

[Link to images and videos for tool profiles](#)

[Link to filter definitions](#)

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## Updated Profile Template

### Name of tool

#### Tool/Initiative Link

Link to the tool website

#### Tool Overview

##### Tool/Initiative description

A high level overview of the tool (2-4 lines). This will include the following components contingent upon available data such as:

- Tool objectives
- Target audience + equity considerations
- Technology utilized (e.g., SMS-based, whatsapp, chatbot, app-based)
- ECD domains and age of interest
- Geographic coverage
- Other unique features (e.g., Govt funding/partnerships, awards, expansive reach, developed by experts)

#### Active since

Year since tool has been actively in use

#### Developer

Name of organization(s) that developed the tool

#### Age

Specifies the exact age bracket supported by the tool

#### ECD Focus areas

- Responsive caregiving
- Health and nutrition

- Developmental milestones
- Safety and security
- Caregiver well-being and mental health
- Early learning

### **Target audience**

- Parents and caregivers
- Home visitors
- Health care providers
- Community health workers
- Supervisors
- Social workers
- Early childhood care and education personnel
- Program administrators

### **Technology utilized**

- App
- Audio/video assisted
- Text-based messaging service
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

### **How it works**

Description of the key offerings of the tool. *This will include the following contingent on data availability:*

- The topics/themes the tools covers
- The services it provides (e.g., sharing tips, connecting to experts, creating a community of practice)
- Frequency and dosage
- Customizations offered
- Any unique features
- Future plans: Summary of upcoming features and content, geographical/language adaptations, etc.

### **User engagement strategies**

- Customized messages
- Flexible tool experience
- Gamification
- Interactive quizzes
- Nudges and reminders
- Goal setting
- User progress tracking
- Network sharing

**Key functions**

- Sharing tips and resources
- Enabling connections
- Providing referrals to service providers
- Providing expert support
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

**Reach, Relevance, and Access****Number of users**

Number of app downloads, sign-ups, or other relevant measures used to estimate reach (include date)

**Country of origin**

Country where tool was initially developed

**Countries where tool has been used**

List of countries where tool has been used (this can include both tool implementation and pilot)

**Language(s) in which tool is available**

List of languages in which the tool is available

**Dissemination strategies**

Description of how people hear about the tool and how are they targeted/recruited

## Technology Components

### Technology requirements and features

Short narrative about the device and connectivity requirements and any specific features.

#### Connectivity requirements

- Partial offline functionality
- Cellular service
- Internet connectivity/Mobile data

#### Device types

- basic mobile/feature phone
- smartphone
- computer
- tablet
- e-reader
- specialized assistive devices

#### Cost model

- free
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

Brief description of M&E approaches used by the tool/initiative and links to any impact evaluations or relevant research studies

### Description of partnerships

Name of government and non-state partners, including funders and if available, the nature of association/partnership.

## Tool/Initiative Contact

### Tool contact:

Name and details of contact person

## **Additional Filters**

**Equity considerations** - addresses the needs of:

- indigenous communities
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- LGBTQ communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

## **Active Regions**

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

## **ECD Age**

- Pregnancy
- Infant (0-12 months)
- Toddler (1-3 years)
- Preschool (3-5 years)
- Early primary (5+ years)

## **Program integration**

- Standalone tool
- Hybrid
- Both

## **Government support**

- Yes

- No

### **Data protection policy**

- Available
- Unavailable

## **Afinidata**

### **Headline**

Afinidata utilizes artificial intelligence (AI) to connect parents and caregivers of children ages 0-6 to a virtual assistant utilizing Facebook messenger, Whatsapp or the Afinidata app depending on user preference.

### **Tool/Initiative Link**

<https://afinidata.com/>

### **Tool Overview**

#### **Tool/Initiative description**

Based on the child's age and stage of development, the Afinidata virtual assistant shares weekly tips to support children's development across areas of health, nutrition, and education. Afinidata works in six countries - the United States, Bolivia, Brazil, Chile, Guatemala, and Peru - across three languages, Spanish, English, and Portuguese. The tool intentionally uses minimal text and data-intensive features in order to better serve these populations. While any user can access the main virtual assistant, Afinidata creates different versions of the messenger service for partnerships with government and NGOs.

#### **ECD Focus areas**

- **Responsive caregiving**
- **Health and nutrition needs**
- **Developmental milestones**
- **Safety and security**
- **Caregiver well-being and mental health**
- **Early learning**

#### **Target audience**

- **Parents and caregivers**

- home visitors
- Health care providers
- community health workers
- social workers
- Early childhood care and education personnel
- Program administrators

### Age

0-6

### Technology utilized

- **App**
- Audio/video assisted (e.g., automated phone calls, telephone counseling, zoom conferencing)
- Text-based messaging service (SMS, Whatsapp, Facebook Messenger, etc.)
- **Text-based Chatbots**
- Learning management system (LMS)
- Resource page/Database

### Active since

2019

### Developer

Afinidata

### How it works

- Afinidata allows parents and caregivers of children ages 0-6 to interact with a virtual assistant through Facebook messenger, Whatsapp or the Afinidata app. After signing up, users typically receive weekly activity suggestions across the areas of health, nutrition, and education. For example, these messages may include suggestions for talking, singing, and/or engaging with a child. Engagement varies across settings and partly depends on internet connectivity. For example, in rural communities, users may engage with the materials shared by the Afinidata virtual tutor every few weeks, downloading materials when connectivity is possible, and then using them offline afterwards.
- Users are prompted to share optional information on their child's developmental progress across domains on a periodic basis. Through artificial intelligence (AI), the tool then adapts the weekly activity suggestions based on user needs and interests.
- In collaboration with NGO and program partners, Afinidata customizes activities and content based on needs and considerations such as language. For example, some program partners may have greater interest in health promotion while others may place emphasis on play activities, which will then translate into the content shared by that customized messenger service.

### **User engagement strategies**

- **Customized messages**
- **Flexible tool experience**
- Gamification
- Interactive quizzes and assessments
- **Nudges and reminders**
- Goal setting
- Progress tracking
- Network sharing

### **Design features**

- **Sharing tips and resources**
- Facilitating peer connections
- **Providing referrals to service providers**
- Providing expert support
- **Tracking ECD milestones**

## **Reach, Relevance, and Access**

### **Number of users**

As of 2022, Afinidata has reached 120,000 users.

### **Country of origin**

Guatemala

### **Countries where tool has been used**

United States, Bolivia, Brazil, Chile, Guatemala, and Peru

### **Language(s) in which tool is available**

English, Spanish, Portuguese

### **Dissemination strategies**

- Afinidata primarily engages its target audience through partnerships with NGOs and governments.
- Although comprising a smaller proportion of users and focus of Afinidata's outreach, the app is also available to families who hear about the tool through social media and access it outside of a program partnership.

## Technology Components

### Technology requirements and features

Afinidata relies on artificial intelligence to power its virtual assistant, which is available through an app, Whatsapp, or Facebook messenger which users can access through a smartphone. Activity suggestions can be downloaded and used offline.

#### Minimum connectivity requirements

- **Partial or full offline functionality**
- Cellular service
- Internet connectivity/Mobile data

#### Device specifications

- basic mobile/feature phone
- **smartphone**
- computer
- **tablet**
- e-reader
- specialized assistive devices

#### Cost model

- **free**
- freemium
- ad-based
- subscription
- **free with partnership**
- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

- In partnership with international researchers from Harvard, ETH Zurich and SwissTPH, Afinidata completed a feasibility trial in Peru to understand the potential of the virtual assistant for reaching low-income communities. This feasibility trial found that two months after baseline, 84% of mothers in the study reported using the platform at least once, with 87% rating it as useful to very useful.
- Afinidata uses parent surveys on an ongoing basis to understand the impact of the tool on promoting awareness of child development.
- Afinidata also collects optional information on child development from families which it uses to measure impact of interaction with the virtual assistant.
- Two RCTs are underway in partnership with international researchers to measure the impact of Afinidata in Peru and Brazil. In Peru, the trial measures the impact of Afinidata in relation to a control (no intervention), and a home visiting program. In Brazil, the evaluation focuses on the

impact of adding Afinidata to an existing large-scale home visiting program and explores the effectiveness of various features, including frequency and dosage of messaging.

### **Description of partnerships**

Name of government and non-state partners, including funders and if available, the nature of association/partnership.

- With funding from UNICEF Innovation Fund and other private foundations/NGOs, Afinidata works in collaboration with NGOs and government partners to customize messages to particular target communities. These partners include: UNICEF Peru, Ministry of Health in Peru, UNICEF Bolivia, Ministry of Health Bolivia, Municipality of El Alto, Bolivia, Municipality of La Paz, Bolivia, Foundation Maria Cecilia Souto Vidigal, Brazil's Criança Feliz (Happy Child) Program, Municipality of Ceará, Harvard Graduate School of Education, World Bank, Swiss TPH, Botnar Research Center for Child Health, USAID- Guatemala Proinnova- Popoyan, Foundation Isabel Gutierrez, Guatemala, Foundation Familias Power, Chile, and United Way Guatemala.

### **Tool/Initiative Contact**

#### **Tool contact:**

Name and details of contact person

*Andreana Castellanos, [ac@afinidata.com](mailto:ac@afinidata.com)*

### **Additional Filters**

**Equity considerations** - meets the needs of:

- indigenous communities
- migrant/displaced communities
- **low socio-economic status**
- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- **rural communities**
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

### **Regions where active**

- East Asia and Pacific

- Europe and Central Asia
- **Latin America and the Caribbean**
- Middle East and North Africa
- **North America**
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

#### **ECD Ages of interest**

- **Pregnancy**
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- **Early primary (5+ years)**

#### **Program integration**

- Standalone tool
- Hybrid (used as part of a program or other services)
- **Both (can either be used independently or embedded in a program)**

#### **Government support or partnership**

- **Yes**
- No

#### **Data protection policy**

- **Available**
- Unavailable

## Baby Buddy App

### Headline

The Baby Buddy app is a free interactive pregnancy and parenting app designed to provide trusted, evidence-based information and self-care tools.

### Tool/Initiative Link

<https://www.babybuddyapp.co.uk/>

### Tool Overview

#### Tool/Initiative description

Developed by UK charity Best Beginnings, the Baby Buddy app is a free National Health Service-approved interactive pregnancy and parenting app. It is available in the UK, with adaptations being piloted in Cyprus, Greece, and Australia and provides daily bite-sized information and advice from pregnancy through the first year of baby's life for mothers, fathers, and caregivers. The app also provides information about local maternity services, a library of short insightful videos, allows a space for personal health and well-being plans, and for recording baby's growth, vaccinations, and developmental milestones. It also includes a 24-/7 text messaging service, in collaboration with SHOUT for parents experiencing distress, overwhelm and in need of urgent support. The app was developed to support low-literacy communities and families at risk of poor health and social outcomes (e.g., younger parents, low education and income, racial and ethnic minorities) and there are contextualized resources for fathers, caregivers of premature or sick babies and also for families who have experienced abuse, violence and trauma. Best Beginnings utilizes a parent panel to develop and test content for the app, along with expert feedback, and collaborates with local health services to encourage its use.

#### Active since

2014

#### Developer

Best Beginnings, a UK charity, developed the tool.

#### Age

Pregnancy - conception through age 1

### **ECD Focus areas**

- **Responsive caregiving**
- **Health and nutrition**
- **Developmental milestones**
- **Safety and security**
- **Caregiver well-being and mental health**
- Early learning

### **Target audience**

- **Parents and caregivers**
- home visitors
- **Health care providers**
- community health workers
- supervisors
- social workers
- Early childhood care and education personnel
- Program administrators

### **Technology utilized**

- **App**
- Audio/video assisted
- Text-based messaging service
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

### **How it works**

- Baby Buddy was first released in 2014 and the latest version, 2.0 was made available in 2021. It:
  - Allows users to select an “avatar” when signing up for the app who is a virtual friend/baby expert who appears across the app and narrates the content. Each day, parents and caregivers receive daily tips based on the stage of pregnancy or age of child (parents can create profiles for multiple children). These tips cover a range of topics and may focus on, for example, health and nutrition during pregnancy, immunizations, breastfeeding, and postpartum depression. A video library complements these daily tips to further illustrate advice.
  - Places emphasis on providing tips related to caregiver mental health and offers a 24 hour text messaging service to provide specific support.
  - Offers information on local maternity services, to support choice of birth (UK only), and includes over 400+ maternity units across the UK. Using geolocation services, the app

can also help parents and caregivers identify other local services such as baby clinics, addiction services, dentists, counseling services, and health visitor services.

- Creates space for parents and caregivers to develop personalized care plans for pregnancy, labor, and birth which can be downloaded and shared with care providers. Parents also have the opportunity to record baby growth, vaccinations and developmental milestones in their app, as well as appointment notes, special memories, and “letters” to their baby.
- Provides different “pathways” for mothers, fathers, and healthcare professionals, which means that content is customized for each of these groups. Information shared by the app is further customized based on relationship and feeding status (breastfeeding or not). In the future, pathways for LGBTQ+ and adoptive parents, as well as surrogates are being developed.
- App content was developed to support an age 9 reading level, and videos in the video library are used to complement written content. Resources are available to support various communities, including caregivers who identify as LGBTQ+ and racial/ethnic minorities.
- In the future, users will be able to sync child health records from the NHS to their user profile in the app. The team at Baby Buddy is also working to extend content through age 5, and to add content that utilizes behavior change theory to encourage small changes around nutrition and health in pregnancy including issues related to gestational weight gain. This will include a goal setting function called Baby Steps to Healthier Habits.

### **User engagement strategies**

- **Customized messages**
- Flexible tool experience
- Gamification
- **Interactive quizzes**
- **Nudges and reminders**
- Goal setting
- User progress tracking
- Network sharing

### **Design features**

- **Sharing tips and resources**
- Facilitating peer connections
- **Providing referrals to service providers**
- **Providing expert support**
- **Tracking ECD milestones**

### **Reach, Relevance, and Access**

**Number of users**

Over 400,000 people have signed in and made accounts through Baby Buddy. Baby Buddy 2.0 has reached 60,000 users in the course of 1 year, with about 2 million active app sessions (referring to instances where a user opens the app and completes an activity).

