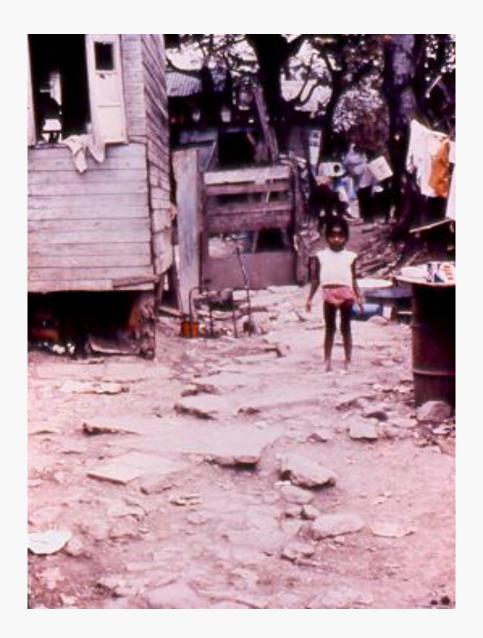
Early child development in developing countries

the role of nutrition and stimulation

S Grantham-McGregor Centre for International Health and Development Institute of Child Health University College London



Ackowledgements

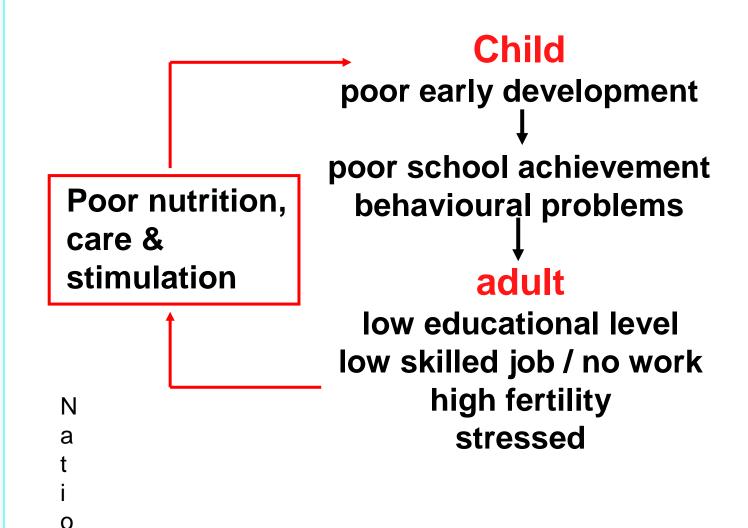
Jamaica

- S Walker, S Chang, C Powell,
- H henningham, J Meeks Gardner

Bangladesh

J Hamadani, F Tofail, S Huda

Implications: Intergenerational transmission of poverty



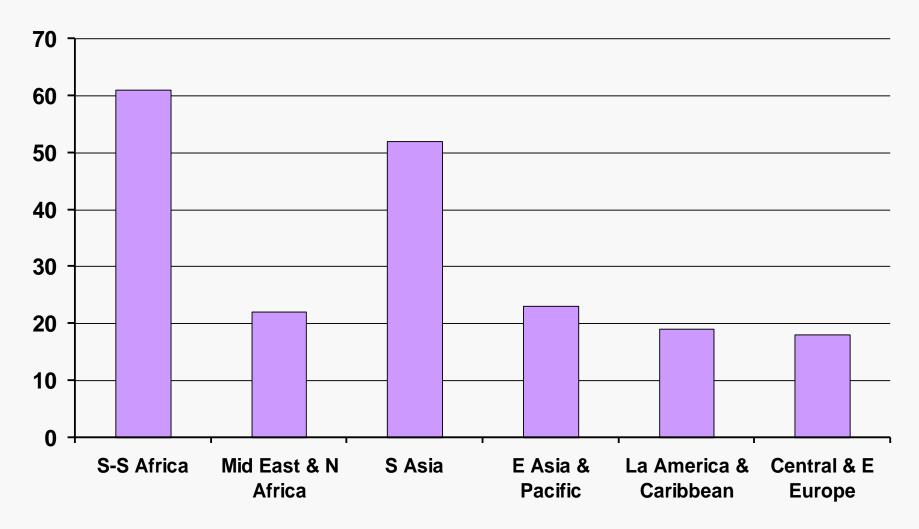
Focus on early childhood

- Sensitive period when experience has maximum effect on brain development (conception- 5 yrs)
- Effects of insults and interventions can be lasting
- Ability on entry → school progress → productivity
- Early interventions more cost effective than later

The Problem

 > 200 million children < 5years in developing countries are failing to reach their potential in cognitive and socio-emotional development

