

Global progress towards early childhood development for children with disabilities, 2013–2023

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The global commitment under the Sustainable Development Goals 2015–2030 (SDGs) to leave no one behind has prompted a growing interest in children with disabilities by policy-makers, academics, donors and governments as these children have historically been marginalised and excluded in global health agenda. Global pledges and resolutions aimed at addressing the needs of children with disabilities can be traced to 1946 when UNICEF promised to ensure that the most disadvantaged children and countries in the greatest need will be prioritised in everything it does.^{1,2} In this viewpoint, we examine the progress made on this commitment by UNICEF in the last decade as the lead UN agency for child health and development globally.

In May 2013, UNICEF devoted its annual State of the World's Children report to highlighting the plights of children with disabilities.³ In September 2013, UNICEF convened a special forum of stakeholders under the auspices of the Global Partnership on Children with Disabilities to draw special attention to findings in the State of the World Report. A major outcome from this forum was the establishment of eight task forces to address specific issues affecting children with disabilities including early childhood development (ECD) for young children, as well as inclusive education, assistive technology, and nutrition for children and adolescents. The ECD task force was expected to build on prior work by UNICEF, WHO

and other stakeholders to promote effective action plans for children with disabilities.⁴ The UNICEF forum was preceded by a high-level meeting of the General Assembly on disability and development held at the UN Headquarters to champion a disability-inclusive agenda for the SDGs.

In September 2015, ECD was recognised as a critical component of human capital and development and included as a specific target in the SDGs (SDG 4.2).⁵ This target was tailored towards ensuring access to inclusive and equitable quality education for children under 5 years with or at risk of developmental disabilities and encapsulated the global vision and commitment for ECD. The target also underscored the need for a well-coordinated multisectoral programme of early intervention across the health, education and welfare sectors for childhood disabilities. As emphasised in the 2013 State of the World's Children, the ultimate proof of equity and success in global child health will be whether all children with disabilities enjoy their rights—including access to services, support and opportunities—on par with other children.³

In May 2018, UNICEF, WHO and the World Bank launched an independent global ECD initiative, tagged the Nurturing Care Framework (NCF), which was not originally aimed at children with disabilities as envisaged under the SDGs.⁶ The limitations of recent attempts to adapt the NCF for children with disabilities and the need for an independent ECD framework for inclusive education for children under 5 years with disabilities have been previously discussed.⁷ The necessity for a disability-focused global initiative has also been reinforced by a UNICEF report which showed substantial and disproportionate disadvantages faced by children with disabilities compared with children without disabilities in several crucial domains of child development, health and education.⁸ A WHO report has shown that services to routinely identify and support

children with disabilities generally do not exist in low-income and middle-income countries (LMICs), despite the high prevalence of developmental disabilities in this region.⁹ These inequities clearly suggest that little progress had been achieved since 2013 to address the needs of children with disabilities and their families, especially in LMICs. Moreover, except for the ECD task force which is now independently run with a broader focus on all children, virtually all the task forces established in 2013 are no longer active.

Besides the historical contributions to the implementation of the Convention on the Rights of the Child in a growing number of countries that began in 1990, the global pledges for children with disabilities remain largely unfulfilled. To reverse this trend, in December 2022 UNICEF launched an ambitious and unprecedented plan to promote disability-inclusion within its organisation and external activities tagged Disability Inclusion Policy and Strategy (DIPAS) 2022–2030.¹⁰ DIPAS prioritised interventions aimed at promoting disability inclusion within and across UNICEF's sectors—including early childhood screening, detection and intervention; access to disability-inclusive health and nutrition services throughout the life course; disability-inclusive education and skills development; and support for inclusive and effective child protection systems. UNICEF also pledged to allocate at least 10% of its organisational budget to progressively advance disability inclusion by 2030, compared with less than 4% (or US\$245 million) of its total disbursements (US\$6.3 billion) for disability inclusion in 2021.¹⁰

However, a clear educational pathway from birth to school entry for children with disabilities as envisioned by the SDGs has not been articulated.^{11–13} This omission is likely to divert the attention of national governments and the plethora of ECD practitioners away from global commitments on inclusive education.¹⁴ ECD for school readiness and inclusive education is most successful and likely to have the greatest impact when school systems are willing and able to accept children with disabilities—and meet their educational needs. Inclusive education facilitates vocational opportunities that maximises productivity and future earnings to enable those with disabilities live independently. Hence, the global commitment under the SDGs on ECD provides a unifying agenda that should be prioritised over any sectoral initiatives within and outside the UN system. Moreover,

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**Box 1 Recommendations for optimising DIPAS for children with disabilities and SDG 4.2***

- ⇒ Undertake a comprehensive review of national disability-inclusive or disability-focused ECD programmes worldwide.
- ⇒ Conduct systematic reviews on childhood disabilities, school readiness and inclusive education in low-income and middle-income countries.
- ⇒ Develop a global ECD strategy for implementing SDG 4.2 from birth to age 5 years in partnership with relevant organisations and stakeholders.
- ⇒ Avoid or de-emphasise any omnibus ECD programmes that do not reflect the statutory priorities of UNICEF and the extensive published evidence on the disproportionate health inequities and inequality experienced by children with disabilities.
- ⇒ Institute monitoring mechanisms for evaluating country-level implementation of the global disability-focused ECD.
- ⇒ Facilitate a global fund for promoting school readiness and inclusive education for children with disabilities.

*Sources: references.^{2 7 11–13}

ECD, early childhood development; DIPAS, Disability Inclusion Policy and Strategy; SDG, Sustainable Development Goal.