**Country of origin**

Country where tool was initially developed

*UK*

**Countries where tool has been used**

List of countries where tool has been used (this can include both tool implementation and pilot)

*UK, Greece, Cyprus, Australia*

**Language(s) in which tool is available**

List of languages in which the tool is available

*English*

**Country of origin**

UK

**Countries where tool has been used**

UK, Greece, Cyprus, Australia

**Language(s) in which tool is available**

English

**Dissemination strategies**

Baby Buddy partners with local NHS trusts and Clinical Commissioning Groups, which organize and provide health care in particular localities, and Integrated Care Boards (ICB), local partnerships of health care service providers and community partners, in the UK. Thus, 60-70% of users learn about Baby Buddy through their healthcare providers and midwives. Others learn about the app through browsing the app store or upon recommendation from friends.

**Technology Components****Technology requirements and features**

Baby Buddy 2.0 can be accessed through a smartphone or tablet. Some content is available offline and can be downloaded and viewed when internet connectivity is unavailable. An earlier version of the app was available on the web for those without smartphones, and plans are underway to make Baby Buddy 2.0 similarly accessible.

### Minimum connectivity requirements

- **Partial offline functionality**
- Cellular service
- Internet connectivity/Mobile data

### Device specifications

- basic mobile/feature phone
- **smartphone**
- **computer**
- **tablet**
- e-reader
- specialized assistive devices

### Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

Baby Buddy collects information through analysis of in-app data informing the reach, uptake and usage of the app amongst parents and healthcare professionals; in-app surveys from all different types of users on a variety of topics related to pregnancy, birth and labor and early parenthood period; qualitative data from users from reviews, email feedback; qualitative data from the parents and other networks to ensure the app content is relevant and accessible; and feedback with local health trusts through implementation cycles. In specific, Baby Buddy collects qualitative feedback from users including through surveys and engagement with a 300+ voluntary Parent Panel. This Parent Panel provides ongoing feedback as the team works to develop new content and features.

Baby Buddy has collected data on the overall [impact of the app](#) to inform its future development. The app has also been the subject of independent evaluation in [collaboration with academic researchers](#). In particular, an [independent mixed-methods study](#) on the experiences of Baby Buddy app during the covid-19 pandemic found that parents faced increase anxiety related to pregnancy and birth. 97% of respondents reported that Baby Buddy was supporting them and that it was increasingly relevant given limited contact with healthcare providers during this period.

### Description of partnerships

Best Beginnings utilizes a co-creation methodology with community-level healthcare teams to promote the app and integrate it into existing programs. These partners include local NHS trusts, Clinical Commissioning Groups, and Integrated Care Boards. The app has been accredited by the NHS.

Initial funding was received by the National Community Lottery Fund to develop, design, and implement the app. Additional funding has been received through private foundations.

## Tool/Initiative Contact

### Tool contact:

Name and details of contact person

Nilushka Perera - Head of Impact and Implementation: [nilushka@bestbeginnings.org.uk](mailto:nilushka@bestbeginnings.org.uk); General Inquiries: [info@bestbeginnings.org.uk](mailto:info@bestbeginnings.org.uk)

## Additional Filters

**Equity considerations** - meets the needs of:

- indigenous communities
- migrant/displaced communities
- **low socio-economic status**
- **ethno-linguistic minorities**
- **racial minorities**
- caregivers of children with disabilities
- **adolescent parents/caregivers**
- rural communities
- communities affected by emergencies
- **lgbtq communities**
- **male caregivers**
- **low-literacy audiences**
- users w/ disabilities

## Regions where active

- East Asia and Pacific
- **Europe and Central Asia**
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- South Asia
- Sub-Saharan Africa

- **Oceania**
- Global

#### **ECD Ages of interest**

- **Pregnancy**
- **Infant (0-12 months)**
- Toddler (1-3 years)
- Preschool (3-5 years)
- Early primary (5+ years)

#### **Program integration**

- Standalone tool
- Hybrid (used as part of a program or other services)
- **Both (can either be used independently or embedded in a program)**

#### **Government support or partnership**

- **Yes**
- No

#### **Data protection policy**

- **Available**
- Unavailable

## **Bebbo**

#### **Headline**

The Bebbo app provides parenting tips, tools, and resources to support child development.

#### **Tool/Initiative Link**

<https://www.bebbo.app/>

#### **Tool Overview**

#### **Tool/Initiative description**

UNICEF's Bebbo app provides personalized information and tips about child development and caregiving to parents of children aged 0-6. The app, developed to promote responsive and positive parenting, includes a range of activities to support early childhood stimulation, a library of informative articles and videos, and milestone and appointment trackers to empower parents with tools to monitor and support their child's growth and development. Resources on parental well-being and identifying and supporting

children with disabilities are also featured on the app. Bebbo is currently available in 14 languages and has been adapted and contextualized in 14 countries across Europe and Central Asia.

**Active since**

2021

**Developer**

UNICEF Europe and Central Asia Regional Office (ECARO)

**Age**

0-6 years

**ECD Focus areas**

- Responsive caregiving**
- Health and nutrition**
- Developmental milestones**
- Safety and security**
- Caregiver well-being and mental health**
- Early learning**

**Target audience**

- Parents and caregivers**
- Home visitors
- Health care providers
- Community health workers
- Supervisors
- Social workers
- Early childhood care and education personnel
- Program administrators

**Technology utilized**

- App**
- Audio/video assisted
- Text-based messaging service
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

**How it works**

Bebbo informs and empowers parents on various development domains: health, nutrition, safety and security, responsive caregiving, play and early learning, as well as caregiver well-being

- The content and tools featured in the app include,
  - Ideas on how to engage in playful interaction and promote children’s motor and socio-emotional skills, language, communication and cognitive development.
  - An extensive library of expert advice and parenting articles on topics such as breastfeeding, baby led weaning, and early learning.
  - A milestone development tracker where parents can track their child’s progress. If a child has not met a particular milestone recommended for their age, the app will prompt a game or activity parents can use to support that aspect of development. In addition, a growth tracker supports parents to track measurements like height and weight.

- Health related tools such as vaccination records, notes from doctor’s visits, and reminders for doctor’s appointments.
- Information on how to identify disabilities, when to meet a specialist, and how to support a child with disabilities.
- The app provides personalized content based on the specific age and gender of the child that parents enter when they download the app.
- Users can also search for activities and articles by topic, age, or area of development, and save and share their favorite content.
- The app can be shared with a partner. Two parents can use the app simultaneously and set-up individual profiles for each child.
- The app can also be used by service providers in their own practice to disseminate information, receive games and activity ideas, and encourage positive parenting practices and health seeking behaviors by recommending the app to parents and showing them how to use it.
- UNICEF country offices and government partners in each country can use the app to disseminate critical information to all users through push notifications

### **User engagement strategies**

#### **Customized messages**

Flexible tool experience

Gamification

Interactive quizzes

#### **Nudges and reminders**

Goal setting

User progress tracking

#### **Network sharing**

### **Key functions**

#### **Sharing tips and resources**

Enabling connections

Providing referrals to service providers

Providing expert support

#### **Tracking ECD milestones**

Supporting program implementation

Training program implementers

### **Reach, Relevance, and Impact**

#### **Number of users**

450,000+ users

#### **Country of origin**

Serbia

### **Countries where tool has been used**

Albania, Belarus, Bulgaria, Greece, Kosovo, Kyrgyzstan, North Macedonia, Moldova, Montenegro, Romania, Serbia, Tajikistan, Ukraine and Uzbekistan

### **Language(s) in which tool is available**

English, Albanian, Belarusian, Bulgarian, Greek, Kyrgyz, Macedonian, Montenegrin, Romanian, Russian, Serbian, Tajik, Ukrainian, Uzbek

### **Dissemination strategies**

A wide range of outreach and promotion are happening around Bebo through different channels (digital media, traditional media, and service providers). In contexts with limited internet connectivity, trusted service providers have been instrumental in promoting Bebo in maternity wards, health centers, and preschools to increase user uptake. While digital outreach is seeing maximum traction in most of the countries, experience so far has shown the importance of continuous promotion through all 3 channels to ensure app uptake, retention, engagement and brand building.

## **Technology Components**

### **Technology requirements and features**

A smartphone with access to the internet is required to download Bebo. However, once downloaded, the app can be used in an offline mode thereby enabling access in areas with limited internet connectivity. The app is available free of charge without ads for all users.

#### **Device types**

basic mobile/feature phone  
**smartphone**  
computer  
tablet  
e-reader  
specialized assistive devices

#### **Connectivity requirements**

**Partial offline functionality**  
Cellular service  
Internet connectivity

#### **Cost model**

**free**  
freemium  
ad-based  
subscription  
free with partnership  
price discrimination (free for specific user populations)

## **Measurement and Partnerships**

## M&E Approaches

The app monitors several types of anonymized data including number of app downloads, user retention, frequency and duration of usage, and features that are most frequently accessed. The impact of new features on user engagement and user recruitment is also monitored. An online dashboard is set-up by country to analyze trends in app usage. UNICEF also plans to examine how Bebbo has improved parenting knowledge and practices through a randomized control trial (RCT) in Bulgaria and Serbia. A more detailed explanation of Bebbo's M&E strategy can be found [here](#).

## Description of partnerships

UNICEF leverages several engagement and partnership approaches with private sector, academia and government to create enabling environments for quality parenting and family support through Bebbo. In all the implementation countries, the app has been launched in partnership with the government and other national partners. Civil society organizations, UNICEF implementing partners, sister UN agencies, content partners and United Nations country teams are key allies in Bebbo's vision, and there is a range of other partners who are interested in joining forces, providing support and lending their championship.

## Tool/Initiative Contact

### Tool contact:

For more information contact,  
Ivelina Borisova, Ed.D  
Regional Adviser, Early Childhood Development (ECD), UNICEF Regional Office for Europe and Central Asia  
[iborisova@unicef.org](mailto:iborisova@unicef.org)

## Additional Filters

**Equity considerations** - addresses the needs of:

indigenous communities  
**migrant/displaced communities**  
**low socio-economic status**  
ethno-linguistic minorities  
racial minorities  
**caregivers of children with disabilities**  
adolescent parents/caregivers  
rural communities  
**communities affected by emergencies**  
LGBTQ communities

**Active Regions**

East Asia and Pacific  
**Europe and Central Asia**  
Latin America and the Caribbean  
Middle East and North Africa  
North America  
South Asia  
Sub-Saharan Africa  
Oceania

**male caregivers**  
low-literacy audiences  
users w/ disabilities

Global

**ECD Age**

Pregnancy  
**Infant (0-12 months)**  
**Toddler (1-3 years)**  
**Preschool (3-5 years)**  
**Early primary (5+ years)**

**Program integration**

Standalone tool  
Hybrid  
**Both**

**Government support or partnership**

- **Yes**
- No

**Data protection policy**

**Available**  
Unavailable

## CDC Milestone Tracker

### Headline

The CDC Milestone Tracker supports tracking developmental milestones and provides tips to support children's development.

### Tool/Initiative Link

<https://www.cdc.gov/ncbddd/actearly/milestones-app.html>

### Tool Overview

#### Tool/Initiative description

The CDC Milestone Tracker app supports parents and caregivers track children's developmental milestones from 2 months to 5 years. Developed as part of the '[Learn the Signs. Act Early](#)' program, the app provides interactive milestone tracking checklists, flags potential developmental concerns, populates milestone summary reports, and shares tips and resources to support children's development. The app can also support the work of healthcare professionals and early care and education providers. It is available in both English and Spanish and has over 1,500,000 downloads.

#### Active since

2017

#### Developer

Centers for Disease Control and Prevention

#### Age

0 - 5 years

#### ECD Focus areas

- **Responsive caregiving**
- **Health and nutrition**
- **Developmental milestones**
- Safety and security
- Caregiver well-being and mental health
- **Early learning**

#### Target audience

- **Parents and caregivers**
- home visitors
- **Health care providers**
- community health workers

#### Technology utilized

- **App**
- Audio/video assisted
- Text-based messaging service

- social workers
- **Early childhood care and education personnel**
- Program administrators
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

### How it works

The CDC Milestone Tracker app helps parents and caregivers track and support their child's development across 4 developmental areas - social, language, movement and cognitive.

- Once users download the app, select their preferred language, and enter the required information for their child's profile (name, date of birth, sex, if child was born prematurely), the app will load the appropriate age-specific checklist to begin tracking the child's development.
- The app has easily navigable sections which feature,
  - interactive and illustrated checklists at different ages (2, 4, 6, 7, 12 and 18 months and then 2 to 5 years) where users can indicate developmental progress and insert notes, or browse upcoming milestones by age and area of development.
  - a list of potential developmental concerns that, if selected, prompt the user to consult a doctor and provide a link to CDC resources with more information.
  - a summary of the child's developmental progress which can be easily shared with doctors and other care providers.
  - tips and activities tailored to the child's age to support their development
  - upcoming appointments with the child's doctor.
- The app also has features to support tracking development of children born prematurely
- Users can add profiles for multiple children and receive tailored content to match each child's developmental stage.
- Users can also receive reminders and notifications about completing the checklist, upcoming appointments, and recommended developmental screenings or check-ups.

### User engagement strategies

- **Customized messages**
- Flexible tool experience
- Gamification
- Interactive quizzes
- **Nudges and reminders**
- Goal setting
- User progress tracking
- **Network sharing**

### Design features

- **Sharing tips and resources**
- Enabling connections
- Providing referrals to service providers
- Providing expert support

- **Tracking ECD milestones**
- Supporting program implementation
- Training program implementers

## Reach, Relevance, and Access

### Number of users

1,500,000+ downloads as of March 2023

### Country of origin

United States of America

### Countries where tool has been used

The tool is available for download globally

### Language(s) in which tool is available

English and Spanish

### Dissemination strategies

The CDC promotes the app through paid promotional ads as well as through their own social media channels. In addition, the app is also promoted by Act Early Ambassadors who work with their respective states to expand the reach of the ‘Learn the Signs. Act Early’ program.