% of disadvantaged children <5yrs by region



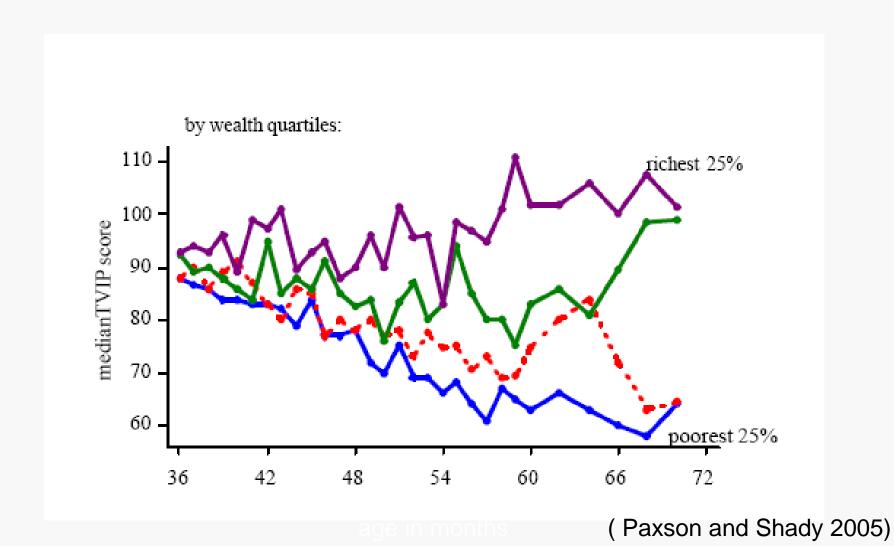
Grantham-McGregor et al 2007;Lancet series

Poverty

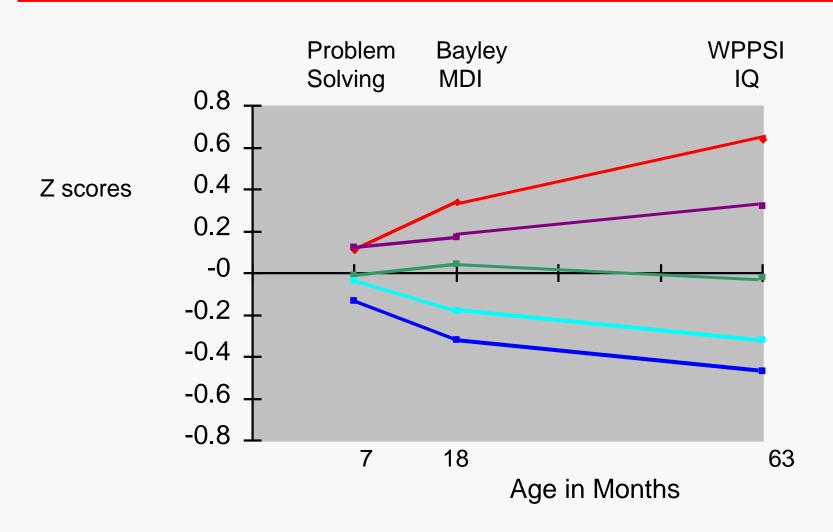


>60 X-sectional studies showed associations with wealth and school achievement or cognition

Cumulative Effects: Vocabulary scores by SES quartiles in 3 to 6 yr old children in Equador



Timing of cognitve gap: Mental development by wealth quintiles at birth in 1,579 children in rural Bangladesh



 What is the role of nutrition and lack of stimulation in decline in developmental levels in the first 5 years?

Prevalence of nutritional deficits in children <5 years in developing countries 9 (Black et al 2008; UNICEF 2110)

Stunting = 192.5 million (34%)

Wasting = 73.6 million (13%)

LBW =16% - IUGR = 11%

Iron deficiency anaemia = 158.6 million (28%)

Iodine deficiency ?35% of total population

Intra-uterine growth restriction (11% of births)



Consistent evidence for poorer development up to age 3 years.

Limited evidence from developing countries at later ages

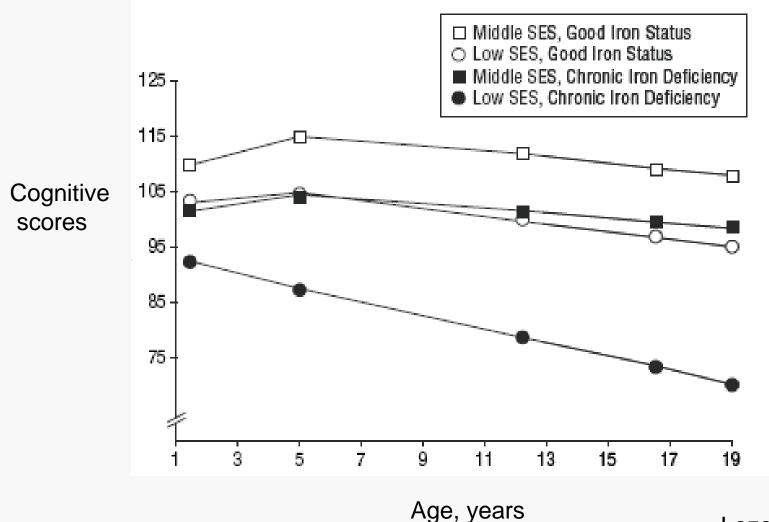
Iron deficiency anaemia 158.6 million (28%)

 8 longitudinal studies of anaemia in early childhood followed to 4 – 19 years

All but one showed sustained deficits

Cantwell 1974, Palti 1983, Lozoff 2000, De Andraca1991, Wasserman 1994, Dommergues 1989, Hurtado 1999, Sherriff 2001

Longest follow-up: Cognitive scores to 19 years by iron status and SES, Costa Rica



Lozoff et al 2007

8 robust RCTs with iron supplementation in children <3 years (lasting 2 months)

• 6/8 benefited motor development

2/7 benefited mental development

7 RCTs with multiple micronutrients

• 5/7 benefited motor development

• 1/3 benefited mental development (not randomised)

Black 2004, Olney 2006, Abdu-Afarwuah 2007, Faber 2005, Dhingra 2004, Katz 2010, Chen 2010

Effects of multiple micronutrient & iron supplementation

- Usually benefits motor development
- Insufficient evidence for effect on mental development

treatment duration insufficient OR irremediable?