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REFERENCES

- 1 UNICEF. Mission statement. Available: <https://www.unicef.org/about-us/mission-statement> [Accessed 28 Apr 2023].
- 2 Olusanya BO, Cheung VG, Hadders-Algra M, *et al.* Sustainable development goals summit 2023 and the global pledge on disability-focused early childhood development. *Lancet Glob Health* 2023;11:e823–5.
- 3 UNICEF. *The State of the World's Children: Children with Disabilities*. New York, 2013.
- 4 WHO, UNICEF. *Early childhood development and disability: discussion paper*. Geneva, 2012. Available: https://apps.who.int/iris/bitstream/handle/10665/75355/9789241504065_eng.pdf?sequence=1 [accessed 28 Apr 2023].
- 5 Resolution A/RES/70/1. Transforming our world: the 2030 agenda for sustainable development. In: *Seventieth United Nations General Assembly*. New York: United Nations, 2015. Available: <http://www.un.org/ga/search/viewdoc.asp?symbol=A/RES/70/1&Lang=E> [accessed 28 Apr 2023].
- 6 WHO, UNICEF, and World Bank Group. *Nurturing care for early childhood development: a framework for helping children survive and thrive to transform health and human potential*. Geneva: World Health Organisation, 2018. Available: <https://nurturing-care.org/ncf-for-eecd>
- 7 Olusanya BO, Gulati S, Newton CRJ. The Nurturing care framework and children

any policy on inclusive education that is not anchored on ECD is unlikely to be inclusive as it will only serve children with mild-to-moderate disabilities by school age, compared to children with the more challenging severe-to-profound disabilities. The engagements by UNICEF with other stakeholders (including disabled persons organisations and parent groups) must be geared towards implementing the agreed global agenda for ECD under the SDGs.¹¹

The promise of a minimum budget of 10% in investment for disability inclusion is laudable.¹⁵ However, the success of DIPAS is not likely to be measured solely in monetary terms; in addition, there will need to be independently verifiable performance benchmarks such as the number of children with disabilities that receive school readiness services for inclusive education. It is unclear if a root cause analysis of the slow progress achieved since 2013, despite the high-level participation and enthusiasm at the meetings, had been conducted to inform DIPAS in hopes of realising more positive outcomes. Practical steps to promote ECD for children with disabilities in LMICs have now been recommended by a group of accomplished stakeholders with and without lived experience of disability in accordance with the provisions in the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities.¹¹ Examples of successful programmes that can be adapted and developed into a global ECD strategy for children with disabilities include the Individuals with Disabilities Education Act (USA),¹⁶ and

the RBSK Early Detection and Intervention Programme in India.¹⁷

As we approach the 10th anniversary of the action plans in 2013 for disability-inclusive development and with only 7 years to the end of the SDGs, UNICEF should consider recalibrating DIPAS for tangible and sustainable impact in this target population of the most vulnerable and disadvantaged children in LMICs (see box 1).^{2 7 11–13} There is also a need to ensure that long-standing commitments are prioritised over new programmes regardless of changes in leadership within the organisation. Donors and governments need clarity and guidance on the global commitment and agenda for children with disabilities—especially in LMICs. This would not only restore trust but equally forestall potential failures of current plans and programmes. The future envisioned by the SDGs for children with disabilities and their families globally is still achievable if UNICEF resolves to honour its long-standing statutory pledge to prioritise these children in everything it does. It is our view that UNICEF has the wherewithal and clout to lead and make this vision a reality by 2030.

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- with developmental disabilities in Lmics. *Pediatrics* 2023;151:e2022056645.
- 8 UNICEF. *Seen, Counted, Included: Using data to shed light on the well-being of children with disabilities*, UNICEF. New York, 2021. Available: <https://data.unicef.org/resources/children-with-disabilities-report-2021/>
 - 9 World Health Organisation. *Global report on health equity for persons with disabilities*. Geneva, 2022. Available: <https://www.who.int/publications/i/item/9789240063600>
 - 10 UNICEF. *Disability Inclusion Policy and Strategy (DIPAS) 2022–2030*. New York, 2022. Available: <https://www.unicef.org/unicef-disability-inclusion-policy-and-strategy-dipas-2022-2030> [accessed 28 Apr 2023].
 - 11 Olusanya BO, Gulati S, Berman BD, *et al*. Global leadership is needed to optimize early childhood development for children with disabilities. *Nat Med* 2023;29:1056–60.
 - 12 Olusanya BO, Boo NY, de Camargo OK, *et al*. Child health, inclusive education and development. *Bull World Health Organ* 2022;100:459–61.
 - 13 Olusanya BO, Halpern R, Cheung VG, *et al*. Disability in children: a global problem needing a well-coordinated global action. *BMJ Paediatr Open* 2022;6:e001397.
 - 14 Shawar YR, Shiffman J. Generation of global political priority for early childhood development: the challenges of framing and governance. *Lancet* 2017;389:119–24.
 - 15 Olusanya BO, Nair MKC, Smythe T, *et al*. Global research on developmental disabilities collaborators (GRDDC). UNICEF and global leadership for disability inclusion in early childhood. *Lancet Child Adolesc Health* 2023;7.
 - 16 US Department of Education. Individuals with disabilities education act. Available: <https://sites.ed.gov/idea/statute-chapter-33> [Accessed 6 Jun 2023].
 - 17 Ministry of Health and Family Welfare, Government of India. Operational guidelines. Rashtriya Bal Swasthya Karyakram child health screening and early intervention services under the National rural health mission. 2014. Available: https://nhm.gov.in/images/pdf/programmes/RBSK/Operational_Guidelines/Operational-Guidelines-DEIC-RBSK.pdf [Accessed 6 Jun 2023].