## Technology Components

### Technology requirements and features

Users require a smartphone with access to the internet to download and use the app.

#### Connectivity requirements

- Partial or offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

#### Device types

- basic mobile/feature phone
- **smartphone**
- computer
- tablet
- e-reader
- specialized assistive devices

#### Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

Aggregate level data is collected through Adobe Analytics to monitor the app

### Description of partnerships

The Computing for Good program at the Georgia Institute of Technology contributed to the development of the app.

### Tool/Initiative Contact

#### Tool contact:

For more details about the tool contact [ActEarly@cdc.gov](mailto:ActEarly@cdc.gov)

### Additional Filters

**Equity considerations** - addresses the needs of:

- indigenous communities
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

**Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- **Global**

### ECD Ages of interest

- Pregnancy
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- Early primary (5+ years)

### Program integration

- **Standalone tool**
- Hybrid
- Both

### Government support or partnership

- **Yes**
- No

**Data protection policy**

- **Available**
- Unavailable

## Digitaf

### Headline

The Digitaf platform facilitates sign-ups for sessions and activities to support children's development.

### Tool/Initiative Link

<https://www.tel-aviv.gov.il/Residents/Digitel/Pages/Digitaf.aspx?AudID=7>

### Tool Overview

#### Tool/Initiative description

Digitaf is an online platform of upcoming activities and workshops in the city of Tel Aviv for parents and children from birth through 3. Through the municipality website, municipality app, or SMS, parents can receive information on a range of free in-person and virtual activities offered by the city to support children's development. Digitaf also provides a direct communication channel between parents and the municipality as well as facilitates connections amongst parents through a Facebook group. The platform is rapidly growing with over 27,000 users across Tel Aviv.

#### Active since

2017

#### Developer

Municipal Government of Tel Aviv, Israel

#### Age

0-3

#### ECD Focus areas

- **Responsive caregiving**
- **Health and nutrition**
- Developmental milestones
- Safety and security
- **Caregiver well-being and mental health**
- **Early learning**

#### Technology utilized

##### Target audience

- **Parents and caregivers**
- home visitors
- Health care workers
- community health workers
- **App**
- Audio/video assisted
- **Text-based messaging service**

- social workers
- ECCE personnel
- Program administrators
- Text-based Chatbots
- Learning management system (LMS)
- **Resource page/Database**

## How it works

Digitaf connects parents to free activities curated by the municipality.

- Through Digitaf, parents can learn about and sign-up for a wide-range of expert-led (e.g., psychologists, social workers) activities offered for children (e.g., storytelling, music sessions, movement classes) and parents (e.g., taking care of a newborn, preparing children for daycare, nutrition).
  - The list of activities offered are advertised on the municipality website and app. Parents also have access to a Facebook community group where the list of upcoming events are posted and categorized by age (birth - 1.5 years, 1.5 - 3 years) and locality.
  - Sign-ups for 100+ events are opened at a predefined time twice a month on the municipality website and app. Waiting lists are created once the event has reached capacity.
  - Parents can also choose to receive personalized notifications about events in their neighborhood through SMS.
- The Facebook group also allows parents to connect with each other, ask questions, share tips and resources, and provide feedback on the availability and quality of activities. Parents also use the group to give away or sell children's items (e.g., strollers, toys) they don't need anymore and post job openings to support other parents in the community.
- Digitaf also facilitates a direct channel of communication between the municipality and parents. The municipality can share helpful information with parents (e.g., how to sign up for public kindergarten) and parents can provide feedback on the quality of services and support (e.g., quality of play equipment in public playground).
- Other events designed by partners like Urban95 that target specific disadvantaged communities (e.g., low-income communities, children with disabilities) are also shared through the Digitaf platform.

## User engagement strategies

- **Customized messages**
- Flexible tool experience
- Gamification
- Interactive quizzes
- **Nudges and reminders**
- Goal setting
- User progress tracking
- Network sharing

## Key functions

- Sharing tips and resources

- **Enabling connections**
- Providing referrals to service providers
- **Providing expert support**
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

## Reach, Relevance, and Access

### Number of users

28000 as of May 2023

### Country of origin

Israel

### Countries where tool has been used

Israel

### Language(s) in which tool is available

Hebrew, Arabic

### Dissemination strategies

Parents are automatically signed up for Digitaf during their baby's first visit to the Baby Health Clinic, which are public health clinics in the city.

## Technology Components

### Technology requirements and features

Internet access either through a feature phone, smartphone, or computer is required to sign-up for Digitaf. Once parents sign-up on the municipality website, they can opt to receive SMS notifications. The service is available free of cost to all parents.

### Connectivity requirements

- Partial offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

### Device types

- **basic mobile/feature phone**
- **smartphone**
- **computer**
- tablet
- e-reader
- specialized assistive devices

### Cost model

- **free**
- freemium

- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

Digitaf monitors the number of users, activity sign-ups, requests for activities, and participation in activities in community centers. Users provide feedback on the different events offered by Digitaf through the Facebook community page which informs future activity offerings.

### Description of partnerships

Digitaf is funded by the municipality. Bernard van Leer Foundation's Urban95 initiative provides technical assistance to understand needs of parents and children and supports the development of the workshops and activities. Baby Health Clinics in the city support recruitment of parents and provide their expertise to develop health and nutrition sessions for parents. Community centers or municipality buildings in the city provide the physical space required to conduct the sessions and activities.

## Tool/Initiative Contact

### Tool contact:

For more information contact,  
Annie Spitzer  
Project Manager, Urban95  
[Spitzer\\_a@mail.tel-aviv.gov.il](mailto:Spitzer_a@mail.tel-aviv.gov.il)

## Additional Filters

**Equity considerations** - addresses the needs of:

- indigenous communities
- migrant/displaced communities
- **low socio-economic status**
- ethno-linguistic minorities
- racial minorities
- **caregivers of children with disabilities**
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- LGBTQcommunities
- male caregivers
- low-literacy audiences
- users w/ disabilities

**Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- **Middle East and North Africa**
- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

**ECD Age**

- Pregnancy
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- Preschool (3-5 years)
- Early primary (5+ years)

**Program integration**

- Standalone tool
- **Hybrid**
- Both

**Government support or partnership**

- **Yes**
- No

**Data protection policy**

- Available
- Unavailable

## GroeiGids

**Headline**

The GroeiGids ('growth guide') app supports parents in the Netherlands with personalized and reliable information on child development and parenting.

**Tool/Initiative Link**

<https://groeigids.nl/>

**Tool Overview****Tool/Initiative description**

The GroeiGids ('growth guide') app aims to provide parents with trusted information to care for their child based on childbirth and youth healthcare guidelines in the Netherlands. The app pushes customized messages to support children's development from pregnancy through the child's eighteenth birthday. Parents can use the app to track their child's growth and development, get expert advice, and receive tips on various topics including health, nutrition, safety, and connecting with their child.

**Active since**

2012

**Developer**

GGD Amsterdam (the Municipal Health Service) in partnership with youth and public healthcare providers in Netherlands

**Age**

Pregnancy - 18 years

**ECD Focus areas**

**Responsive caregiving**

**Health and nutrition**

**Developmental milestones**

**Safety and security**

Caregiver well-being and mental health

Early learning

**Target audience****Parents and caregivers**

home visitors  
healthcare providers  
community health workers  
social workers  
ECCE personnel  
Program administrators

**Technology utilized****App**

Audio/video assisted  
Text-based messaging service  
Text-based Chatbots  
Learning management system (LMS)

**Resource page/Database****How it works**

GroeiGids aims to support parents through every stage of parenting and provides information parents need to make well-informed decisions about their child's growth and development.

- Users receive personalized content based on the stage of their pregnancy and the age of their child. Push notifications are used to alert users when new messages are available.
  - The frequency of these messages can vary from 1-3 times a week based on the age of the child.
  - In addition to regular content, users can opt-in to receive specific thematic messages. These messages, developed in collaboration with the Ministry of Social Work and the Knowledge Centers in Netherlands, address some topics in greater depth (e.g., working during pregnancy and after birth, nutrition, child safety).
  - The tool also has a search feature where users can look for content on topics of interest.
  - The messages are simple and easy to read, thereby enabling wider reach to low-literacy audiences.

- Through the ‘Parent Chat’ option, parents can ask questions, have a conversation with a trained youth healthcare nurse, and receive links to external resources with detailed information.
- GroeiGids also allows parents to track children’s developmental milestones (e.g., ultrasounds, first steps), growth (height and weight), vaccinations, illnesses, and also upload photos and videos of these moments to create a growth album to save as a memory for the future.
  - To support developmental milestone tracking, the app provides a short video about the milestone (e.g., following a toy with their eyes) which parents can watch to see if their child meets the milestone and track it on the app
- Parents can create independent profiles for up to five children starting from pregnancy.
- Public health organizations, local and government services can send messages to the users via the app to spread awareness on important activities such as vaccination campaigns.
- The app content can also be accessed online through the website.

### **User engagement strategies**

#### **Customized messages**

#### **Flexible tool experience**

Gamification

Interactive quizzes

#### **Nudges and reminders**

Goal setting

User progress tracking

Network sharing

### **Design features**

#### **Sharing tips and resources**

Enabling connections

Providing referrals to service providers

#### **Providing expert support**

#### **Tracking ECD milestones**

Supporting program implementation

Training program implementers

### **Reach and Relevance**

#### **Number of users**

150,000+ users as of March, 2023

#### **Country of origin**

Netherlands

#### **Countries where tool has been used**

Netherlands

### **Language(s) in which tool is available**

Dutch

### **Dissemination strategies**

Social media marketing such as Facebook campaigns are used to disseminate the tool to a wider audience. In addition, healthcare workers promote the tool during preventive check-ups and public health organizations promote it on different platforms like their websites and newsletters.

## **Technology Components**

### **Technology requirements and features**

Users require a smartphone with internet connectivity to use the GroeiGids app. The content is provided to users free of cost without any advertisements.

#### **Device types**

basic mobile/feature phone  
**smartphone**  
computer  
tablet  
e-reader  
specialized assistive devices

#### **Connectivity requirements**

Partial offline functionality  
Cellular service  
**Internet connectivity**

### **Cost model**

**free**  
freemium  
ad-based  
subscription  
free with partnership  
price discrimination

## **Measurement and Partnerships**

### **M&E Approaches**

Data including numbers of users, frequently accessed pages, user region, number of users who access the chat feature, chat topics, and age of children, is collected to monitor usage of the app. Consultations with parents individually or in groups are organized when making changes or new developments to the app and a detailed user research study is conducted every 4 years.

There are also partnerships with local universities to conduct research studies, including randomized control trials (RCT), on the effectiveness of the app and its features. Some completed studies include an RCT examining the tool's impact on behavior change, the variation in engagement between high-income

and low-income users, and the effectiveness of push notifications to increase user engagement. Results from these studies indicate that low literacy populations engaged with the app more frequently and parents with younger children use the app to keep track of developmental data. A few published reports (in Dutch) can be found [here](#).

### **Description of partnerships**

GroeiGids is funded by different public health organizations. The app initially partnered with the Municipality of Amsterdam and was then scaled nationally in partnership with GGDGHOR, the Dutch Association of GGD's (Regional Public Health Services). The app also partners with public health organizations, local universities and the international Maternal and Child Health Handbook committee to support dissemination and research.

### **Tool/Initiative Contact**

#### **Tool contact:**

For more information contact:

Jessica Jansen

Project Advisor, GroeiGids

info@groeingids.nl

### **Additional filters**

#### **Equity considerations** - addresses the needs of:

indigenous communities  
migrant/displaced communities  
**low socio-economic status**  
ethno-linguistic minorities  
racial minorities  
caregivers of children with disabilities  
adolescent parents/caregivers  
rural communities  
communities affected by emergencies  
LGBTQ communities  
male caregivers  
**low-literacy audiences**  
users w/ disabilities

#### **Active regions**

East Asia and Pacific  
**Europe and Central Asia**  
Latin America and the Caribbean  
Middle East and North Africa  
North America  
South Asia  
Sub-Saharan Africa  
Oceania  
Global

### **ECD Age**

### **Program integration**

**Pregnancy**  
**Infant (0-12 months)**  
**Toddler (1-3 years)**  
**Preschool (3-5 years)**  
**Early primary (5+ years)**

Standalone tool  
Hybrid  
**Both**

**Data protection policy**

**Available**  
Unavailable

**Government support or partnership**

**Yes**  
No

**Jamii ni Afya**

**Headline**

Jamii ni Afya supports community health volunteers (CHVs) and their supervisors with complementary mobile apps to support program implementation.

**Tool/Initiative Link**

<https://www.d-tree.org/jamii-ni-afya/>

**Tool Overview**

The Jamii ni Afya digital platform supports community health volunteers (CHVs) and their supervisors delivering services to families through household visits from pregnancy through age 5. A mobile app for CHVs creates a visit schedule, prompts screening questions, supports decision making, and guides coaching in health and development based on the type of visit (e.g., antenatal), and stage of pregnancy/age of child. Topics range, for example, from antenatal care, immunizations, child nutrition, and responsive caregiving. Supervisors are able to use a complementary mobile app to monitor CHV progress in conducting household visits including completion of visits and referrals made to other service providers. A supportive supervision tool for CHV supervisors also guides them to conduct routine observation of CHVs during home visits. These mobile applications are in use across 11 districts in Zanzibar in collaboration with the Ministry of Health, and are part of the national community health strategy. The guidance and data available through the app help to reduce initial training needs and allows for ongoing updates to protocol and guidance shared by CHVs.

**Active since**

*Launched in August 2019 (in 3 districts) and fully operational across all Zanzibar's 11 districts by August 2021.*

**Developer**

D-Tree, Medic, and Zanzibar Ministry of Health

**Age**

Pregnancy through age 5.