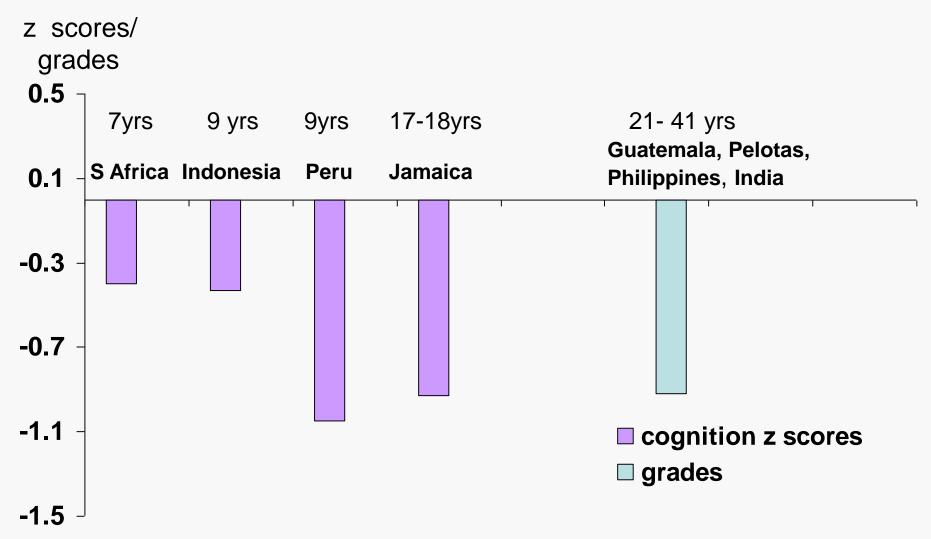
 Insufficient evidence to show that multiple micronutrients better than iron alone

Stunting (192.5 million)



- 4 Longitudinal studies up to ≥ 5 years
- 8 longitudinal >5yrs

Effects of stunting (height/age ≤ -2SD) <3yrs on later cognition or grades attained



Comprehensive deficits: Jamaican children stunted before 2 yrs at 17 & 22 yrs

- IQ, cognitve function
- Reading/ maths/ school drop out
- Depression, anxiety, self esteem, hyperactive, attention
- School suspension/ expulsion



9 RCTs of macronutrient supplementation

Pregnancy

Bangladesh

Tofail 2009

Taiwan, Province of China

Joos 1983

Pregnancy + early childhood

Guatemala

Pollitt 1993

Bogota

Waber 1981

Early childhood

Ghana

Adu-Afarwuah 2007

Jamaica

Grantham-McGregor 1991

Indonesia

Pollitt 2000

Indonesia

Husaini 1991

Cali

McKay 1978

No effect

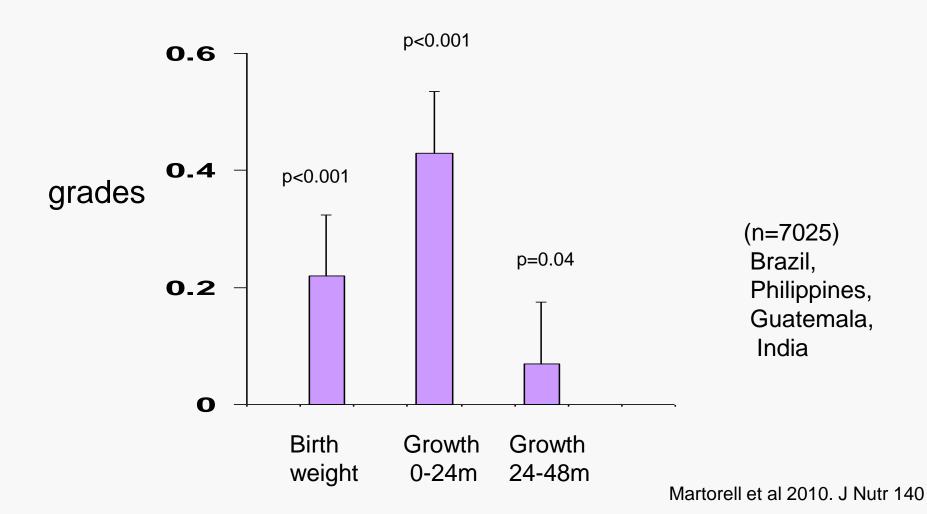
Sustained benefits from supplementation

Timing of supplement (months)	Age of Follow up (years)	Effect
P for 1m Bangladesh	5	_
P+lactation Taiwan, Province of China	1.5	_
P + 6m Bogota	3	-
P + 24m (Guatemala)	32	++
P + 36m (Bogota)	7	?
6-20 for 4m (Indonesia)	8	+/- 1 test
9-24 for 24m Jamaica	17	-
20-60 for 4m Indonesia	8	-
>36 to 84m Guatemala	32	_

