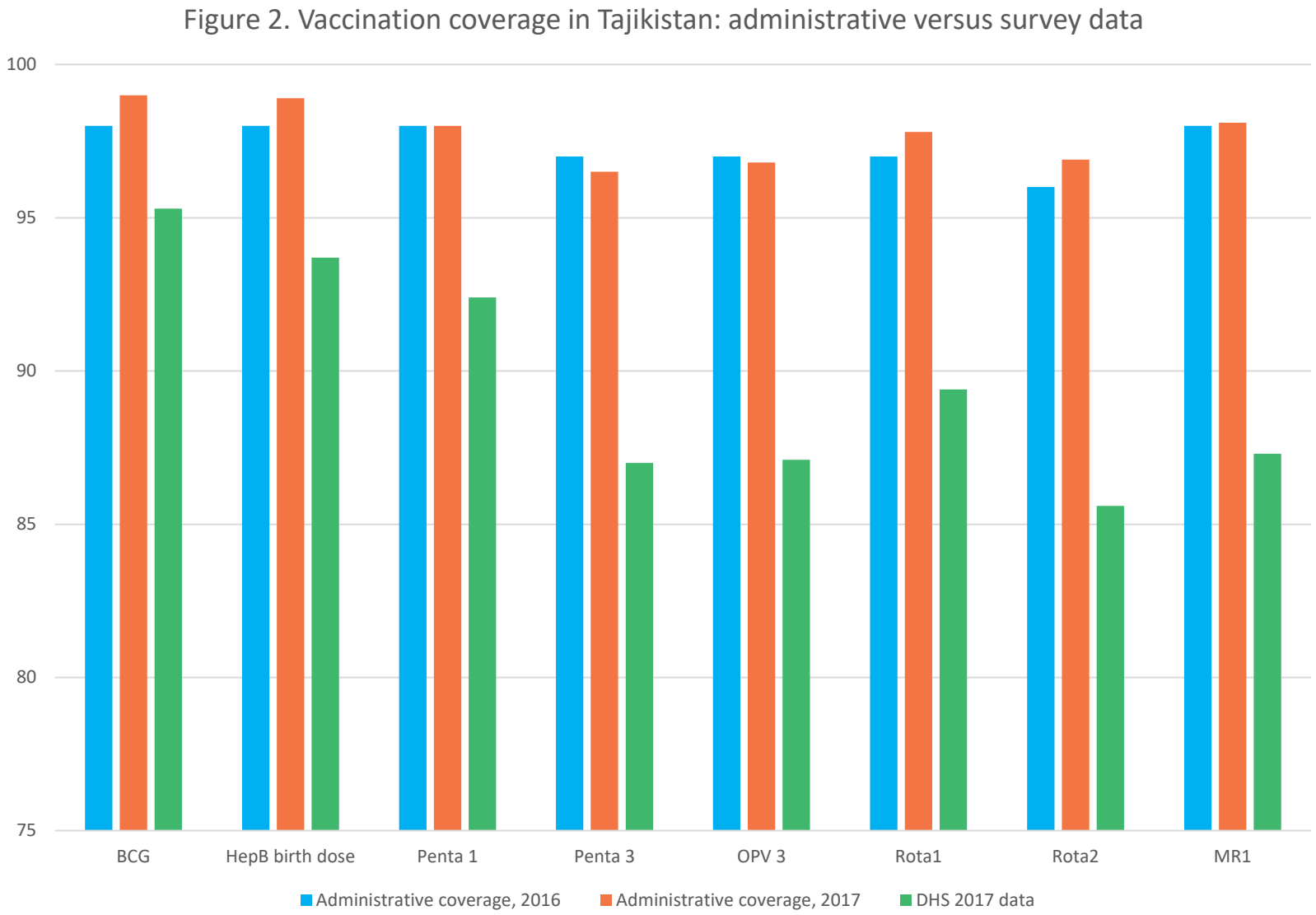
Improvement in antenatal care and attended delivery, but inequities remain and postnatal care uncertain

Unhealthy environment and insufficient health services

- **ANTENATAL**
- **BIRTH**
- **POSTNATAL**
  - Postnatal visits for mothers at home, but coverage and quality uncertain
  - Does this include postnatal mental health?