**ECD Focus areas**

- **Responsive caregiving**
- **Health and nutrition needs (e.g., immunization schedules, growth monitoring)**
- **Developmental milestones**
- Safety and security (e.g., positive discipline, protection from violence, safe home environment)
- Caregiver well-being and mental health
- Early learning

**Target audience**

- Parents and caregivers
- home visitors
- **community health workers**
- social workers
- ECCE personnel
- **Supervisors**
- Program administrators

**Technology utilized**

- **App**
- Audio/video assisted (e.g., automated phone calls, telephone counseling, zoom conferencing)
- Text-based messaging service (SMS, Whatsapp, Facebook Messenger, etc.)
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

**How it works**

- The Jamii ni Afya platform provides CHVs and their supervisors with a phone pre-installed with a mobile app to support household visits with families.

- ○ During household visits, the app will guide CHVs based on particular family needs (e.g., stage of pregnancy, age of child, health needs). For example, the app will prompt CHVs to make certain observations (e.g, is the caregiver playing with the child?, are there play materials available?), ask certain screening questions, provide tips on how to support guidance and counseling, take certain referral actions (e.g., recommend sending child to health care facility), or make follow-up visits to families.
- ○ Personalized dashboards which reflect individual caseload help both CHVs and their supervisors better understand the status of their visits. CHVs are also able to keep track of their targets and visualize how many pregnant women, children and visits they have managed to complete during the month. In addition, CHVs are paid stipends based on visits completed through a pay for performance scheme, which is tracked through this app.
- Supervisors are trained to troubleshoot challenges with CHVs in utilizing the technology. A local technician and small budget is available to support phone repair and issues in using the app.

### **User engagement strategies**

- Customized messages
- Flexible tool experience
- Gamification
- Interactive quizzes
- **Nudges and reminders to prompt particular actions**
- Goal setting
- **User progress tracking**
- Network sharing

### **Design features**

- Sharing tips and resources
- Facilitating peer connections
- Providing referrals to service providers
- Providing expert support
- Tracking ECD milestones
- **Supporting program implementation**
- Training program implementers

## **Reach, Relevance, and Access**

### **Number of users**

Approximately 2,300 CHVs and 220 supervisors across 11 districts are using the mobile application (2023).

### **Country of origin**

Country where tool was initially developed

Zanzibar

### **Countries where tool has been used**

List of countries where tool has been used (this can include both tool implementation and pilot)

Zanzibar

### **Language(s) in which tool is available**

English and Swahili

### **Dissemination strategies**

CHV supervisors and other district health officials train CHVs in using the app through a training of trainers model. Supervisors provide mentoring and coaching on a monthly basis which may touch on use of the app.

### **Technology Components**

#### **Technology requirements and features**

The mobile apps used by CHVs and supervisors are installed on smartphones provided to these personnel, along with internet connectivity which is required to sync the data once a month. The app is otherwise available offline.

A small amount is deducted from CHV and CHV supervisors' monthly payments to support an insurance pool which is utilized for the purchase / replacement of stolen or broken phones.

#### **Minimum connectivity requirements**

- **Partial or full offline functionality**
- Cellular service
- Internet connectivity/Mobile data

#### **Device specifications**

- basic mobile/feature phone
- **smartphone**
- computer
- tablet
- e-reader
- specialized assistive devices

#### **Cost model**

- **free**
- freemium
- ad-based
- subscription
- free with partnership

- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

A number of indicators are tracked regularly, including type of visit, as well as length and content of visits which CHV perform. To personalize the content of the visit, information such as previous ANC attendance, number of ANC visits attended, miscarriage information, are also collected to inform counseling messages needed to be shared during the visit. Ad hoc updates on the content of the counseling messages in the application are updated based on revision of national guidelines and protocols.

[PDSA \(Plan-Do-Study-Act\) cycles](#) are underway to test different approaches to improving the content of the app and training of CHVs. These approaches focus on improving engagement with fathers, interactions with key groups such as young mothers, as well as adapting the curriculum provided to CHVs to improve their competencies and preparedness to coach parents on ECD related topics.

A subset of data collected by CHVs is pushed to the national DHIS 2 which supports decision making at the national and district level. These indicators include, for example, aggregate number of visits to pregnant women and number of children referred for immunization. Efforts are underway to push all indicators to DHIS 2). It is the first time that community level services are being included in DHIS2, under a community health information system module. Typically, DHIS2 only has health facility (clinical) service delivery data.

### Description of partnerships

D-Tree International, Medic, and the Ministry of Health in Zanzibar have collaborated in the development and deployment of the apps with financial support from various donors.

## Tool/Initiative Contact

### Tool contact:

Name and details of contact person

### Additional Filters

**Equity considerations** - meets the needs of:

- indigenous communities
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities
- racial minorities
- **caregivers of children with disabilities**
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- **male caregivers**
- low-literacy audiences
- users w/ disabilities

**Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- South Asia
- **Sub-Saharan Africa**
- Oceania
- Global

**ECD Ages of interest**

- **Pregnancy**
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- Early primary (5+ years)

**Program integration**

- Standalone tool
- **Hybrid (used as part of a program or other services)**
- Both (can either be used independently or embedded in a program)

**Government support or partnership**

- **Yes**
- No

## Data protection policy

- [Available](#)
- Unavailable

## Jornada Online Primeira Infância (JOPI)

### Headline

Jornada Online Primeira Infância (JOPI) is the online training platform for social workers conducting home visits in Brazil.

### Tool/Initiative Link

<https://descobrirbrincando.grano.app/>

### Tool Overview

### Tool/Initiative description

Jornada Online Primeira Infância (JOPI) is the online training tool used to train the social workers delivering [Criança Feliz](#), a national early childhood home visiting program in Brazil that supports over 1.2 million families from pregnancy through age 6. JOPI was initiated as a program to train home visitors over a Whatsapp chatbot (JOPI 1); however, given the high turnover rate among home visitors, it was strategically redesigned to support supervisors (JOPI 2). JOPI 2 is now offered as a self-paced online course hosted on Grano, a learning management platform with a focus on training in three key areas - pregnancy, use of screens among children and caregivers, and children with disabilities. While [JOPI 1](#) is not currently actively updated or disseminated, interested users can access the content through the Ministry of Social Protection website.

### Active since

JOPI 1 - 2019

JOPI 2 - 2022

### Developer

Descobrir Brincando

### Age

Pregnancy - 6

## ECD Focus areas

- **Responsive caregiving**
- Health and nutrition needs
- **Developmental milestones**
- **Safety and security**
- **Caregiver well-being and mental health**
- **Early learning**

## Technology utilized

### Target audience

- Parents and caregivers
- **home visitors**
- Health care providers
- community health workers
- **supervisors**
- **social workers**
- ECCE personnel
- Program administrators
- App
- Audio/video assisted
- Text-based messaging service
- Text-based Chatbots
- **Learning management system (LMS)**
- Resource page/Database

## How it works

JOPI 2 trains supervisors of Criança Feliz, Brazil's national home visiting program.

- The training has 4 tracks, each which focus on key areas identified as a need by social workers at the end of JOPI 1
  - The first three tracks focus on pregnancy, use of screens among children and caregivers, and supporting children with disabilities.
  - The fourth track is focused on team management and leadership skills
  - The content across all tracks focus on immediate gains or actions that supervisors can easily incorporate into their routines (e.g., plan their team meetings using scripts provided through the platform)
- JOPI 2 retains successful elements of JOPI 1.
  - Micro learnings break down each track into 5-6 short and simple modules. Each module, designed like a series of Instagram stories, has a few short message cards that users can scroll through.
  - The training uses storytelling as a tool through audio novels and short animated videos to keep users engaged.
  - There are interactive quizzes across all tracks with mechanisms to provide feedback.
  - At the end of each module, users receive a 'present' which allows them to share the content from the modules with their teams or caregivers across different platforms (e.g., Facebook, Whatsapp, emails).
- The training is self-paced and users can determine in which sequence to complete the tracks based on their personal needs and interests.

- The platform also provides a progress tracker and nudges to display the user's completion rate and encourage them to complete the training.

#### **User engagement strategies**

- Customized messages
- **Flexible tool experience**
- **Gamification**
- **Interactive quizzes**
- **Nudges and reminders**
- Goal setting
- **User progress tracking**
- **Network sharing**

#### **Key functions**

- Sharing tips and resources
- Enabling connections
- Providing referrals to service providers
- Providing expert support
- Tracking ECD milestones
- Supporting program implementation
- **Training program implementers**

### **Reach, Relevance, and Access**

#### **Number of users**

5000+ users completed JOPI 1. JOPI 2 has 1464 users as of March 2023

#### **Country of origin**

Brazil

#### **Countries where tool has been used**

Brazil

#### **Language(s) in which tool is available**

Portuguese

#### **Dissemination strategies**

JOPI works closely with state coordinators of Criança Feliz to promote the uptake of the training among supervisors. Direct lines of communication with supervisors through email campaigns have also been established.

## Technology Components

### Technology requirements and features

The training platform can be accessed either via a smartphone, tablet or computer with the user's login credentials. Internet connectivity is required to use the platform.

#### Connectivity requirements

- Partial offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

#### Device types

- basic mobile/feature phone
- **smartphone**
- **computer**
- **tablet**
- e-reader
- specialized assistive devices

#### Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

User engagement with the training modules is tracked in the backend to understand user progress, the content supervisors are accessing, and points where they stop the training. This data, monitored daily through a dashboard, is used to inform iterations to the training design and content. Google analytics data is also monitored to understand when users use the tool and where they access it from. Feedback from users is also sought on course content, usability, content clarity, ease of navigation, and perceptions of behavior change

In partnership with a local university, Faculdade Getulio Vargas (FGV), São Paulo, a randomized control trial is being planned to assess the impact of the training on supervisors' behaviors. An evaluation was conducted at the end of JOPI 1 and user feedback was collected to inform the design of JOPI 2.

### Description of partnerships

Funded by the United Nations Development Program and the Bernard van Leer Foundation, JOPI closely partners with the Ministry of Social Protection to finalize training content and promote the uptake of the platform. A local university serves as a research partner of the program.

## Tool/Initiative Contact

### Tool contact:

For more information, contact [contato@descobrirbrincando.com.br](mailto:contato@descobrirbrincando.com.br)

## Additional Filters

### Equity considerations - addresses the needs of:

- **indigenous communities**
- migrant/displaced communities
- **low socio-economic status**
- ethno-linguistic minorities
- racial minorities
- **caregivers of children with disabilities**
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- LGBTQ communities
- **male caregivers**
- **low-literacy audiences**
- users w/ disabilities

### Active regions

- East Asia and Pacific
- Europe and Central Asia
- **Latin America and the Caribbean**
- Middle East and North Africa
- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

### ECD Age

- **Pregnancy**
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- **Early primary (5+ years)**

### Program integration

- Standalone tool
- **Hybrid**
- Both

### Government support or partnership

- **Yes**
- No

### Data protection policy

- **Available**
- Unavailable

## Kinedu

### Headline

Kinedu is a commercially available parenting app that includes resources and activities for parents .

### Tool/Initiative Link

<http://app.kinedu.com>

### Tool Overview

#### Tool/Initiative description

Kinedu translate science and research of early childhood development in a user-friendly way. Through Kinedu:

- Parents can access a range of articles, a video library, live and on-demand classes, masterclasses, and expert-led coaching sessions on topics such as breastfeeding, health, sleep, and play activities. In addition, parents can connect with peers in group chats to discuss similar issues that they are facing. Content addresses pregnancy through age 6.
- Parents can utilize an AI-powered milestone tracker which feeds into personalized plans with play activity and video recommendations.

Kinedu is available through a tiered subscription model and includes a free plan option. The app is in use globally and content for the three languages in which it is offered is built on “anchoring cultures” (Mexico and Peru for Spanish, the US and Canada for English, and Brazil for Portuguese).

### Active since

2016

### Developer

Kinedu

### Age

Kinedu aims to reach parents of children ages 0-6.

### ECD Focus areas

- **Responsive caregiving**
- **Health and nutrition needs**
- **Developmental milestones**
- Safety and security
- Caregiver well-being and mental health

- **Early learning**

### **Target audience**

- **Parents and caregivers**
- home visitors
- Health care providers
- community health workers
- social workers
- ECCE personnel
- Program administrators

### **Technology utilized**

- **Mobile/tablet app**
- Audio/video assisted (e.g., automated phone calls, telephone counseling, zoom conferencing)
- Text-based messaging service (SMS, Whatsapp, Facebook Messenger, etc.)
- Text-based Chatbots
- Learning management system (LMS)
- **Resource page/Database**

### **How it works**

- Kinedu offers a tiered paid subscription model.
  - There is a free option that includes access to 3 activities per week, 650 expert articles, and the use of the milestone tracker.
  - With paid subscriptions, users can access an even wider range of videos and play activities. In addition, they can:
    - Join interactive play sessions such as “Music for Babies,” and access live and on-demand group classes with experts on topics such as breastfeeding and sleep.
    - Participate in group chats with other users to share challenges and tips, and connect with experts on specific topics in 1:1 coaching sessions.
- Kinedu Skills, an option available in paid subscriptions, is an early childhood development assessment tool that allows parents to track child development across domains and understand growth trajectories. It produces progress charts to help parents understand their child’s stage of development and areas for further growth and is also the foundation for Kinedu’s Artificial Intelligence Recommendation Algorithm (AIRA), which generates a daily activity plan for users. In addition to the recommendations generated by this algorithm, users may also filter resources based on specific interests (e.g., sleep, breastfeeding), age, and other criteria.
- In the future, Kinedu is working to be more inclusive of neurodivergent children in the tool. This may include providing more tailored content to address the needs of these children and their families, while also considering how best to curate resources when, for example, milestone

progression may follow diverse patterns. New content is being added to the app to reflect greater racial and gender diversity. Additionally, Kinedu plans to expand its prenatal offerings.

#### **User engagement strategies**

- **Customized messages**
- **Flexible tool experience**
- Gamification
- Interactive quizzes
- **Nudges and reminders**
- Goal setting
- User progress tracking
- Network sharing

#### **Design features**

- **Sharing tips and resources**
- **Facilitating peer connections**
- Providing referrals to service providers
- **Providing expert support**
- **Tracking ECD milestones**

### **Reach, Relevance, and Access**

#### **Number of users**

9+ million users have signed up for Kinedu as of February 2023.