Benefits from supplementation in Guatemala age 25-42 years

- Increased wage/hour (males)
 (supplement from birth to 36 months)
- Improved reading comprehension and reasoning (supplement from birth to 24 months)

Timing: Effect (SE) of 1 z-score of birth weight & growth in weight <4 years on grades attained in 4 cohorts, controlling for SES

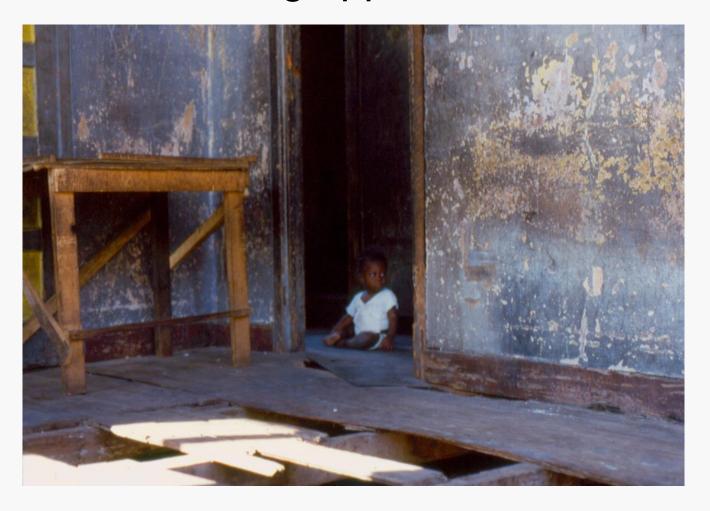


Conclusion from stunting

Undernutrition contributes to the decline in development

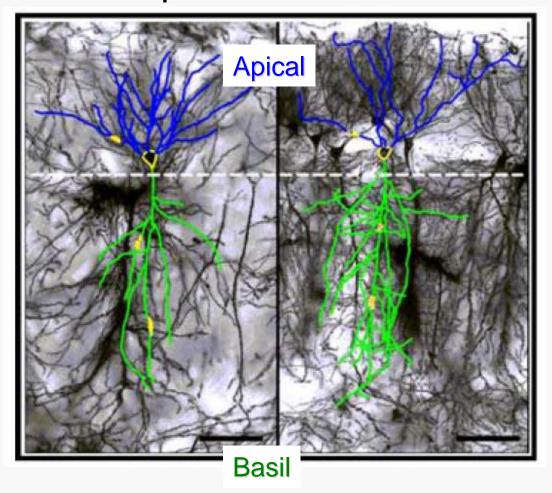
- Most sensitive period 1st 24 months
- Some evidence of a sustained effect of supplementation
- Stunted children will not catch up with food alone