Estimates of immunization coverage vary widely by source of data



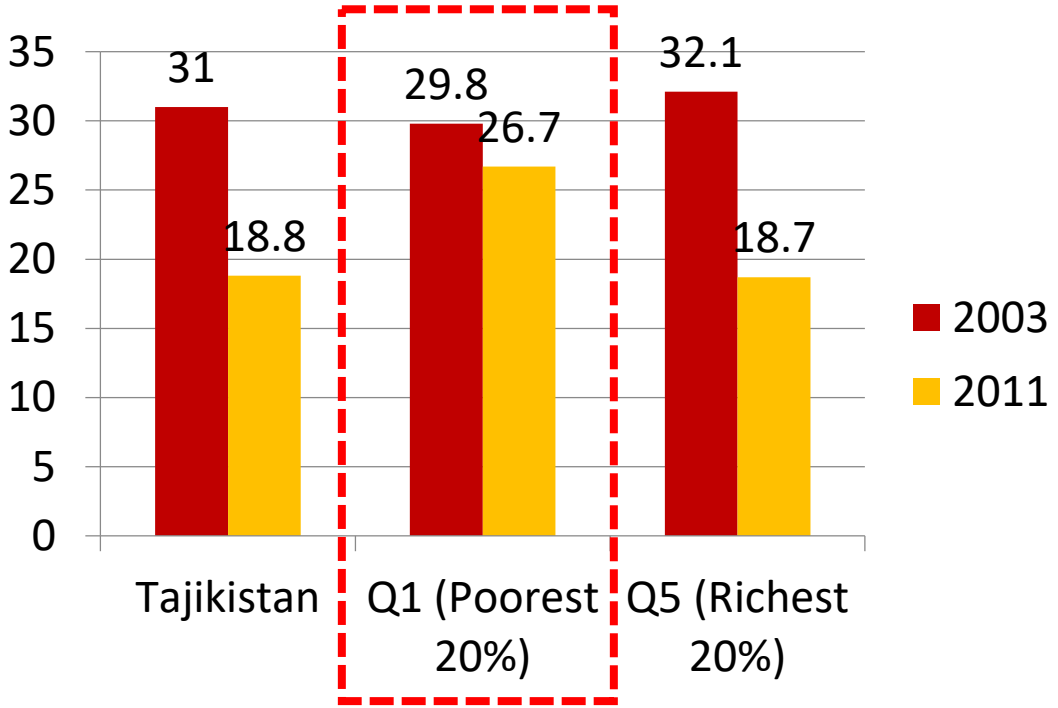
Basic Benefits Package provides some support, but only for the youngest children…

- Some free services, but currently only children under the age of 1 are covered
- More could be done to support preventative care, particularly for young children's nutrition, micronutrient supplementation and child development

Photo: UNICEF

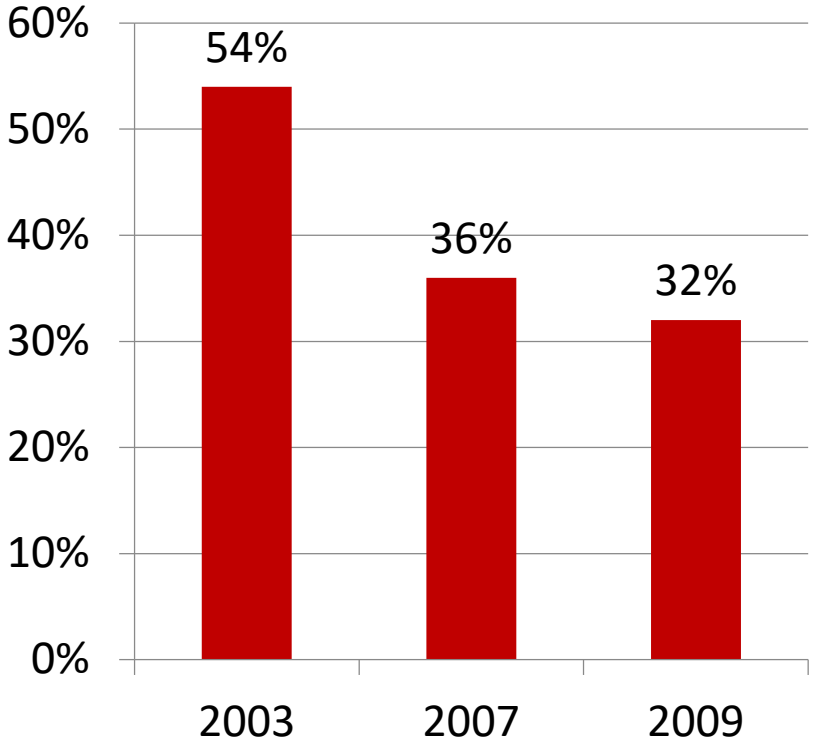
…and many parents struggle to access available services due to financial barriers