#### **Country of origin**

Mexico

#### **Countries where tool has been used**

Global - 180 countries

#### **Language(s) in which tool is available**

Spanish, English, Portuguese

#### **Dissemination strategies**

Kinedu uses social media and emailed newsletters to share free content and encourage users to subscribe. Many prospective users also learn about Kinedu from the App store, where the tool is featured in articles.

### **Technology Components**

## Technology requirements and features

Kinedu can be accessed via a mobile/tablet based app and resources are also accessible through the tool's website.

### Minimum connectivity requirements

- Partial offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

### Device specifications

- basic mobile/feature phone
- **smartphone**
- **computer**
- **tablet**
- e-reader
- specialized assistive devices

### Cost model

- free
- **freemium**
- ad-based
- subscription
- free with partnership
- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

Kinedu tracks the number of indicators on a monthly basis to assess user engagement and impact. These indicators include retention, time spent on the platform, and milestone progression.

Kinedu videos were utilized in a study conducted by researchers at Stanford. The results indicated that parents using the videos increased efforts to engage their children in joint attention, as well as the volume of their speech.

### Description of partnerships

Kinedu partners with governments, NGOs, and other private companies for special projects. Under these special projects, the Kinedu team may offer expert advice, for example, in re-designing play spaces or in filming video activities. The app is financed through its subscription-based model and Venture Capital financing.

### Tool/Initiative Contact

**Tool contact:**

For more information contact, [hello@kinedu.com](mailto:hello@kinedu.com)

**Additional Filters**

**Equity considerations** - meets the needs of:

- indigenous communities
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities
- racial minorities
- **caregivers of children with disabilities**
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

**Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- **Global**

**ECD Ages of interest**

- **Pregnancy**
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- **Early primary (5+ years)**

**Program integration**

- **Standalone tool**
- Hybrid (used as part of a program or other services)
- Both (can either be used independently or embedded in a program)

**Government support or partnership**

- Yes
- No

**Data protection policy**

- Available
- Unavailable

## Mobile Academy

**Headline**

Mobile Academy provides audio-based refresher trainings to community health workers in India.

**Tool/Initiative Link**

<https://armman.org/mobile-academy/>

**Tool Overview****Tool/Initiative description**

Mobile Academy uses an automated phone-based technology (Interactive Voice Response or IVR) to provide a refresher Maternal, Neonatal, and Child Health training course to Accredited Social Health Activists (ASHA), who are community health workers in India. In response to the lack of regularly scheduled refresher trainings, the tool provides pre-recorded audio modules aimed to promote the knowledge of preventative life-saving health behaviors and improve quality of engagement with pregnant women, new mothers and their families. The implementation of Mobile Academy is currently managed by ARMMAN, a non-profit organization in India, in partnership with the Ministry of Health and Family Welfare (MoHFW). Having trained over 300,000 ASHAs across 17 states, Mobile Academy has been recognized as the largest mobile-based training program for frontline health care workers across the world.

Mobile Academy is implemented alongside Kilkari, a complementary service that targets pregnant women and new mothers, and shares tips and resources via recorded voice calls directly to their phones. This ensures continuity of care as the messages mothers receive through Kilkari are reinforced by ASHA workers who use Mobile Academy. More information on Kilkari can be found [here](#).

**Active since**

2015

**Developer**

BBC Media Action

## Age

Pregnancy - 2 years

## ECD Focus areas

- Responsive caregiving
- **Health and nutrition**
- Developmental milestones
- Safety and security
- Caregiver well-being and mental health
- Early learning

## Target audience

- Parents and caregivers
- home visitors
- Health care providers
- **community health workers**
- social workers
- ECCE personnel
- Program administrators

## Technology utilized

- App
- **Audio/video assisted**
- Text-based messaging service
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

## How it works

Mobile Academy provides technology-based refresher training to community health workers in India to enable them to support pregnant and new mothers.

- The pre-recorded course content focuses on maternal, newborn, and child health from pregnancy to 2 years of age.
  - The course contains 11 audio-recorded modules with 4 lessons each on a range of themes including pre-natal check-ups, nutritional supplements for the mother, breastfeeding, vaccination schedules for babies as well as skills to counsel mothers and communicate with families.
  - Each of the 44 lessons concludes with a short multiple choice quiz to check for understanding.
  - The entire course can be completed in less than 3 hours
- The tool's design prioritizes convenience and accessibility. With a basic phone and network connectivity, ASHA workers can connect from anywhere and listen to the course content on-demand and free of cost. They can also disconnect at any time and resume from where it was paused when they reconnect.

- Upon completion of all the modules and quizzes, users receive a final score. Those who score 50 and above receive a certificate from the Ministry of Health and Family Welfare, which has been a motivating factor for the workers to undertake and complete the course.
- ASHA workers also receive messages or calls to encourage them to complete the course

In the coming years, ARMMAN plans to expand the reach of Mobile Academy across all 29 states and 7 union territories in India. In addition, ARMMAN is also planning to launch accessible multimedia content (e.g., videos, images) to complement the existing audio content. The organization is also exploring alternate channels of communication including Whatsapp, Youtube, and other social media platforms to increase its reach and also plans to set-up a call center for ASHA workers to contact if they have any questions or require clarifications about the course content.

### **User engagement strategies**

- Customized messages
- Flexible tool experience
- Gamification
- **Interactive quizzes**
- **Nudges and reminders**
- Goal setting
- User progress tracking
- Network sharing

### **Key functions**

- Sharing tips and resources
- Enabling connections
- Providing referrals to service providers
- Providing expert support
- Tracking ECD milestones
- Supporting program implementation
- **Training program implementers**

## **Reach, Relevance, and Access**

### **Number of users**

300,000 users as of May, 2023

### **Country of origin**

India

### **Countries where tool has been used**

India

### **Language(s) in which tool is available**

The tool is available in 5 Indian languages: Assamese, Bengali, Hindi, Oriya, Telugu

### **Dissemination strategies**

All ASHA workers in India are registered in the Reproductive Child Health (RCH) portal managed by the government and receive immediate access to the Mobile Academy course through their registered mobile numbers. Field based teams managed by ARMMAN also conduct trainings on the ground to make ASHAs aware of the support offered by Mobile Academy, how to use the tool, and the advantages of completing the training.

## **Technology Components**

### **Technology requirements and features**

Users require a basic feature phone with cellular service to dial into Mobile Academy modules.

#### **Connectivity requirements**

- Partial offline functionality
- **Cellular service**
- Internet connectivity/Mobile data

#### **Device types**

- **basic mobile/feature phone**
- smartphone
- computer
- tablet
- e-reader
- specialized assistive devices

#### **Cost model**

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## **Measurement and Partnerships**

### **M&E Approaches**

To monitor the use of the service, ARMMAN tracks course trends including the number of ASHAs that have started and completed the course every month. In addition, Computer Assisted Telephone Interview (CATI) surveys and an impact evaluation have been conducted to measure impact of Mobile Academy. These found significant improvement in the knowledge and skills of the ASHA workers. A paper on the lessons learnt from scaling Mobile Academy has also been published and can be found [here](#).

### **Description of partnerships**

Mobile Academy was initially set-up with support from the Bill and Melinda Gates Foundation and implemented by BBC Media Action. Currently, the implementation of the service is managed by ARMMAN and funded through a public-private partnership with the Ministry of Health and Family

Welfare. ARMMAN collaborates closely with the Ministry to implement Mobile Academy. In addition to funding existing infrastructure to run the program, the Ministry also provides inputs on program improvement measures and approves program material (e.g., translation of training content). For more information on how governments partnerships have been leveraged to expand reach and impact, see case study on Mobile Academy and Kilkari.

## Tool/Initiative Contact

### Tool contact:

For more details about the tool contact,

Kruti Dalal

Deputy Director - Resource Mobilization and Communication, ARMMAN

kruti@armman.org

## Additional Filters

### Equity considerations - addresses the needs of:

- indigenous communities
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- **rural communities**
- communities affected by emergencies
- LGBTQ communities
- male caregivers
- **low-literacy audiences**
- users w/ disabilities

### Active regions

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- **South Asia**
- Sub-Saharan Africa
- Oceania
- Global

### ECD Age

- **Pregnancy**
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- Preschool (3-5 years)
- Early primary (5+ years)

### Program integration

- Standalone tool
- **Hybrid**
- Both

## Government support

- **Yes**

- No

### Data protection policy

- Available
- Unavailable

## MomConnect

### Headline

MomConnect provides personalized and informative messages to pregnant persons and new mothers through a WhatsApp based chatbot.

### Tool/Initiative Link

<https://www.health.gov.za/momconnect/>

### Tool Overview

#### Tool/Initiative description

A South African National Department of Health initiative, MomConnect delivers stage-based, informative messages through a Whatsapp-based chatbot to new mothers from pregnancy through the child's second birthday. In areas with low bandwidth, users can also opt to receive messages over SMS. These messages, based on the Department of Health's [Road to Health booklet](#), provide advice on improving mothers' own health and well-being as well as on supporting all aspects of child development. The tool also provides need-based support through a virtual text-based helpdesk and a browsable library of informational content. Currently available in 11 regional languages to enable greater accessibility, MomConnect currently reaches 60% of all pregnant women attending a public health facility in South Africa.

#### Active since

2014

#### Developer

Reach Digital Health

#### Age

Pregnancy-2

## ECD Focus areas

- **Responsive caregiving**
- **Health and nutrition**
- **Developmental milestones**
- **Safety and security**
- **Caregiver well-being and mental health**
- **Early learning**

## Target audience

- **Parents and caregivers**
- home visitors
- Health care providers
- community health workers
- social workers
- ECCE personnel
- Program administrators

## Technology utilized

- App
- Audio/video assisted
- **Text-based messaging service**
- **Text-based Chatbots**
- Learning management system (LMS)
- Resource page/Database

## How it works

MomConnect provides new and expectant mothers information on caring for themselves and their child. The tool delivers messages on themes including maternal and child health and nutrition, maternal mental health and well-being, responsive caregiving, early stimulation, and protection from harm.

- Users receive weekly scheduled messages based on the stage of their pregnancy or age of their child. These messages also have links to external resources and referrals to other service providers for additional support
- MomConnect also provides specific need-based messages to support women at risk of hypertension and messages on prevention of mother to child transmission (PMTCT) to women living with HIV twice a week.
- A 24/7 interactive, virtual, text based helpdesk managed by staff at the Department of Health is also available to respond to any questions. The helpdesk has different levels of operators to answer incoming questions,
  - Generic frequently asked questions (FAQs) are addressed by administrative operators with the help of a pre-prepared template of standard responses
  - More medically complex questions are addressed by qualified medical practitioners who can provide personalized responses and support
- Users can also access a whole library of relevant content and resources through the chatbot menu.
- Users can also receive reminders about upcoming doctor appointments.
- In addition to messages for mothers, MomConnect also delivers messages to the ‘supporter’ (e.g., father, relative, friend) nominated by the mother two months before she gives birth. These weekly messages focus on how the supporter can help the mother immediately before and three months post childbirth (e.g., doctor visits, encouragement to breastfeed).
- Through the tool, eligible users can also receive vouchers and grants. During COVID, this feature was used to provide redeemable voucher codes to users eligible for cash transfers.

In the future, MomConnect plans to develop targeted messages for other maternal health risks like gestational diabetes. In addition, to improve the response time of the helpdesk, the chatbot will provide automated responses to FAQs.

#### **User engagement strategies**

- **Customized messages**
- Flexible tool experience
- Gamification
- Interactive quizzes
- **Nudges and reminders**
- Goal setting
- User progress tracking
- **Network sharing**

#### **Key functions**

- **Sharing tips and resources**
- Enabling connections
- **Providing referrals to service providers**
- **Providing expert support**
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

### **Reach, Relevance, and Access**

#### **Number of users**

4,540,000 users as of March 2023

#### **Country of origin**

South Africa

#### **Countries where tool has been used**

South Africa

#### **Language(s) in which tool is available**

The tool is available in 11 regional languages: isiZulu, isiXhosa, Afrikaans, English, Sesotho sa Leboa, Setswana, Sesotho, Xitsonga, siSwati, Tshivenda, and isiNdebele

#### **Dissemination strategies**

Recruitment of new users is driven through public health care centers across South Africa. When pregnant women visit the center for their first antenatal visit, the attending nurse shares information about MomConnect, collects relevant details, gets her consent for receiving messages, and signs her up for the

service. A MomConnect focal person in every province ensures that the public health centers in the province have the most updated information and required resources to recruit new mothers. Once a new user is recruited, they are onboarded over Whatsapp with information on what to expect from MomConnect and how to navigate the various features of the platform.

## Technology Components

### Technology requirements and features

To access MomConnect through the Whatsapp chatbot, users need access to a smartphone with internet connectivity. In areas with low technology access, users can opt to receive MomConnect messages over SMS and require a basic phone with cellular service. While MomConnect is offered free of charge, those accessing the tool through SMS might be charged by their service providers to send messages.

#### Connectivity requirements

- Partial offline functionality
- **Cellular service**
- **Internet connectivity/Mobile data**

#### Device types

- **basic mobile/feature phone**
- **smartphone**
- computer
- tablet
- e-reader
- specialized assistive devices

#### Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

MomConnect has a team of research data scientists both within Reach Digital Health and the South African Department of Health who collect and analyze a wide range of data sources to monitor the progress and evaluate the impact of the tool. The tool collects clinical data that is stored in the South African Department of Health's database as well as day-to-day operational data (e.g., number of users, numbers of messages delivered and read). User feedback and experience is also collected through short surveys in the chatbot, the helpdesk, and focus groups and interviews. In addition, different studies including randomized control trials are conducted to understand the impact of the tool. A [user evaluation](#) of MomConnect found that the service was well received by users who found the content useful in managing their pregnancy and also shared the messages with their partners and friends. A list of published papers on MomConnect can be found [here](#).

## Description of partnerships

MomConnect is primarily funded by Johnson and Johnson Foundation and ELMA Philanthropies. The Department of Health also provides some funding and is a key partner in supporting the content development for and implementation of the tool. [The Baby Center](#) also provided content for messages on mothers' mental health and well-being.