Inadequate cognitive stimulation or learning opportunities



A biological insult

Length of dendrites in hippocampus related to treatment in 1st postnatal week

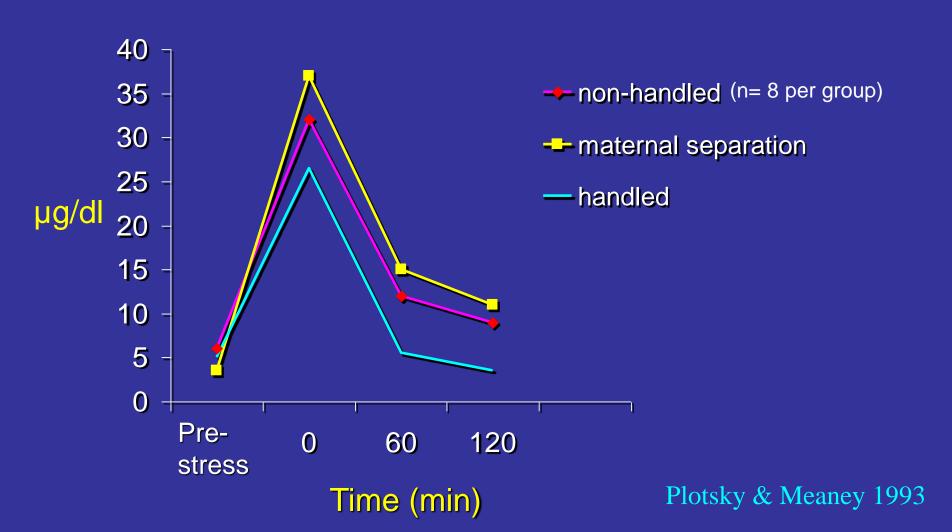


Low licking /grooming

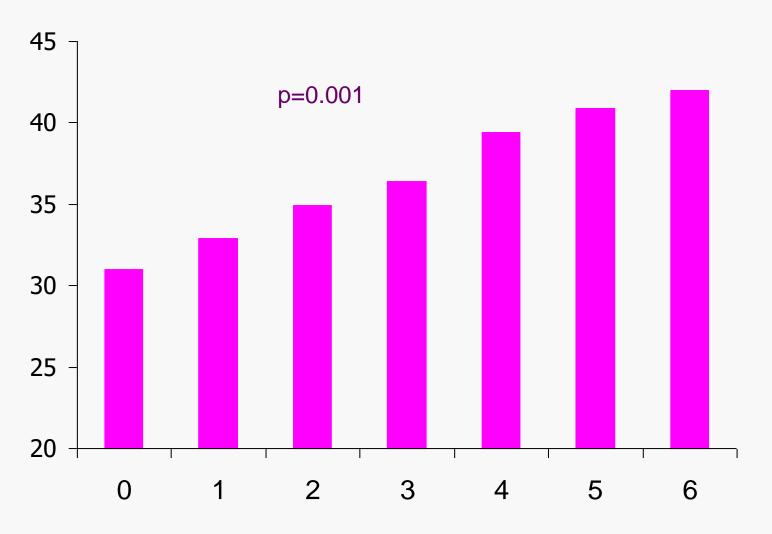
High licking /grooming

Champagne et al J Neurosci. 2008 Jun 4;28(23):6037-45.

Mean Corticosterone Levels Pre & Post Stress in Nonhandled, Handled and Maternally-separated Rats

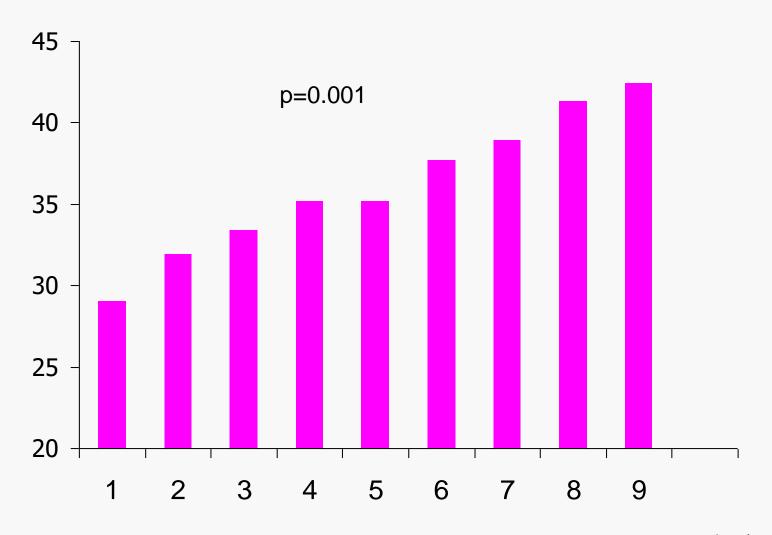


Language comprehension score at 18 months by number of play activities (n=786)



Hamadani, Tofail, 2009

Language comprehension score at 18 months by number of play materials (UNICEF n=786)



Hamadani Tofail

15 of 16 intervention studies providing cognitive stimulation show benefits to child development



Home visiting or centre based approaches

Effect size 0.5-1 SD (Lancet child development series Paper 2)