Catastrophic payments have declined but persist among the poor



Source: World Bank Public Expenditure Review. Based on TLSS 2003, 2007, and 2009; Panorama Household Survey 2011
Note: Threshold, more than 40% of nonfood consumption

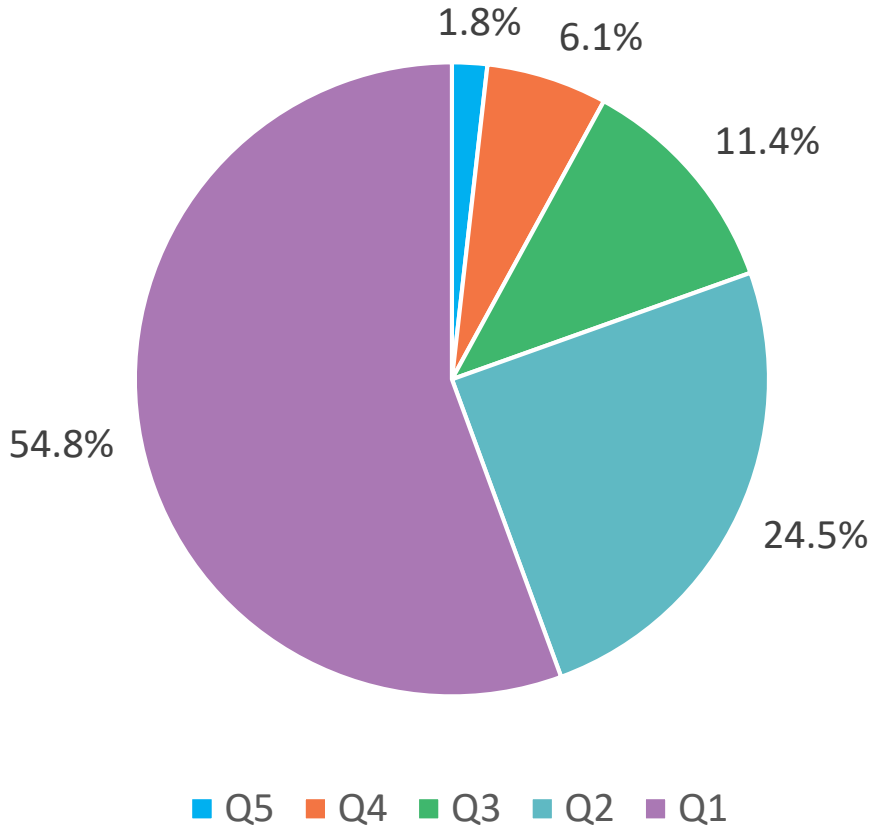
Many do not seek care when needed



Financial reasons represent the major cause for not seeking care, even more so among the poorest (data not shown)

Some efforts exist to reduce these barriers, but not yet well targeted for ECD

- Only 55 percent of social assistance goes to the poorest quintile of households



Targeted Social Assistance

- Unconditional cash transfer for poor families
- Piloted in 2011, intends to reach over one million beneficiaries by the end of 2019
- Beneficiaries quality for 50% reduction in medical expenses
- No specific design elements for children