## Tool/Initiative Contact

### Tool contact:

For more information contact,

Lauren Kotze  
Strategic Design Lead  
[info@reachdigitalhealth.org](mailto:info@reachdigitalhealth.org)

## Additional Filters

**Equity considerations** - addresses the needs of:

- indigenous communities
- migrant/displaced communities
- **low socio-economic status**
- **ethno-linguistic minorities**
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

**Active regions**

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- South Asia
- **Sub-Saharan Africa**
- Oceania
- Global

**ECD Age**

- **Pregnancy**
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- Preschool (3-5 years)
- Early primary (5+ years)

**Program integration**

- **Standalone tool**
- Hybrid
- Both

**Government support**

- Yes
- No

**Data protection policy**

- Available
- Unavailable

## Paalan 1000

**Headline**

The Paalan 1000 app provides parenting advice, activities, and resources to pregnant persons and new parents across India

**Tool/Initiative Link**

<https://play.google.com/store/apps/details?id=com.paalanapp>

**Tool Overview****Tool/Initiative description**

The Paalan 1000 app provides age-appropriate parenting advice, tips and resources to pregnant women and parents of children aged 0-2 years in urban and rural India. The tips, developed both by the Aga Khan Foundation and adapted to the local context from [Vroom](#), cover all five areas of the [nurturing care framework](#). The app also allows parents to connect with each other, ask questions, and share parenting advice through a discussion forum. In addition to parents, the content in the app is also used by ASHA workers or frontline community health workers to disseminate parenting messages during their home visits. The Paalan 1000 app was launched by the Ministry of Health and Family Welfare as part of a campaign to promote early childhood development under the ambitious [Rashtriya Bal Swasthya Karyakram \(RBSK\)](#) program.

**Active since**

2022

**Developer**

Aga Khan Foundation

**Age**

Pregnancy - 2

**ECD Focus areas**

- Responsive caregiving
- Health and nutrition

- Developmental milestones
- **Safety and security**
- **Caregiver well-being and mental health**
- **Early learning**

### Technology utilized

#### Target audience

- **Parents and caregivers**
- home visitors
- Healthcare workers
- **community health workers**
- social workers
- ECCE personnel
- Program administrators

- **App**
- Audio/video assisted
- Text-based messaging service
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

### How it works

The Paalan 1000 app aims to deliver information related to health, nutrition, safety and security, responsive caregiving, and early learning opportunities to support child development from conception through the child's second birthday.

- The app provides practical advice on what parents and caregivers can do on a regular basis to advance the healthy development of their babies and turn interactions with their children into stimulating brain building moments.
- Based on the user (pregnant women, parents, or ASHA workers) and the stage of the pregnancy/ age of the child, the app pushes personalized age appropriate content
  - Each tip or activity is accompanied by a 'brainy background' which provides the science and rationale behind it.
  - Users also have the option to like their favorite tips and activities, share them with their network across other messaging platforms, and mark them complete once used.
- The app features a moderated forum where parents can ask questions and receive responses from other parents. To avoid misinformation, the responses are reviewed by the app administrators on the backend and approved only if they provide accurate information.
- The app also has a resource section which provides additional content and links to videos on child growth and development. Other essential resources, such as contact information for a dedicated state-run early childhood call center, is also provided where available.
- All the written content of the app can also be accessed via voiceovers which helps it reach low-literacy audiences.

In the future, the content in the app will be translated to more Indian languages. Additional features such as gamification (e.g., rewards and badges) and adding multiple child profiles is also under consideration.

### User engagement strategies

- **Customized messages**
- Flexible tool experience
- Gamification
- Interactive quizzes
- Nudges and reminders
- Goal setting
- User progress tracking
- **Network sharing**

#### **Key functions**

- **Sharing tips and resources**
- **Enabling connections**
- **Providing referrals to service providers**
- Providing expert support
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

#### **Reach, Relevance, and Access**

##### **Number of users**

9,656 users as of March, 2023

##### **Country of origin**

India

##### **Countries where tool has been used**

India

##### **Language(s) in which tool is available**

English and Hindi

##### **Dissemination strategies**

Several dissemination strategies have been used to increase user uptake in Uttar Pradesh and Delhi, the two states where the app has been promoted. ASHA workers, trained on the features of the app and recruitment process, use home visits to make parents aware of the app. Posters and other promotional materials with a QR code to download the app have been placed in health facilities and other community spaces to target users. In addition, field visits by the project team and the Paalan 1000 campaign events, focused on spreading awareness on providing better care for children in the first 1000 days, have also been used to spread the word about the app. Finally, social media posts have also been leveraged to reach parents.

## Technology Components

### Technology requirements and features

Users require a smartphone with access to the internet to download and use the Paalan 1000 app. Activities can be downloaded and accessed offline if they are shared from the app to a messaging platform (e.g., WhatsApp, Facebook Messenger)

#### Connectivity requirements

- Partial offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

#### Device types

- basic mobile/feature phone
- **smartphone**
- computer
- tablet
- e-reader
- specialized assistive devices

#### Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

To monitor progress, data dashboards on the backend track monthly trends on the activities users like and engage with, average time spent on the app, numbers of activities users are completing, and the types of users using the app. Google analytics is used to capture demographic data such as the geographic spread of users across cities and states. User feedback is collected through a section in the app, app reviews in the playstore and during field visits. A detailed research study to gather further insights and iterate offerings of the app will be undertaken in the summer of 2023.

### Description of partnerships

Funded by the Bernard van Leer Foundation, the concept and content of the app was developed by the Aga Khan Foundation. The UI/UX design, development, and maintenance of the app is managed by Digital Jalebi, an India-based design studio. Paalan 1000 has also partnered with the Bezos Family Foundation who supported the adaptation of Vroom content. The Government of India are key partners in scaling the app.

## Tool/Initiative Contact

### Tool contact:

For more information contact

Ashok Kumar Singh

ashok.kumar@akdn.org

## Additional Filters

### Equity considerations - addresses the needs of:

- indigenous communities
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- **rural communities**
- communities affected by emergencies
- lgbtq communities
- male caregivers
- **low-literacy audiences**
- users w/ disabilities

### Active regions

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- North America
- **South Asia**
- Sub-Saharan Africa
- Oceania
- Global

### ECD Age

- **Pregnancy**
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- Preschool (3-5 years)
- Early primary (5+ years)

### Program integration

- **Standalone tool**
- Hybrid
- Both

### Government support

- **Yes**
- No

### Data protection policy

- **Available**
- Unavailable

## Parent Education Program

### Headline

The Parent Education Program enables mothers in Jordan support their children's learning and development through a chatbot on Facebook Messenger.

### Tool/Initiative Link

<https://www.qrf.org/en/what-we-do/program-design-and-implementation/parental-education-program>

### Tool Overview

#### Tool/Initiative description

The Parent Education Program provides an 8-week course that equips mothers with the knowledge and skills to support their children's learning and development in the first 5 years of life. The program, initially implemented in-person, is currently delivered through a chatbot on Facebook Messenger and targets mothers with children aged 0-5 in Jordan and nearby countries. Using a culturally adapted and contextualized version of the [“What to expect in the Early Years Foundation Stage: a guide for parents”](#), the chatbot delivers weekly videos, fact sheets, and tips on seven key learning areas related to child development. Users can also access the course materials and additional resources through a [webpage](#).

#### Active since

In-person program - 2017

Chatbot - 2020

#### Developer

Queen Rania Foundation for Education and Development

#### Age

Birth to 5 years

#### ECD Focus areas

- **Responsive caregiving**
- Health and nutrition needs
- **Developmental milestones**

- **Safety and security**
- Caregiver well-being and mental health
- **Early learning**

### **Target audience**

- **Parents and caregivers**
- home visitors
- Health care providers
- community health workers
- social workers
- ECCE personnel
- Program administrators

### **Technology utilized**

- App
- Audio/video assisted
- Text-based messaging service
- **Text-based Chatbots**
- Learning management system (LMS)
- **Resource page/Database**

### **How it works**

The Parent Education Program aims to build parents' child-rearing competencies across seven areas of learning and development: communication and language; personal, social and emotional development; physical development; literacy; mathematics; understanding the world; and expressive arts and design.

- Content is shared in bite-sized information three times a week through the chatbot. This includes an informational video about the learning area, an informational fact sheet about the developmental stage, and short demonstration videos of simple, daily activities parents can do to support their children's development (adapted from [Vroom](#) tips).
- For each learning area, users receive content across three age bands (Birth-3 years, 3-4 years, 4-5 years)
- The program also uses quizzes, games, and polls every week to increase engagement.
- Users can type '?' into the chatbot to receive personalized support from a team member.
- The tool displays a progress tracker and provides course completion reminders and nudges. To further encourage uptake, the program team publishes a weekly leaderboard and provides a course completion certificate.
- Users also have access to an exclusive Facebook group with other members of their cohort which can be used to clarify questions, share pictures and videos of their children, and build community. In addition, they also have access to FAQ videos, live video sessions with experts, and a [webpage](#) with additional resources.

The Parent Education Program will test a self-paced training model on the chatbot with the next cohort where users can choose the areas of learning and development of interest and the sequence they want to follow. The program will also open registrations to fathers to facilitate increased engagement. Plans to develop a comprehensive app with access to informative content, expert advice, and a milestone tracker to support parents are also in the pipeline.

### **User engagement strategies**

- Customized messages
- **Flexible tool experience**
- **Gamification**
- **Interactive quizzes**
- **Nudges and reminders**
- Goal setting
- **User progress tracking**
- Network sharing

### **Key functions**

- **Sharing tips and resources**
- **Enabling connections**
- Providing referrals to service providers
- **Providing expert support**
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

## **Reach, Relevance, and Access**

### **Number of users**

7,838 users as of February, 2023

### **Country of origin**

Jordan

### **Countries where tool has been used**

Majority of the users are from Jordan. A small number of users are also based in Palestine, Algeria, Saudi Arabia, Egypt, Syria, and Iraq.

### **Language(s) in which tool is available**

Arabic

### **Dissemination strategies**

Given increased access to internet connectivity in the region, a high percentage of program participants are recruited through targeted ads on Google and Facebook. The program also conducts in-person

outreach activities such as distributing brochures and conducting face-to-face sessions to recruit mothers from low socio-economic communities. Interested users are required to register through a Google Form, which then provides them direct access to the chatbot.

## Technology Components

### Technology requirements and features

The Parent Education Program is delivered through a free chatbot on Facebook messenger. Users require a smartphone with access to the Internet and a Facebook profile to access the tool.

#### Connectivity requirements

- Partial offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

#### Device types

- basic mobile/feature phone
- **smartphone**
- computer
- tablet
- e-reader
- specialized assistive devices

#### Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

The program's monitoring and evaluation framework measures impact and the effectiveness of its implementation approaches.

- Pre- and post-assessments are conducted at the start of and end of a cohort respectively to measure changes in mothers' knowledge and behaviors.
- A tracer study is conducted three months after course completion to analyze the continued effects of the program.
- User feedback is also collected through focus groups, satisfaction surveys, and key informant interviews to inform changes in the next iteration of the program.

For more details on the program's monitoring and evaluation practices, see case study.

### Description of partnerships

The program collaborated with East London Research School in its early years to adapt their parenting guide. Currently, the program partners with the Ministry of Social Development, and the Ministry of Awqaf and Islamic Affairs in Jordan who support various outreach activities to recruit mothers. In addition, eFlow, the provider of the e-learning platform that hosts the chatbot, provides continued technical support to the program.

## Tool/Initiative Contact

### Tool contact:

For more details about the tool contact,

Dima Eimesayel

Early Years Programs Manager

deimesayel@qrf.org

Nour Alawamleh

Program Implementation Officer

nalawamleh@qrf.org

## Additional Filters

**Equity considerations** - addresses the needs of:

- indigenous communities
- migrant/displaced communities
- **low socio-economic status**
- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

### Active regions

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- **Middle East and North Africa**

- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

#### **ECD Age**

- Pregnancy
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- Early primary (5+ years)

#### **Program integration**

- **Standalone tool**
- Hybrid
- Both

#### **Government support**

- **Yes**
- No

#### **Data protection policy**

- **Available**
- Unavailable

## **ParentText**

#### **Headline**

ParentText provides parents and caregivers personalized and contextualized messages to support their children's development through a chatbot.

#### **Tool/Initiative Link**

<https://globalparenting.org/parenttext>

#### **Tool Overview**

#### **Tool/Initiative description**

ParentText is an automated messaging service that aims to support parents and caregivers of children aged 0 to 17 in low and middle income countries with personalized information on caring for themselves and

their child. The content, based on [Parenting for Lifelong Health's](#) (PLH) evidence-based parenting programs, focuses on relationship building, child development, early learning, violence prevention, caregiver mental health and well-being, and positive partner relationships. The chatbot messages have been adapted to local country contexts, translated to multiple languages, and can be delivered either through a chatbot on a commonly used messaging platform (e.g., WhatsApp, Telegram, Viber, Line) or through SMS.

PLH has also developed ParentChat, a tool that promotes playful parenting and violence prevention through online support groups delivered by a facilitator over text messaging platforms (e.g., WhatsApp, Viber, Signal, Telegram). More information on ParentChat can be found [here](#).

**Active since**

2022

**Developer and funder**

Parenting for Lifelong Health

**Age**

0-17 years

**ECD Focus areas**

**Responsive caregiving**

Health and nutrition

**Developmental milestones**

**Safety and Security**

**Caregiver well-being and mental health**

**Early learning**

**Target audience**

**Parents and caregivers**

home visitors  
Health care providers  
community health workers  
social workers  
ECCE personnel  
Program administrators

**Technology utilized**

App  
Audio/video assisted  
Text-based messaging service  
**Text-based Chatbots**  
Learning management system (LMS)  
Resource page/Database

**How it works**

ParentText provides parents and caregivers locally adapted messages across 6 key themes or parent goals: relationship building, behavior management, early learning and school engagement, intimate partner violence, violence prevention against children, and caregiver mental health and well-being.

