

Dear Friends,

We hope that this month's edition of the Newsflash finds you well! Here at Firelight, our staff members are always on the lookout for information and resources that we think will be relevant for our partners. Usually when we publish the Newsflash, we pull certain resources that center around one theme, but this month's edition is a little different- a resource roundup! We hope that you'll find information and resources that are useful and inspiring in this month's edition.

Next month will be an important one for many of our friends, as July will see the 2016 International AIDS Conference taking place in Durban. With this in mind, we anticipate that our Newsflash next month will focus on AIDS and related updates in the development field. If you have information or tools that you think would be useful for other individuals, groups, or organizations, feel free to share them with us to include in the Newsflash!

As always, we welcome your suggestions, stories, and insights at newsletter@firelightfoundation.org.

Best regards,
The Firelight Team

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'To Help Kids Thrive, Coach Their Parents' by Paul Tough

IN 1986, in a few of the poorest neighborhoods in Kingston, Jamaica, a team of researchers from the University of the West Indies embarked on an experiment that has done a great deal, over time, to change our thinking about how to help children succeed, especially those living in poverty. Its message: Help children by supporting and coaching their parents.

The researchers divided the families of 129 infants and toddlers into groups. The first group received hourlong home visits once a week from a trained researcher who encouraged the parents to spend more time playing actively with their children: reading picture books, singing songs, playing peekaboo. A second group of children received a kilogram of a milk-based nutritional supplement each week. A control group received nothing. The interventions themselves ended after two years, but the researchers have followed the children ever since.

The intervention that made the big difference in the children's lives, as it turned out, wasn't the added nutrition; it was the encouragement to the parents to play. The children whose parents were counseled to play more with them did better, throughout childhood, on tests of I.Q., aggressive behavior and self-control. Today, as adults, they earn an average of 25 percent more per year than the subjects whose parents didn't receive home visits.

The Jamaica experiment helps make the case that if we want to improve children's opportunities for success, one of the most powerful potential levers for change is not the children themselves, but rather the attitudes, beliefs and behaviors of the adults who surround them.

More recent research has helped to uncover exactly how that change can take place. Psychologists including Mary Dozier at the University of Delaware and Philip Fisher at the University of Oregon have studied home-visiting interventions in which parents of infants and young children are provided with supportive, personalized coaching that identifies and reinforces the small moments — such as the face-to-face exchanges sometimes called “serve and return” interactions — that encourage attachment, warmth and trust between parent and child.

The impact of this coaching can be powerful. In one series of experiments, infants and toddlers whose foster parents received just 10 home visits showed fewer behavior problems than a control group and significantly higher rates of “secure attachment” (a close, stable connection with the adults in their lives). The children's ability to process stress improved, too. In fact, the daily patterns in their levels of cortisol, a key stress hormone, came to resemble those of typical, well-functioning, non-foster-care children.

These positive influences in children's early lives can have a profound effect on the development of what are sometimes called noncognitive skills. In our current education debates, these skills are often talked about in morally freighted terms: as expressions of deep-rooted character, of grit and fortitude. But in practice, noncognitive capacities are simply a set of emotional and psychological habits and mind-sets that enable children to negotiate life effectively inside and outside of school: the ability to understand and follow directions; to focus on a single activity for an extended period; to interact calmly with other students; to cope with disappointment and persevere through frustration.

These capacities may be harder to measure on tests of kindergarten readiness than skills like number and letter recognition, but they are inordinately valuable in school, beginning on the first day of kindergarten. Unlike reading and math skills, though, they aren't primarily developed through deliberate practice and explicit training. Instead, researchers have found, they are mostly shaped by children's daily experience of their environment. And they have their roots in the first few years of life. When children spend their early years in communities and homes where life is unstable and chaotic — which is true of a disproportionate number of children growing up in poverty — the intense and chronic stress they often experience as a result can seriously disrupt, on a neurobiological level, their development of these important capacities.

This is why interventions such as home visits with parents can be so effective. When parents get the support they need to create a warm, stable, nurturing environment at home, their children's stress levels often go down, while their emotional stability and psychological resilience improve.