…and workforce challenges further jeopardize child development

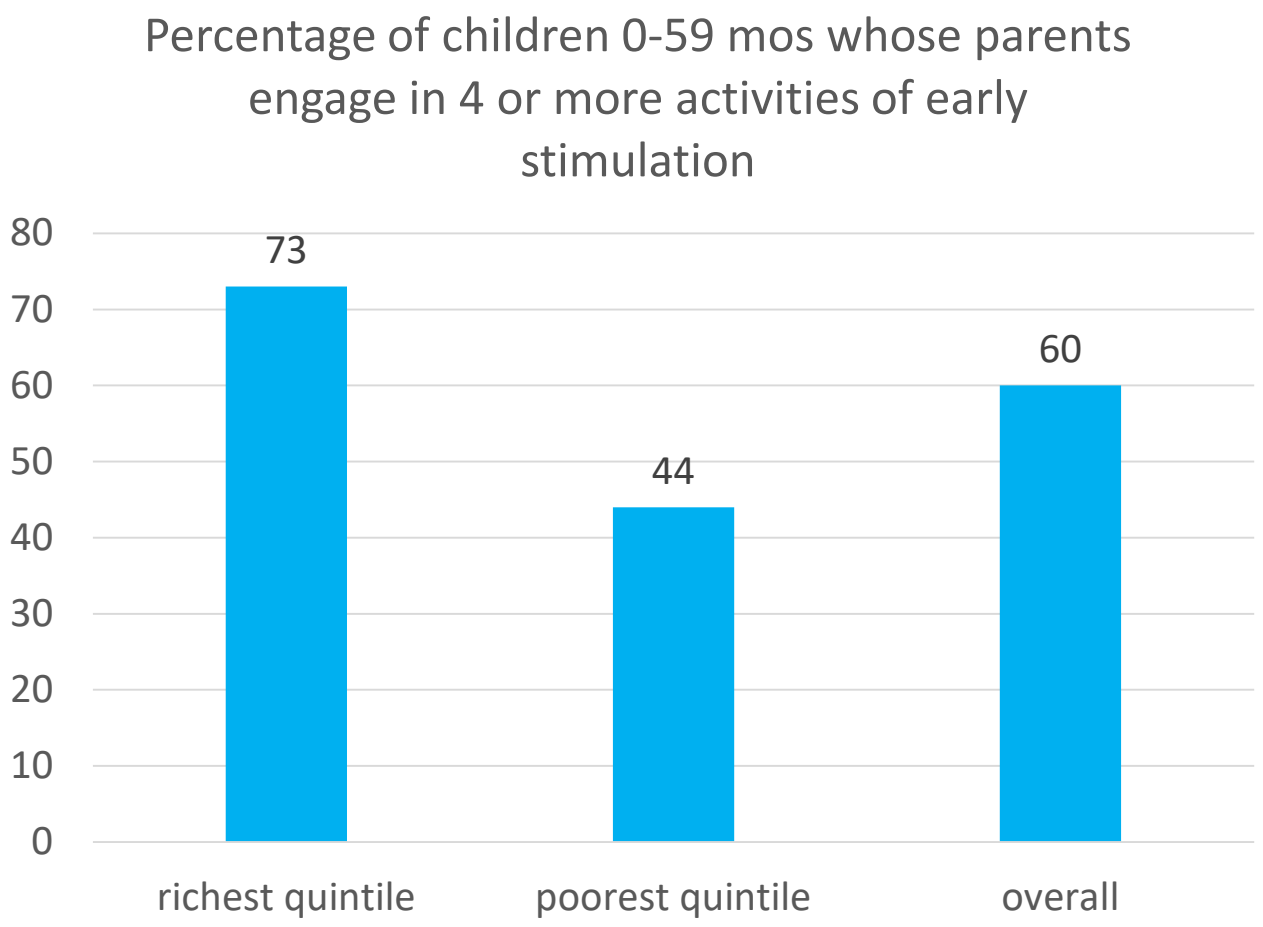
- Limited information ECD workforce broadly speaking, but some challenges identified in health workforce:
  - Not enough health staff overall and not well distributed across regions
  - Skills gaps and limitations
  - Lack of resources to equip staff to provide quality services
  - Migration of skilled health staff to neighboring countries
  - **Shortage of qualified health staff at PHC institutions leads to poor service quality, and stops us being able to reverse poor early childhood indicators**

European Observatory on Health Systems and Policies Health System Review, 2016

Child development is more than meeting a child's physical needs

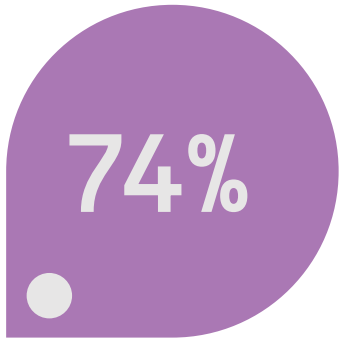
- ECD is physical, ***cognitive, linguistic, and socio-emotional*** development
- Children need ongoing, attentive, and responsive interaction with a parent or other caregiver

Data is limited, but early stimulation seems low, particularly among the poor…



…and violent discipline has been common in the past…

Children aged 2-14 have experienced one form of psychological or physical punishment



- Violent discipline leads to poor socio-emotional development
  - Getting along well with other children
  - Kicking, biting or hitting other children or adults
  - Getting distracted easily
- And greater likelihood of perpetuating violence
- Domestic violence considered a strong factor contributing to high rate of suicide among adolescents

Strong foundation for child development in law and policy…

- Child development requires foundation in law and policy
- No specific ECD-related policy or strategy, but various aspects of ECD policy in existing laws and regulations
- More cohesive and multi-sectoral approach to nutrition has begun, but remains incomplete
- Links between policies not explicit and some key gaps remain (e.g. food fortification law)

…with specific interventions supported by law, although not comprehensive

- Parental leave protected in law, and is comparable to other countries in the region
- Overall registration of births as statutory requirement, but inequities that need investigation
  - Critical to ensuring a child will have access to the rights and benefits of citizenship
  - 96% of children under-five are registered with civil authorities at birth
    - Up from 88% in 2012
  - 91% of children under-5 have a birth certificate as proof of birth registration
    - But only 86% in poorest quintile

What is the government vision for ECD and governance structure?