- Users can select one of these thematic areas at a time and receive a series of skill-based modules on that theme. Each module consists of daily messages or sections for 3-5 days.
  - The messages are personalized based on the age and gender of the child.
  - The content of these weekly messages includes a goal, tips, videos, and activities to do at home to practice the skill.
  - The chatbot prompts parents to schedule time to implement the home activity. The following day after the scheduled time, the chatbot checks-in on how the activity went. If parents report a challenge in completing the activity, the chatbot helps troubleshoot with a tip on how to overcome the challenge.
  - The modules are also interspersed with interactive quizzes on child development, socio-emotional learning, and child safety and health.
- An emoji-based progress tracker helps users keep track of the sections they have completed.
- Upon completion of all the sections of the weekly module, users receive a badge. They can then move on to the second level in the thematic area or choose a different thematic area to work on. Users receive a trophy when they complete all modules within a thematic area or goal.
  - The second level of a thematic area allows parents to choose a goal based on the needs of their child. For example within behavior management, all parents would receive similar content (e.g., setting routines) in Level 1. In Level 2, they can choose between different goals (e.g., managing tantrums or sharing or violent behavior) based on their individual needs.
- Reminder messages encourage parents to engage with the content.
- Users can also access on-demand content by browsing the chatbot menu independently.
- ParentText has a text sensitivity feature that can recognize high risk keywords (e.g., violence, poisoning) to detect potentially dangerous situations. Once detected, the chatbot provides support by sharing contact details on where to seek help (e.g., police, ambulance)
- Users are also encouraged to share ParentText to others

PLH continues to innovate and redesign ParentText's offerings to support parents. Designs to provide more focused support to male caregivers, caregivers of children with disabilities, and families in migration are underway. Further, testing solutions where parents can receive support through human contact (e.g., referral to hotlines, community WhatsApp groups, in-person onboarding) is currently ongoing in Malaysia, Philippines, South Africa, and Mexico. Plans to incorporate a milestone assessment tool for parents are also in the pipeline.

### **User engagement strategies**

**Customized messages**

**Flexible tool experience**

**Gamification**

**Interactive quizzes**

**Nudges and reminders**

**Goal setting**  
**User progress tracking**  
**Network sharing**

**Key functions**

**Sharing tips and resources**

Enabling connections

**Referrals to service providers**

Providing expert support

Tracking ECD milestones

Supporting program implementation

Training program implementers

**Reach and Relevance**

**Number of users**

1745 users as of March 2023

**Country of origin**

Malaysia

**Countries where tool has been used**

The tool has been soft launched in Philippines, South Africa, Jamaica, Malaysia and is currently being prepared for launch in Thailand, Mexico, and Sri Lanka.

**Language(s) in which tool is available**

Bahasa Melayu, English, Filipino, isiXhosa, isiZulu, Afrikaans, SeSotho, Setswana

**Dissemination strategies**

ParentText utilizes various recruitment strategies including partnerships with schools, health clinics, and grocery stores, as well as program partners and government agencies. Social media and traditional media (e.g., radio, television broadcasts) are also used to spread the word.

**Technology Components**

**Technology requirements and features**

ParentText can be accessed either through a basic feature phone or a smartphone and both with or without internet. When signing up, parents have the option to choose their preferred data use - basic, medium, or high. This determines if they will receive only text-based messages or both text-based and multimedia messages (e.g., images, GIFs, videos).

ParentText is programmed using RapidPro, an open-source software used to build the workflow logic for mobile-based services, and can be delivered through the most commonly used messaging platform (e.g.,

Whatsapp, Telegram, Viber) in the country of implementation. In contexts with limited internet connectivity or low smartphone access, messages can also be delivered over SMS.

### **Device types**

**basic mobile/feature phone**  
**smartphone**  
computer  
tablet  
e-reader  
specialized assistive devices

### **Connectivity requirements**

Partial offline functionality  
**Cellular service**  
**Internet connectivity**

## **Costs**

### **Cost model**

**free**  
freemium  
ad-based  
subscription  
free with partnership  
price discrimination

## **Measurement and Partnerships**

### **M&E Approaches**

Data indicators monitored include user engagement data such as response and completion rates, and enrolment data including number of sign-ups and dropouts. To measure impact of the messages, ParentText has a feature to capture data through weekly assessments. These assessments, structured as reflection check-ins, include short questions for parents to reflect on how they used the message and if they observed any changes.

There are also several research studies ongoing across different countries to examine the feasibility of the tool, effective user engagement strategies, barriers and facilitators to engagement and enrolment, and effect of the tool on improving parenting practices. More details on the studies and forthcoming publications can be accessed [here](#).

### **Description of partnerships**

Parenting for Lifelong Health partners with UNICEF country offices, local NGOs, and government agencies to support the design, implementation, and dissemination of ParentText. PLH works with IDEMS International on tech development of the tool. Research partners include the Department of Social Policy at Oxford University, the Centre for Social Science Research at the University of Cape Town, the

Department of Psychology at Ateneo de Manila University, and the Faculty of Human Ecology at Universiti Putra Malaysia. Implementing partners include Clowns Without Borders South Africa, the Malaysian Association of Social Workers, and the Philippine Child Protection Network.

ParentText is funded by The LEGO Foundation, Oak Foundation, The Human Safety Net, and UNICEF.

### Tool/Initiative Contact

#### Tool contact:

For more information, contact Parenting for Lifelong Health at [info@parentingforlifelonghealth.org](mailto:info@parentingforlifelonghealth.org)

#### Additional filters:

##### Equity considerations - addresses the needs of:

indigenous communities  
migrant/displaced communities  
**low socio-economic status**  
ethno-linguistic minorities  
racial minorities  
**caregivers of children with disabilities**  
adolescent parents/caregivers  
rural communities  
communities affected by emergencies  
lgbtq communities  
**male caregivers**  
low-literacy audiences  
users w/ disabilities

##### Active regions

**East Asia and Pacific**  
Europe and Central Asia  
**Latin America and the Caribbean**  
Middle East and North Africa  
North America  
**South Asia**  
**Sub-Saharan Africa**  
Oceania  
Global

##### ECD Age

Pregnancy  
**Infant (0-12 months)**  
**Toddler (1-3 years)**  
**Preschool (3-5 years)**  
**Early primary (5+ years)**

##### Program integration

Standalone tool  
Hybrid  
**Both**

##### Government support

- Yes
- No

##### Data protection policy

**Available**  
Unavailable

## **Pashe Achhi**

### **Headline**

Pashe Achhi provides psychosocial and parenting support to mothers in Bangladesh through phone calls facilitated by trained frontline workers

### **Tool/Initiative Link**

<https://bracied.com/pashe-acchi/>

### **Tool Overview**

#### **Tool/Initiative description**

Developed during the COVID-19 pandemic, Pashe Achhi is a telecommunication based tool that provides psychosocial and parenting support to mothers with children aged 0-5 years in Bangladesh. The curriculum, developed by psychologists and experienced curriculum developers, focuses on caregiver well-being and play-based learning activities and is delivered by trained frontline workers or 'Play Leaders'. While some communities (e.g., Rohingya refugees) currently receive the curriculum in-person, the virtual model continues to innovate to reach a larger audience including fathers and ultra-poor communities.

### **Active since**

2020

### **Developer**

BRAC Institute of Educational Development

### **Age**

0-5 years

### **ECD Focus areas**

Responsive caregiving

**Health and nutrition needs**

Developmental milestones

Safety and security

## Caregiver well-being and mental health

### Early learning

#### Target audience

##### Parents and caregivers

home visitors  
Health care providers  
community health workers  
social workers  
ECCE personnel  
Program administrators

#### Technology utilized

App  
Learning management system (LMS)  
**Audio/video assisted** (e.g., automated phone calls, telephone counseling, zoom conferencing)  
Text-based messaging service  
Text-based Chatbots  
Learning management system (LMS)  
Resource page/Database

#### How it works

Pashe Achhi delivers psychosocial support and playful learning messages and activities to caregivers over phone calls.

- The telecommunication sessions are scripted and delivered by trained facilitators or play leaders.
- The weekly 20-minute sessions are personalized based on the age of the child. If the child is 3 and above, they are also included in the session and play leaders directly engage with both mother and child over speaker phone.
- Each session is divided into two parts:
  - The first half is dedicated to understanding and supporting the mother's well-being through active listening, empathy, and non-judgemental communication.
  - The second half is focused on sharing activities and tips on engaging children in playful learning through rhymes, physical play, storytelling, and art.
- BRAC is also testing the efficacy of small add-ons to the Pashe Achhi model with a broader audience.
  - With support from BRAC Education Program (BEP), the program has been scaled to reach a larger audience and support school readiness for children aged 4-5. In this model, the Pashe Achhi messages are shared with both fathers and mothers
  - The inclusion of voice messages in addition to phone calls is currently being tested with ultra-poor communities

#### User engagement strategies

##### Customized messages

Flexible tool experience  
Gamification  
Interactive quizzes  
Nudges and reminders  
Goal setting  
User progress tracking

Network sharing

**Key functions**

**Sharing tips and resources**

- Enabling connections
- Providing referrals to service providers
- Providing expert support
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

**Reach and Relevance**

**Number of users**

156,000 users as of March 2023

**Country of origin**

Bangladesh

**Countries where tool has been used**

Bangladesh

**Language(s) in which tool is available**

Bangla

**Dissemination strategies**

BRAC identifies potential users from their existing programs and communities in close proximity to public primary schools. The program’s para counselors and play leaders also reach out to community members over phone calls to raise awareness for the program and support recruitment..

**Technology Components**

**Technology requirements and features**

To receive Pashe Achhi calls, users need a basic mobile device with cellular service. Pashe Achhi is available free of charge to all users.

**Device types**

**Connectivity requirements**

### basic mobile/feature phone

smartphone  
computer  
tablet  
e-reader  
specialized assistive devices

Partial offline functionality

### Cellular service

Internet connectivity

### Cost model

#### free

freemium  
ad-based  
subscription  
free with partnership  
price discrimination

## Measurement and Partnerships

### M&E Approaches

To monitor program delivery, BRAC collects data including whether the call took place, the call duration, topics covered in the call, and user engagement during the session. A quality assessment tool was developed in partnership with New York University which helps assess quality of the engagement and dialogue during the session.

To evaluate program impact, data on knowledge, attitudes and practices of caregivers is collected every month to analyze change in caregiver behavior. BRAC also adapted the [Ages and Stages Questionnaire](#) to collect data at the start and end of the intervention on the cognitive, social and emotional skills of children and included the [Patient Health Questionnaire \(PHQ9\)](#), a validated tool to detect depressive and anxiety symptoms, to collect data on depressive symptoms among mothers. Further, BRAC also conducts studies on Pashe Achhi to identify effects of add-on services and variation in impact amongst different communities. An evaluation of Pashe Achhi examining the effects of the program on children's cognitive and socio-emotional development and variation development among children based on dosage has been completed and is currently being prepared for publication.

### Description of partnerships

The curriculum was developed and adapted for virtual use in partnership with Dr. Cassie Landers from Columbia University. Researchers from Global TIES for Children, New York University supported the development of the quality assessment tool. BRAC Institute also partnered with BRAC Education Program to take Pashe Achhi to scale for children aged 4-5 years to support their transition to kindergarten.

### Tool/Initiative Contact

**Tool contact:**

For more information contact:

Mohammad Safayet Khan

Research Fellow and Faculty Member, BRAC Institute of Educational Development

BRAC University

safayet.khan@bracu.ac.bd

**Additional Filters****Equity considerations** - addresses the needs of:

indigenous communities  
migrant/displaced communities  
**low socio-economic status**  
ethno-linguistic minorities  
racial minorities  
caregivers of children with disabilities  
adolescent parents/caregivers  
rural communities  
**communities affected by emergencies**  
lgbtq communities  
**male caregivers**  
**low-literacy audiences**  
users w/ disabilities

**Active regions**

East Asia and Pacific  
Europe and Central Asia  
Latin America and the Caribbean  
Middle East and North Africa  
North America  
**South Asia**  
Sub-Saharan Africa  
Oceania  
Global

**ECD Age**

Pregnancy  
**Infant (0-12 months)**  
**Toddler (1-3 years)**  
**Preschool (3-5 years)**  
Early primary (5+ years)

**Program integration**

**Standalone tool**  
Hybrid  
Both

**Government support**

Yes  
**No**

**Data protection policy**

**Available**  
Unavailable

## Pé de Infância Whatsapp Journey

### Headline

The Pé de Infância Whatsapp Journey is a resource manual including messages that can be shared over Whatsapp by trusted service providers and partners to parents and caregivers.

### Tool/Initiative Link

<https://pedeinfancia123.com.br/jornada-de-21-missoes-completa/>

### Tool Overview

#### Tool/Initiative description

The Pé de Infância Whatsapp Journey aims to promote playing, singing, and storytelling among parents/caregivers of children 5 and under in Brazil. Over the course of 21 days, service providers or other trusted community members (e.g., social workers, community health workers, home visitors) are encouraged to share daily content from a manual – including a message and accompanying audio and graphics that include tips to parents and caregivers – over Whatsapp. The Pé de Infância Whatsapp Journey has been in use across 11 municipalities in Brazil. It was developed through research into behavior change involving community members and experts.

#### Active since

2020

#### Developer

Allma Hub

#### Age

0-5

#### ECD Focus areas

- **Responsive caregiving**
- Health and nutrition needs
- Developmental milestones
- Safety and security
- Caregiver well-being and mental health
- **Early learning**

#### Target audience

- **Parents and caregivers**
- home visitors
- Health care providers
- community health workers
- supervisors
- social workers
- Early childhood care and education personnel
- Program administrators

### **Technology utilized**

- Mobile/tablet app
- Audio/video assisted (e.g., automated phone calls, telephone counseling, zoom conferencing)
- **Text-based messaging service (SMS, Whatsapp, Facebook Messenger, etc.)**
- Text-based Chatbots
- Learning management system (LMS)
- **Resource page/Database**

### **How it works**

The Pé de Infância Whatsapp Journey is shared as a manual with municipalities which then cascade it to service providers who can share with parents and caregivers.

