"Early Childhood Development Strategy for Forest Riverine Communities"

The project ‘Riverine Early Childhood’ (PIR in Portuguese) is a joint initiative of Amazonas Sustainable Foundation (FAS), the State Department of Health Amazon (SUSAM) and the Institute for the Development of Social Investment (IDIS) that aims at fostering early childhood development of children living in riverine communities along the Amazon Rivers.

The strategy is enabling a fruitful environment for childhood development by applying a service model based on home visits provided by local health agents. This service model has a holistic approach to the child wellbeing and covers issues such as health, nutrition, home accidents, psychological stimulation and the importance of playing. In addition, this model is properly adapted to local particularities.

The project also has a component of engaging local leaders to support community health agents as a strategy to involve these agents (reducing their turnover rate) and then facilitating their access to houses for several reasons.

In order to compare and assess project’s effectiveness, it was carried out a baseline study that indicate (i) most of the agents knew or comprehend less than 50% of the public policies related to early childhood, (ii) and the less than 50% of the parents used to interact and play with their sons and daughter on a regular basis.

In 2012-2013, the pilot phase was implemented in 18 communities, at the Rio Negro Sustainable Development Reserve, with 250 children, 38 pregnant women, 16 community health agents, and 3 local supervisors.

Initial results indicate that a high rate of acceptance of the model by both the agents and families. Majority of the agents (75%) were able to fully implement their visit schedule and perform the proposed activity with the family just after the training. Vast majority of the families (90%) evaluated visits and homecare provided as ‘excellent’ or ‘good’ after the first year. The maternal mortality was decreased close to zero and infant mortality was reduced in 66%. There was also a significant reduction on diarrhea and an expressive increase in immunization.

The stimulation component is also indicating good results. In 2012, none of the families had the routine of reading or telling tales to their children. Nowadays one third of families do it on regular basis.

The results indicate that it is possible to implement a cost effective early childhood policy for low demographic density and isolated areas, such as within the Amazon.
Moreover, local community health agents are an efficient stakeholder to implement such model.