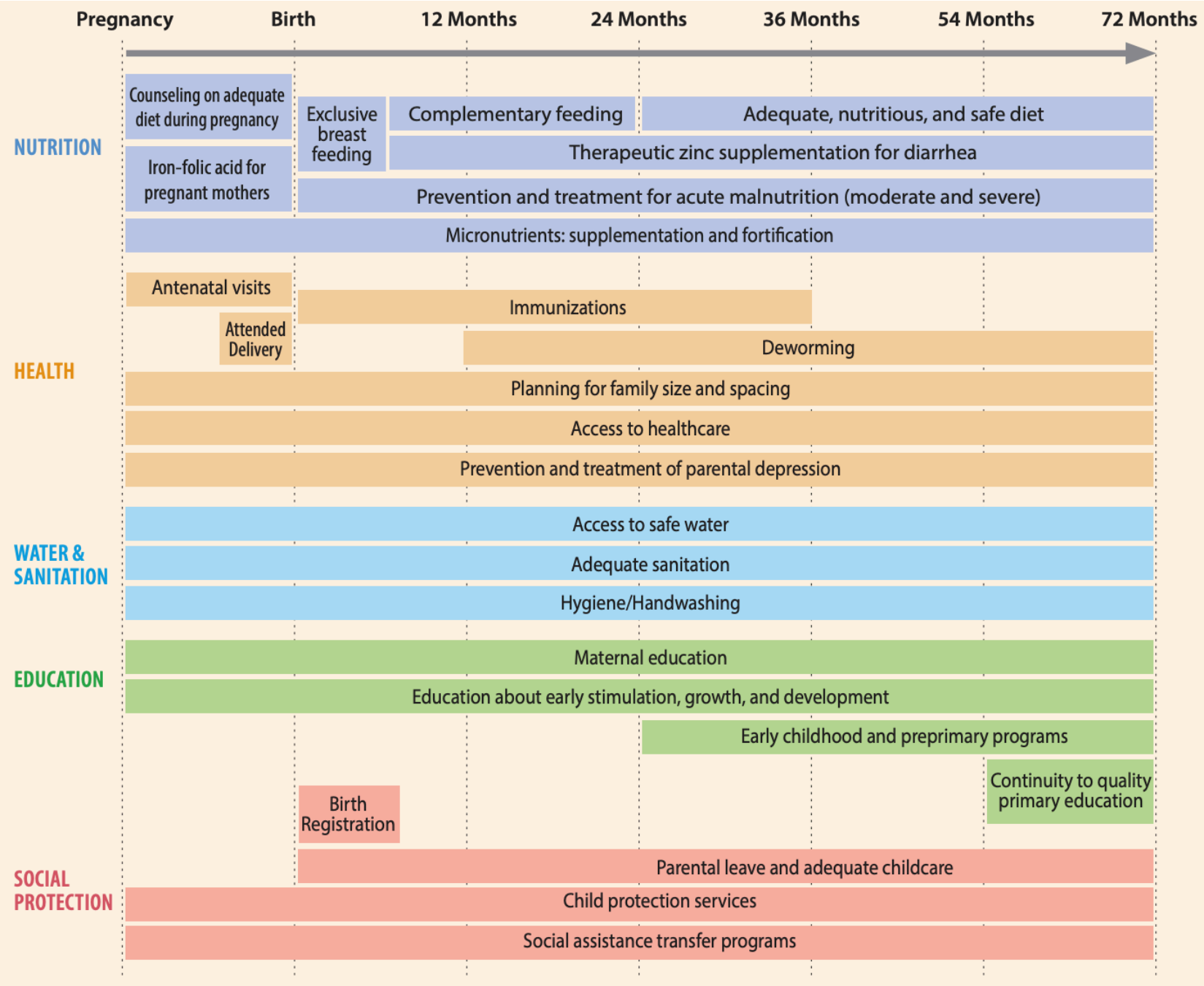
- Growing political commitment to ECD
- Current national priorities include
  - Improved access to quality health services
  - Improved nutrition status of children
  - Increased pre-school services for children aged 3-6
- Currently no established coordination structure or institutional anchor for ECD
- Tajikistan is not unique in facing this challenge

Recap: multiple **sectors** are needed to improve early childhood development

Nutrition | Social Protection | Health | Education | Water and Sanitation

A COORDINATED APPROACH

Many of these interventions are in place in Tajikistan across sectors and the ECD period, but not all are working optimally



Thank you