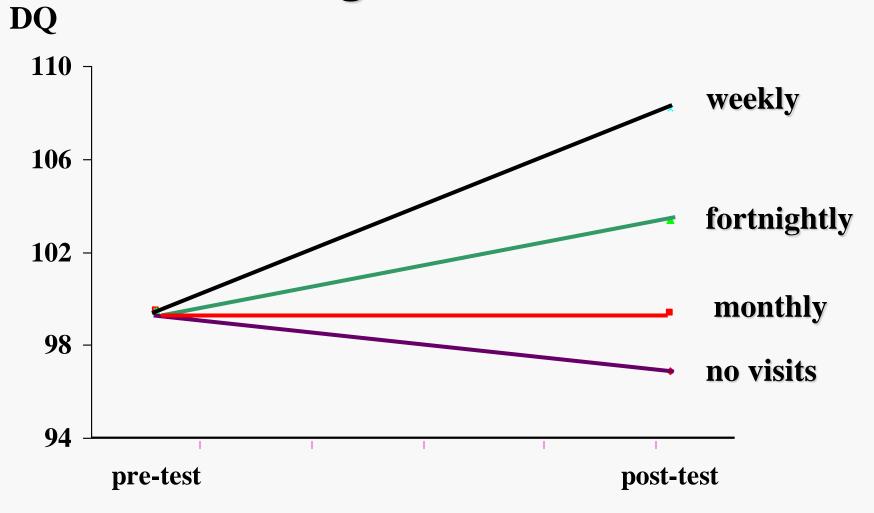


Paraprofessionals

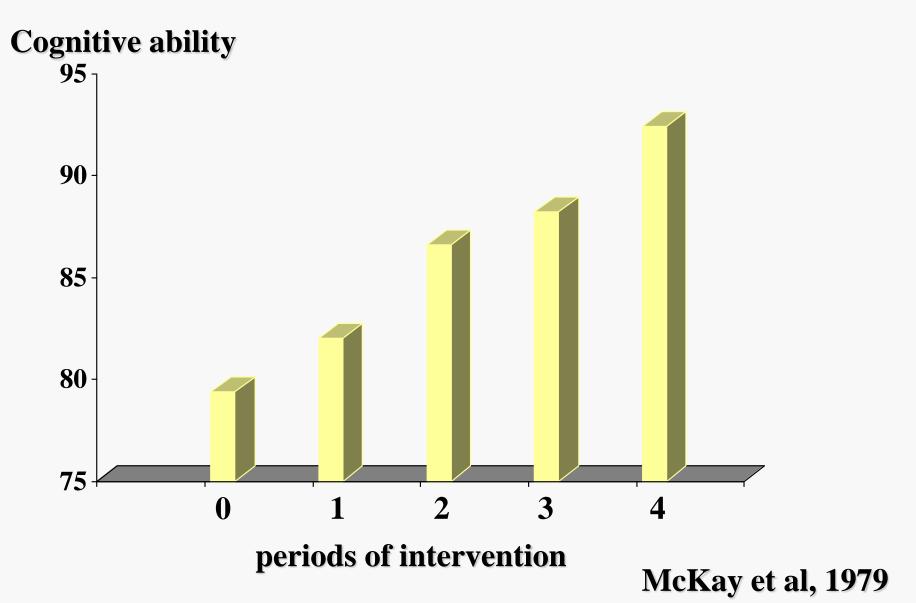




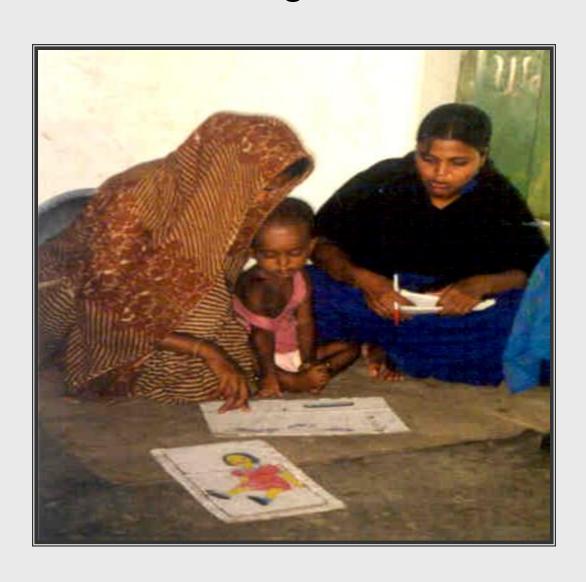
Effects of visiting frequency in disadvantaged children: Jamaica



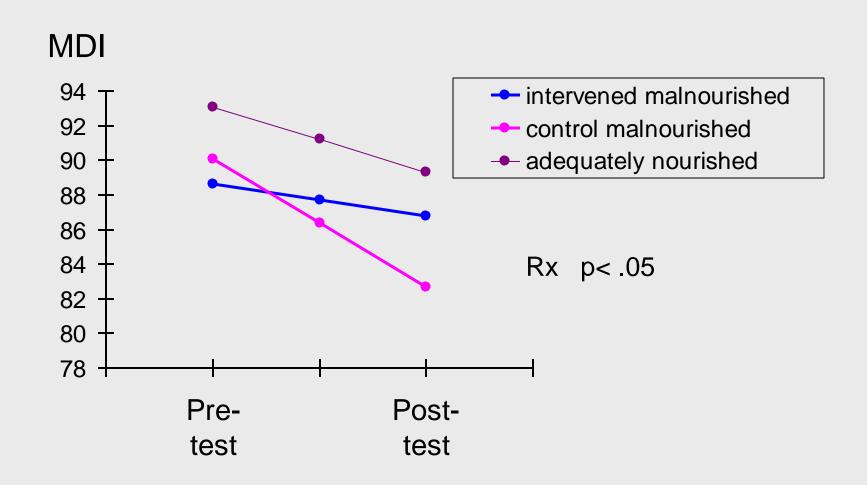
Cognitive ability at 7 years by duration of intervention; Colombia



RCT of 20 Community Nutrition Centres in Bangladesh (Hamadani et al, 2006)



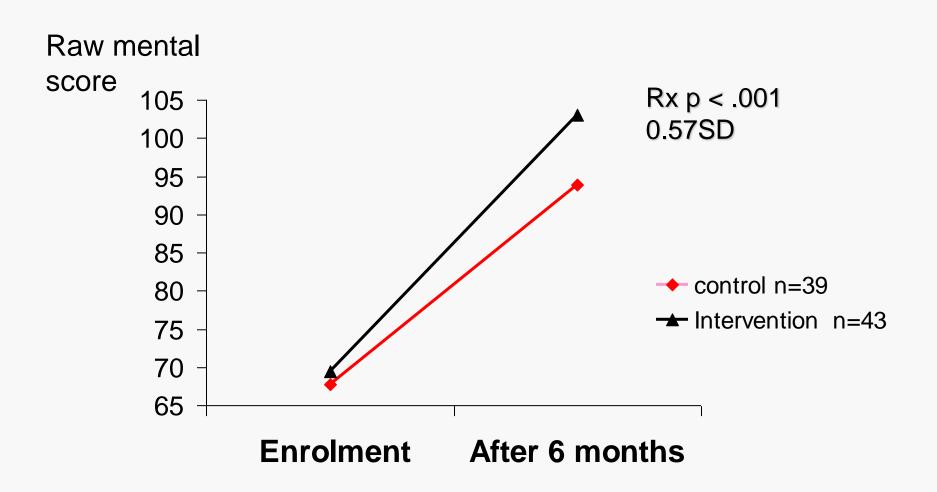
RCT of stimulation with malnourished Bangladeshi infants: Effect on mental development index (MDI)



