First 1000 days - critical for child growth and mental development

The first 1000 days, the period from conception to 2 years of age, is a crucial time for early childhood growth and development. This period sets the basis for a child's health and physical, social, cognitive, emotional and behavioural development and is when the child is most dependent on parental care and a healthy environment.

Children's wellbeing and outcomes during childhood and beyond are affected by factors such as poor planning for conception and poor antenatal care. Focused family planning for the coming child and then regular antenatal visits during pregnancy with the provision of essential antenatal care are important for a mother to give birth to a healthy baby.

There are other factors which can negatively influence the child's growth and development. These include an insufficient maternal diet during pregnancy; inadequate health services; poverty; displacement; war; child physical and emotional neglect; family violence and parental depression. All these factors can lead to adverse pregnancy outcomes for mother and baby – and for the child, early death; delayed growth and development; low IQ, and long-term health consequences including under nutrition, obesity, hypertension and diabetes.

"There is no National Early Childhood Development Strategy and insufficient support by government."

There are many interventions to improve the life chances for newborns. These include the prevention of mother to child transmission (PMTCT) of HIV, addressing the causes of newborn mortality, monitoring growth and development using the World Health Organization's growth and development charts; also implementing child survival strategies such as exclusive breastfeeding from 0 to 6 months and counselling on affordable complementary feeds, childhood immunization, micronutrient supplements, integrated management of childhood illnesses (IMCI) and family planning. In addition, provision of safe drinking water and insecticide-treated nets can assist in improving early childhood development.

Other interventions are birth registration, positive parenting, optimum use of primary health care and community participation.

South Sudan has a very challenging situation, and its health system is handicapped through inadequate infrastructure, scarce human resources and insufficient money allocated to health programmes. There is no National Early Childhood Development Strategy and insufficient support by government and other stakeholders for policies and programmes focusing on the first 1000 days.

While this issue of SSMJ addresses the care and feeding of babies, we know that many interventions are needed during the first 1000 days to ensure the best possible start for South Sudan's children.

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