Though interventions in the homes of infants and toddlers are especially effective, the principle that intervening with adults can help children seems to hold true in schools, as well. The Chicago School Readiness Project, a program developed by Cybele Raver, a psychologist at New York University, trains prekindergarten teachers in high-poverty neighborhoods in techniques intended to create a calm, consistent classroom experience for children: setting clear routines, redirecting negative behavior, helping students manage strong emotions. Mental-health professionals are also assigned to work in each classroom, but they are concerned as much with the mental health of the teacher as with that of the students.

Dr. Raver calls this approach “the bidirectional model of self-regulation,” by which she means a kind of virtuous cycle. If from the beginning of the year the classroom is stable and reliable, with clear rules, consistent discipline, and greater emphasis on recognizing good behavior than on punishing bad, Dr. Raver believes that stressed-out students will be less likely to feel threatened and better able to regulate their less constructive impulses. That improved behavior, combined with the support and counsel of the mental-health professional assigned to the class, helps teachers stay calm and balanced in the face of the inevitable frustrations of teaching a group of high-energy 4-year-olds.

The evidence from Dr. Raver's experiments indicates that the program's effects go well beyond classroom climate. The results of a recent randomized trial showed that children who spent their prekindergarten year in a Head Start classroom of the Chicago School Readiness Project had, at the end of the school year, substantially better attention skills, impulse control and performance on memory tasks than did children in a control group. They also had stronger vocabulary, letter-naming and math skills, despite the fact that the training provided to teachers included no academic content at all.

The students improved academically for the simple reason that they were able to concentrate on what was being taught, without their attention being swept away by conflicts and anxieties. Changing the environment in the classroom made it easier for them to learn.

Nurturing the healthy development of infants and children, whether in the home or in the classroom, is hard and often stressful work. What we now understand is that the stress that parents and teachers feel can in turn elevate the stress levels of the children in their care, in ways that can undermine the children's mental health and intellectual development. The good news is that the process can be reversed, often with relatively simple and low-cost interventions. To help children living in poverty succeed, our best strategy may be to first help the adults in their lives.

Source: Paul Tough, New York Times, <http://nyti.ms/1XJ93Ux>

'Father- Paternity' from Encyclopedia of Early Childhood Development

How important is it?

Fathering practices have changed significantly over the past two decades in order to adapt to the changing economic, social, and cultural needs. Relative to a few decades ago, mothers are more likely to work outside of the home, thus requiring fathers to become increasingly engaged in the daily care of children. In addition, attitudes towards gender roles and expectations have also evolved over the years, in turn allowing fathers to play a more active role as caregiver. In fact, there is evidence that many fathers across the world are going beyond the breadwinner role and are increasingly involved in childcare and child rearing. While fathers continue to be one of the main sources of financial support, they also play a key role in the development of children by promoting their identity, cultural values, safety, social-emotional competence, and school readiness.

Looking at fatherhood across time and cultural settings is important as it broadens our understanding of the changing role of fathers, and contributing factors to their different level of engagement within the family.

What do we know?

The different trends in fathering can be explained by cultural, social, and financial factors. Cultural beliefs about gender roles and division of labour have an impact on family policies. For instance, in Sweden, fathers are entitled to 60 days of paid paternity leave. Similarly, in Spain, fathers are allowed 13 days of paternity leave and can get up to ten extra weeks. In addition to cultural beliefs, cultural values about family solidarity and integration (ex. familism) influence the level of father involvement. Relative to other

minority groups in the United States, Latino fathers report higher levels of familism; they are described as highly engaged and responsible with their children.

However, regardless of these cultural beliefs and values, the extent of father involvement largely depends on the social and financial context. The Apartheid in South Africa, the Slavery in the United States, and the Indian Act in Canada are all examples of historical events and policies that have affected and continue to influence fatherhood practices. Given the poor employment opportunities, many black fathers in South Africa are forced to leave their family in order to find work. Similarly, African-American fathers in the United States and First Nations/Métis fathers in Canada have a higher likelihood of facing barriers relative to Caucasian fathers, which in turn limit the time spent with their children. Examples of such barriers include parental separation, incarceration, poverty, unemployment, and patterns of seasonal work.

Finally, there is a popular belief that father absence is associated with negative outcomes in children. Yet, there is increasing evidence that a father's physical location and child involvement are two completely separate dimensions in the father-child relationship. According to research results, a high level of involvement by non-resident fathers (i.e., fathers who do not live in the same house as their children) may moderate the negative effects of their absence on their children's adjustment. Taken together, father absence does not automatically mean lack of involvement, and by the same token, mere presence does not always guarantee father engagement.