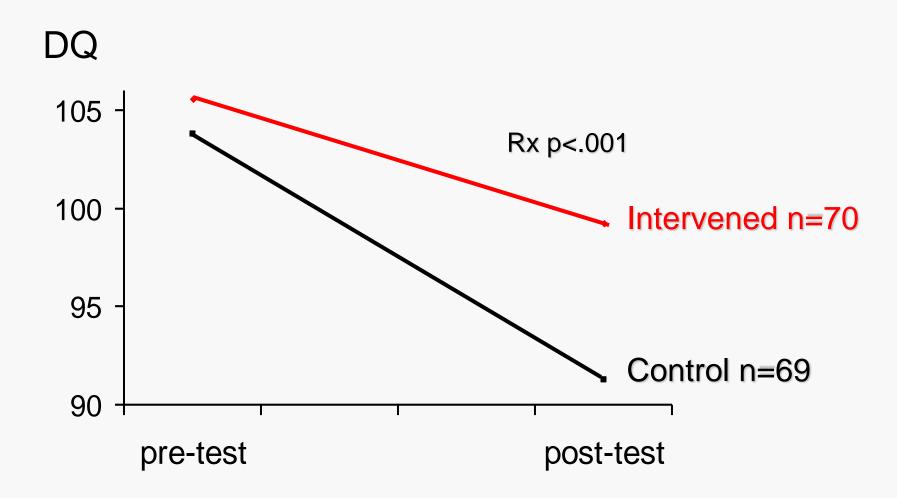
Severely Malnourished Children in Hospital



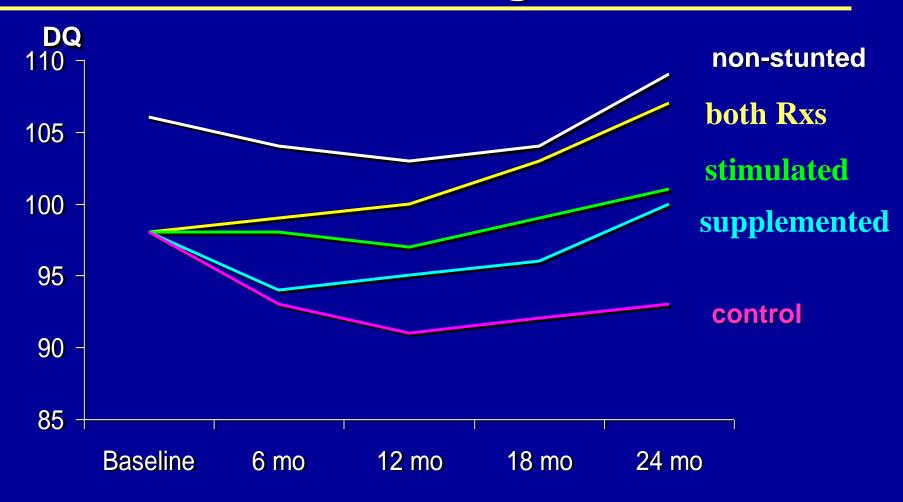
Raw Mental Score at Enrolment & 6 Months After Leaving Hospital in Severely Malnourished Bangladeshi Children



Primary Health Care: Effect of Intervention by PHC Staff on Children's Development Jamaica



Integrated interventions: stunted Jamaican children aged 9-24mths



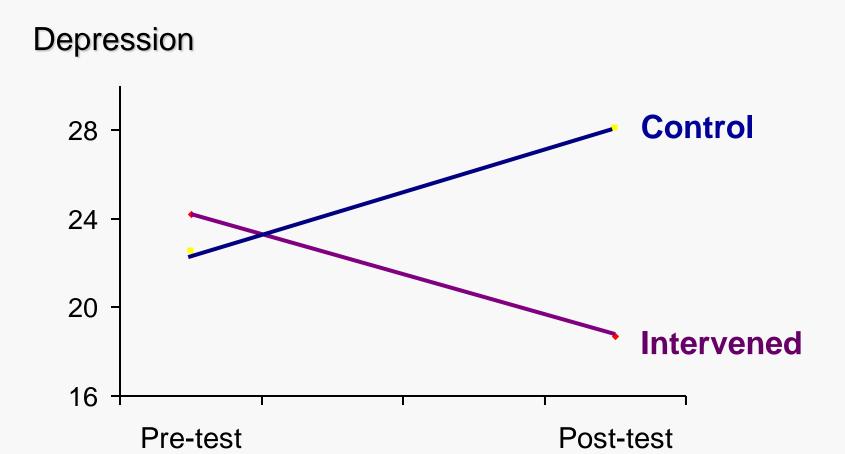
Sustainable stimulation benefits at 17 & 21 years

- Full IQ, verbal and performance IQ
- Reasoning, analogies, vocabulary,
- Reading comprehension & sentence completion
- Depression, anxiety, self esteem,
- Attention deficit, oppositional behavior
- Aggressive behaviour, social inhibition, general knowledge, grades attained, exams passed, depression

Mothers' Benefits

- •Child development and child rearing knowledge Stimulation provided in the home
- •Depression ↓