What can be done?

Early Childhood Programs

Fathers are encouraged to participate in fatherhood intervention programs, such as Kangaroo Care and Early Head Start. These programs are designed to help fathers develop healthy parenting skills, a secure father-child attachment relationship, and effective intervention strategies. These strategies are especially important when children are at risk for future behavioural and/or social-emotional problems. In order to increase fathers' participation, programs should include male staff and facilitators, provide a father-friendly environment, take into account cultural differences, and allow hands-on activities.

Policy and Research

Policies recommendations on fatherhood are more likely to be effective if they take into account the unique circumstances and needs of fathers and specifically target fathering skills as opposed to the larger umbrella of parenting skills. Furthermore, policies and interventions should be designed to support fathers who have limited opportunities to interact with their children. Finally, given that fatherhood is an emerging field of research, more prospective studies need to be conducted on the quality of fathering experiences,

the types of effective interventions for fathers, and the different needs of fathers across cultures.

Overall, programs, policies, and research need to reflect diverse fatherhood experiences, as they allow us to understand the ways in which culturally specific parenting practices are beneficial to young children, and family as a whole.

To read more on Father-Paternity from the Encyclopedia of Early Childhood Development, please visit: <http://bit.ly/296L6oF>

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'How is Child-care Quality Measured? Toolkit' from the Inter-American Development Bank

This resource is a toolkit to help measure child-care quality published by the Inter-American Development Bank. Although much of their work is focused in Central and South America, there are commonalities that we think many of our friends and partners can benefit from. We hope this tool will be useful as your organizations consider the quality of and potential for improvement in child-care.

The resource is PDF, which can be viewed or downloaded here: <http://bit.ly/299k3qz>

'Beyond Survival: The Case for Investing in Young Children Globally' from the National Academy of Medicine

The National Academy of Medicine published Beyond Survival: The Case for Investing in Young Children Globally. The paper argues that investing in young children globally is a primary means of achieving sustainable human, social, and economic development, all of which are vital to ensuring international peace and security.

In the paper, 31 experts argue that current international assistance for children in developing countries focuses too much on single categories of vulnerability rather than young children's holistic well-being. The co-authors note that without a proactive effort to integrate programs for young children, harmonize implementation, and synchronize the measurement of results, program and outcome siloes are created, and an important opportunity to maximize results for children is lost. Young children's needs and risks are multidimensional. Tackling one issue at a time, divorced from a more complex reality, is ultimately a disservice to time- and resource-strapped vulnerable families. Young children require integrated support, including health, nutrition, education, care, and protection. The science explains why. By turning attention and resources toward

coordinated investments and delivery platforms, it is possible to close the gap between what is known and what is done to support young children globally.

The paper is a call to action, informed by science from multiple disciplines. We hope it will help to close the gap between what is known and what is done to support the development of children globally and, in turn, sustainable progress for communities and nations.

The paper was facilitated by the CPC Learning Network at Columbia University. The initial concept paper resonated with members of the National Academy of Medicine's Forum on Investing in Young Children Globally. The result is a discussion paper written and endorsed by leading academics and thought leaders from multiple disciplines – a joint statement for policy change.

The report can be viewed here: <http://intel.ly/29bz10K>

The African Storybook Project

The African Storybook Project is an initiative to create and distribute books to children in Africa written in their mother tongue language. This project was motivated by research that students learn quicker and acquire other academic skills when first taught in their mother tongue, however few children's books exist in African languages. Research from the UK partnered with Comic Relief to launch the project to create openly licensed stories in digital formats on an interactive format. Anyone can create their own story on the African Storybook Project's website. There are now 559 stories in 63 African languages on the site.

We hope that these stories might be useful for some of our partners and friends working with children. The stories are available for download and printing at the African Storybook Project here: <http://bit.ly/20xg8W8>

Vitamin Angels Product Grant (Open Deadline)

Vitamin Angels invites applications from eligible organizations for its Micronutrients Program for Children, an opportunity to receive a donation of Vitamins and deworming

medication.

Vitamin Angels helps at-risk populations in need – specifically pregnant women, new mothers, and children under five – gain access to lifesaving and life changing vitamins and minerals. This is accomplished by providing annual, renewable micronutrient and Albendazole grants to qualified non-governmental or community-based organizations – our Field Partners – who want to incorporate micronutrients into their existing services.

Benefits

Vitamin Angels micronutrient grants are in-kind donations only, no cash is provided. The organization provides:

- Vitamin A (for children 6-59 months) to save lives and reduce illness,
- Albendazole (for children 12-59 months) to reduce the burden of worms and improve micronutrient status,
- and multivitamins for pregnant & breastfeeding women to support fetal growth and thereby reduce neonatal and infant mortality.

Eligibility Criteria

Beneficiaries must be situated within selected countries in Africa, Asia, and Latin America / Caribbean that have been identified by the WHO or UNICEF as vitamin A deficient priority countries (i.e. experience moderate to severe VAD). Grant recipients must target only beneficiaries 6-59 months of age, and/or pregnant or lactating women, and Beneficiaries must be underserved with respect to access to essential micronutrients, generally meaning they meet one of the following criteria:

Reside in a rural area without any immediate access to facility-based health care services, OR

Reside in a rural area but may obtain routine health services through outreach or community-based services, OR

Reside in an urban area without access to facility-based health care services, OR

Reside in an urban area, have access to facility-based health care services, but the health service system does not have immediate access to essential micronutrients

Additional Criteria

Permanent in-country facility with local professional staff,

Registered as a locally recognized entity (i.e. non-governmental organization, clinic, etc) in the country in which micronutrient products will be distributed to beneficiaries,

Serve a minimum of 1,000 children under 5 and/or 100 women with micronutrients,

Be able to legally transport all donated product into the project country and clear customs appropriately without assistance from VA (NGOs that do not have a US based presence must be able to accept delivery of an international shipment and clear customs appropriately without assistance from VA),

Have capacity to and plan to provide micronutrients to the same project areas for at

least 3 years, and
Agree to the terms and conditions listed in the grantee application

How to Apply

Applicants are required to submit the downloadable application form available on the given website.

To find out more information or to apply, please visit: <http://bit.ly/22YqVvz>

Stars in Reproductive, Maternal, Newborn and Child Health Request for Proposals (Deadline: 19 July 2016)

Grand Challenges Canada is seeking proposals for its Stars in Reproductive, Maternal, Newborn and Child Health programme in order to support Bold Ideas for Big Impact on reproductive, maternal, newborn and child health from innovators in eligible countries.

Grand Challenges Canada seeks to bold ideas that can easily be implemented in the LMIC that focus on RMNCH, including those that will yield positive early childhood experiences that contribute to the health and well-being of all children around the world.

Award Information

Successful proposals will be awarded seed grants of up to \$100,000 for up to 12-18 months to develop and validate the proposed innovation.

Focus Areas

- Improve use of essential health services, including comprehensive family planning
- Reduce the burden of infectious diseases that disproportionately affect pregnant women and young children, including through improving access to safe drinking water and adequate sanitation
- Improve nutrition

Eligibility Criteria

- Eligible applicants include social enterprises and other recognized institutions(non-profit organization, for-profit company) that are legally registered or incorporated in an eligible jurisdiction, that can successfully execute the activities in their respective technical area and are capable of receiving and administering grant funding.
- Only applicants from the countries listed on the site are eligible to apply for the programme.
- It is mandatory for all applicants from Canada to have a collaborator based in an eligible country except Canada.
- A project can only have one Project Lead who must be affiliated with the institution from which the proposal is being submitted
- Applicants must include all required information and attachments.

- Proposed ideas must be aligned with the programme scope.

How to Apply

Applicants must submit their proposals through the Grand Challenges Canada Community Portal.

For more information and to apply, please visit: <http://bit.ly/28OH3KF>

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As part of the Firelight Foundation's Capacity Building Program, Firelight provides "Newsflashes" to share relevant resources and information with our active grantee-partners via weekly emails and via post on a monthly basis. We hope that by facilitating access to information for grassroots, community-focused organizations, programming for children and families, as well as organizational development, is enhanced. Past editions of the Firelight Newsflash can be found on our website:

<http://www.firelightfoundation.org/resources/newsflash>

We welcome your comments, feedback and ideas for upcoming Newsflashes at newsletter@firelightfoundation.org

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