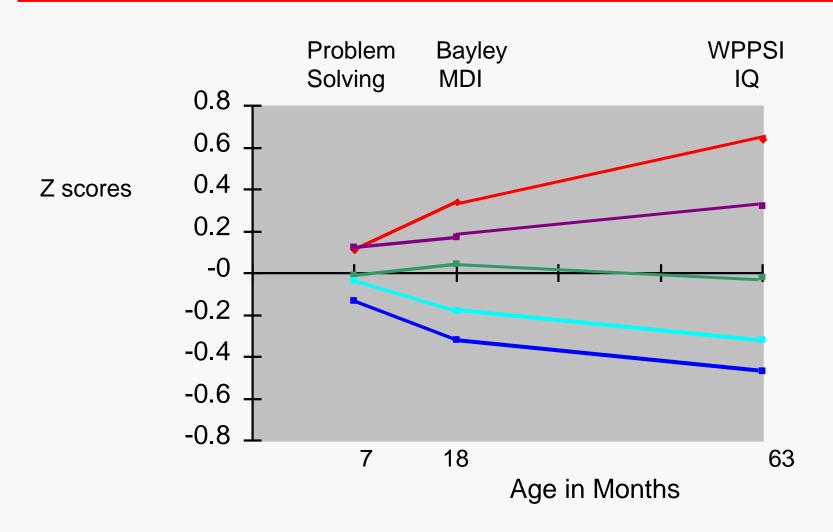
Change in Maternal Depression With Intervention



Summary for Stimulation

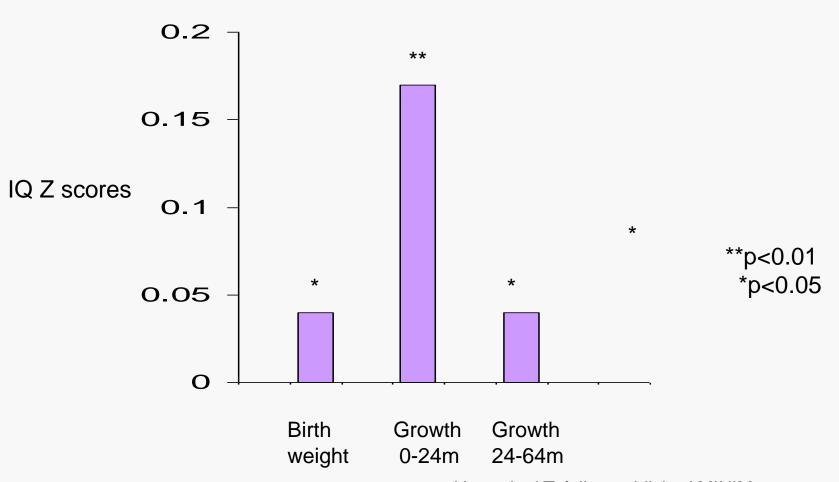
- Nearly all trials have concurrent benefits
- Malnourished/LBW children can improve
- Benefits related to intensity and duration
- Can have sustained & comprehensive benefits
- Mothers benefit

Timing of cognitve gap: Mental development by wealth quintiles at birth in 1,579 children in rural Bangladesh



Timing: Effect of 1 z-score of birth weight & growth in length on IQ at 5 years, controlling for SES

(n=1579)

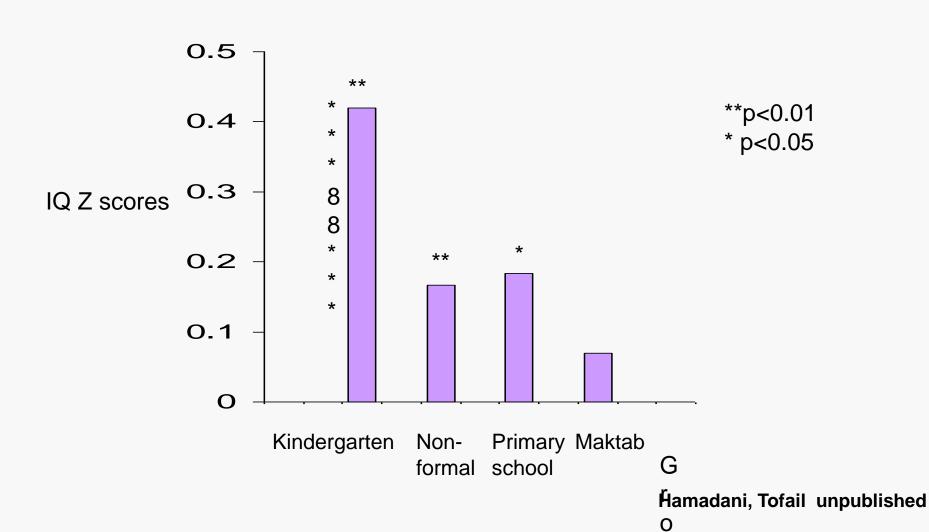


Hamadani Tofail unpublished MINIMat

Timing: Effect of preschool on IQ at 5 years,

(controlling for SES, nutritional status and Bayley scores at 18 months)

$$(n=1579)$$



Implications for Future Policy

- Urgent need to prevent enormous wastage in individual and national development
- Well evaluated projects at scale with long term follow up
- Explore ways of integrating stimulation with other services for<3years

Implications for Future Policy

health and nutrition services.

 cash transfer/ women's groups/ faith groups/microcredit groups

Upgrade preschools

The End



Human Brain Development