- The manual includes a set of daily content that can be sent over Whatsapp over the course of 21 days. Each day's content focuses on a particular theme/tip (called a "mission") around playing, storytelling, and singing, and includes stickers, gifs, audio, and inspirational images. For example, one of the daily missions centers on telling bedtime stories.
- The Whatsapp Journey has primarily been distributed through existing community contacts in municipalities. For example, a health or social worker may already be in contact with a family over Whatsapp and then encouraged to share messages from the Whatsapp Journey.
- By including these pre-developed messages in a manual which is then distributed to municipalities, Allma Hub aims to reduce management costs and enable municipalities to determine the best approach for dissemination.

### **User engagement strategies**

- Customized messages
- Flexible tool experience
- Gamification
- Interactive quizzes

- Nudges and reminders
- Goal setting
- User progress tracking
- Network sharing

#### **Design features**

- **Sharing tips and resources**
- Facilitating peer connections
- Providing referrals to service providers
- Providing expert support
- Tracking ECD milestones

### **Reach, Relevance, and Access**

#### **Number of users**

Between July and September 2020, the Whatsapp Journey content was delivered to 500 and 150 families respectively in the Jundiaí and Brasileia municipalities with support of home visitors from the national program, Criança Feliz. In Pelotas, the content was used by home visitors from the Criança Feliz and Primeira Infância Melhor Programs, as well as in 33 public schools, to reach approximately 7,100 children.

#### **Country of origin**

Brazil

#### **Countries where tool has been used**

Brazil

#### **Language(s) in which tool is available**

Portuguese

#### **Dissemination strategies**

The Whatsapp Journey relies on trusted frontline professionals who already have a relationship with families and existing channels of communication. Allma Hub has shared the Whatsapp Journey as a manual with municipalities which then cascade it to service providers who can share with parents and caregivers.

### **Technology Components**

#### **Technology requirements and features**

The Whatsapp Journey requires a smartphone. While internet connectivity is necessary to initially access the content, it can be downloaded and reviewed offline.

#### **Minimum connectivity requirements**

#### **Device specifications**

- **Partial or full offline functionality**
- Cellular service
- Internet connectivity/Mobile data
- basic mobile/feature phone
- **smartphone**
- computer
- tablet
- e-reader
- specialized assistive devices

#### **Cost model**

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination (free for specific user populations)

### **Measurement and Partnerships**

#### **M&E Approaches**

User feedback and testing has informed the development of the Pé de Infância Whatsapp Journey. Allma Hub designed a prototype and then conducted focus groups with parents to test the messages. Some of the learnings from this user testing included that parents need simple, short text that is easy to digest and that a relatable and trusted contact is important for transmitting messages. This testing also surfaced the accessibility of Whatsapp as a platform for engagement which is in high use among low-income families.

#### **Description of partnerships**

The development of the Pé de Infância Whatsapp Journey was funded by Bernard van Leer Foundation as part of the Urban 95 program. Pé de Infância has collaborated with ECD focal points in 11 municipalities to identify service providers and community members who can disseminate the Whatsapp Journey to parents and caregivers.

#### **Tool/Initiative Contact**

##### **Tool contact:**

#### **Additional Filters**

**Equity considerations** - meets the needs of:

- indigenous communities

- migrant/displaced communities
- **low socio-economic status**
- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- male caregivers
- **low-literacy audiences**
- users w/ disabilities

### **Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- **Latin America and the Caribbean**
- Middle East and North Africa
- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

### **ECD Ages of interest**

- Pregnancy
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- Early primary (5+ years)

### **Program integration**

- Standalone tool
- **Hybrid (used as part of a program or other services)**
- Both (can either be used independently or embedded in a program)

### **Government support or partnership**

- **Yes**
- No

### **Data protection policy**

- Available
- **Unavailable**

## **Pregnancy + and Baby +**

### **Headline**

Pregnancy + and Baby + are commercially available apps which provide parents and caregivers with tips and advice, as well as tracking tools to support pregnancy and care for the baby during the first year of life.

### **Tool/Initiative Link**

<https://philips-digital.com/>

### **Tool Overview**

#### **Tool/Initiative description**

Based on the stage of pregnancy and age of the child, the Pregnancy+ and Baby+ apps provides customized content including a baby size guide during pregnancy and weekly development guides for infants. The apps also include articles and daily posts with information on topics like nutrition, breastfeeding, and activity ideas for babies, and include a number of tracking tools such as a kick counter and contraction timer in pregnancy and growth and feeding trackers during infancy. The apps are available in over 22 languages, and are accessible globally.

**Active since**

2012

**Developer**

Philips Digital

**Age**

Pregnancy+: Pregnancy

Baby +: 0-1

**ECD Focus areas**

- **Responsive caregiving**
- **Health and nutrition needs**
- **Developmental milestones**
- Safety and security
- **Caregiver well-being and mental health**
- Early learning

**Target audience**

- **Parents and caregivers**
- home visitors
- Health care providers
- community health workers
- supervisors
- social workers
- Early childhood care and education personnel
- Program administrators

**Technology utilized**

- **App**
- Audio/video assisted (e.g., automated phone calls, telephone counseling, zoom conferencing)
- Text-based messaging service (SMS, Whatsapp, Facebook Messenger, etc.)
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

## How it works

The Pregnancy+ app provides information on baby development, pregnancy guides and information, pregnancy tools, and features to support planning:

- Customized based on the stage of pregnancy, the app offers interactive 3D models to visualize baby's development, and offers a size guide comparing baby's size to fruits, animals, and sweets.
- A range of content provides in-depth information on topics like breastfeeding and exercise during pregnancy including daily articles tailored to stage of pregnancy and blog posts with tips and advice. In addition, the app includes guides which help parents understand what to expect in each week of pregnancy.
- A pregnancy due date calculator, kick counter, weight log, and contraction time are also available. The app includes a calendar to keep track of prenatal appointments, a feature to help elaborate a birth plan, and a baby name repository.
- Pregnant persons can invite friends and family to download the app and link to their account to follow stage based updates.

The Baby + app offers articles, videos, tracking tools, and memory savers.:

- Based on the age of the child, the app shares weekly development guides which show the growth of the baby, as well as parenting guides. There are also activity ideas to keep baby entertained, and videos to support breastfeeding and proper latch.
- A variety of trackers including on feeding, weight, growth, sleep, and baby health support parents in logging regular developments. In addition, the app offers a number of ways in which parents can record memories including a daily journal and Face-A-Day which reminds parents to take a picture every day.
- The app allows families to customize their experience for multiple children or twins. Parents can invite friends and family to download the app and link to their account to follow stage based updates.

## User engagement strategies

- **Customized messages**
- Flexible tool experience
- Gamification
- Interactive quizzes
- **Nudges and reminders to prompt particular actions**
- Goal setting
- **User progress tracking**
- **Network sharing**

## Design features

- **Sharing tips and resources**
- Facilitating peer connections
- Providing referrals to service providers
- Providing expert support

- **Tracking ECD milestones**

## **Reach, Relevance, and Access**

### **Number of users**

Pregnancy +: 2 million active daily users

Baby +: 200,000 active daily users

### **Country of origin**

United Kingdom

### **Countries where tool has been used**

Global

### **Language(s) in which tool is available**

English, Arabic, Czech, Danish, Dutch, Finnish, French, German, Indonesian, Italian, Japanese, Korean, Norwegian Bokmål, Polish, Portuguese, Romanian, Russian, Spanish, Swedish, Turkish

### **Dissemination strategies**

Many users learn about the apps through word of mouth.

## **Technology Components**

### **Technology requirements and features**

Pregnancy + and Baby + are accessible via smartphone/tablets and require internet connectivity. The apps are available for free though premium options are available through subscription.

### **Minimum connectivity requirements**

- Partial offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

### **Device specifications**

- basic mobile/feature phone
- **smartphone**
- computer
- **tablet**
- e-reader
- specialized assistive devices

### **Cost model**

- **free**
- freemium
- **ad-based**
- **subscription**

- free with partnership
- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

### Description of partnerships

### Tool/Initiative Contact

#### Tool contact:

support@health-and-parenting.com

### Additional Filters

**Equity considerations** - meets the needs of:

- indigenous communities
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities
- **racial minorities**
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

### Regions where active

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa

- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- **Global**

#### **ECD Ages of interest**

- **Pregnancy**
- **Infant (0-12 months)**
- Toddler (1-3 years)
- Preschool (3-5 years)
- Early primary (5+ years)

#### **Program integration**

- **Standalone tool**
- Hybrid (used as part of a program or other services)
- Both (can either be used independently or embedded in a program)

#### **Government support or partnership**

- Yes
- **No**

#### **Data protection policy**

- **Available**
- Unavailable

## **Ready Rosie**

#### **Headline**

Ready Rosie is a technology-enabled platform that connects schools and families with children aged 0-9 in the United States.

**Tool/Initiative Link**

<https://www.readyrosie.com/>

**Tool Overview****Tool/Initiative description**

To support family engagement efforts, ReadyRosie delivers parenting curriculum in the form of videos and workshops to caregivers, facilitates communications between families and teachers, and provides online or live professional learning to teachers. Ready Rosie partners with non-profit and government-funded programs. The platform has over one million users and is available in both English and Spanish, with closed captioning in additional languages.

**Active since**

2012

**Developer**

Teaching Strategies

**Age**

0-9

**ECD Focus areas**

- [Responsive caregiving](#)
- [Health and nutrition needs](#)
- Developmental milestones
- Safety and security
- Caregiver well-being and mental health
- [Early learning](#)

**Target audience**

- [Parents and caregivers](#)
- home visitors
- Health care providers
- community health workers
- supervisors
- social workers
- [ECCE personnel](#)
- [Program administrators](#)

## Technology utilized

- Mobile/tablet app
- Audio/video assisted (e.g., automated phone calls, telephone counseling, zoom conferencing)
- Text-based messaging service (SMS, Whatsapp, Facebook Messenger, etc.)
- Text-based Chatbots
- Learning management system (LMS)
- [Resource page/Database](#)

## How it works

ReadyRosie supports family engagement by delivering a parenting curriculum and connecting teachers and caregivers through an online, interactive platform. The tool focuses on integrating learning at home and is unique for its direct partnership with schools, NGOs, and libraries, as well as its expansive digital library of evidence-based videos.

### Parenting Curriculum

- Parents and caregivers have access to a library of over 1,000 short, 2-minute ‘Modeled Moment’ videos that demonstrate positive practices with children.
  - The evidence-based videos demonstrate how parents can integrate learning, communication skills, and more into their daily interactions.
  - ReadyRosie’s growing list of content categories includes: language and literacy, math and reasoning, family health and wellbeing, research and answers, social-emotional learning, and ReadyBaby, which focuses on infant engagement and development.
- Parents also have access to short, educational videos featuring child development experts.

### Communication and Knowledge Sharing

- The tool offers two-way communication between teachers and parents: teachers can select and send specific videos to the parents of their students, while parents have the opportunity to send direct, private messages to teachers.
- Through their digital platform, ReadyRosie offers a forum for sharing tips and recommendations between parents and educators.
- Members receive weekly messages with digital content through email or text.
- Educators can also create a playlist of videos for parents, customizing their classroom page according to age and language.

### Workshops and Data Visualization

- ReadyRosie offers family workshops, ranging from 10 minutes to 1.5 hours, for both families and educators.
- Teachers can access professional development content through live and online workshops.
- The tool also allows parents to set goals and tracks the learning outcomes and progress toward these goals.
- Through the data dashboard, learning outcomes can be visualized and shared according to individual student, classroom, or school.

In the future, the tool will offer videos in additional languages, including Arabic. ReadyRosie also has plans for geographic expansion, particularly to international schools outside of the United States.

### **User engagement strategies**

- Customized messages
- [Flexible tool experience](#)
- Gamification
- Interactive quizzes
- Nudges and reminders to prompt particular actions
- [Goal setting](#)
- [User progress tracking](#)
- [Network sharing](#)

### **Design features**

- [Sharing tips and resources](#)
- Facilitating peer connections
- Providing referrals to service providers
- [Providing expert support](#)
- Tracking developmental milestones, immunisations, etc.

## **Reach, Relevance, and Access**

### **Number of users**

As of March 2023, over one million users are on the ReadyRosie platform. They partner with over 5000 schools and programs nationwide.

### **Country of origin**

United States

### **Countries where tool has been used**

United States; Some international schools and military bases outside of the US

### **Language(s) in which tool is available**

The tool is available in English and Spanish. Closed captioning for videos is available in English, Spanish, Arabic, Vietnamese, Dari, Samoan, Haitian Creole, Khmer, and Simplified Chinese.

## Dissemination strategies

ReadyRosie primarily engages its audience through partnerships with public schools and NGOs. Demos for educators, administrators, and caregivers are also offered online.

## Technology Components

### Technology requirements and features

ReadyRosie can be accessed through a web-based database. It requires use of a smartphone, computer, or tablet. The platform is free for parents and caregivers whose children are students at participating schools or organizations. A tiered pricing model is used to determine the cost per classroom.

#### Minimum connectivity requirements

- Partial or full offline functionality
- Cellular service
- [Internet connectivity/Mobile data](#)

#### Device specifications

- basic mobile/feature phone
- [smartphone](#)
- [computer](#)
- [tablet](#)
- e-reader
- specialized assistive devices

#### Cost model

- free
- freemium
- ad-based
- [subscription](#)
- free with partnership
- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

ReadyRosie offers pre and post surveys and workshop evaluation, both of which are optional and available to schools. A bi-annual ReadyRosie program survey is conducted with partners to determine customer satisfaction and learnings from the home learning video curriculum.

In 2018, ReadyRosie partnered with the University of Pittsburgh's Office of Child Development to conduct a multi-phase evaluation of the program. The results of this initial evaluation found that family workshops hold significant value in the comprehensive ReadyRosie program. Feedback from families and

schools that participated in the workshops indicate positive outcomes; however, other factors, such as school leadership, also play an important role in promoting school-wide usage and family engagement.

For more information on research and evaluation see: <https://www.readyrosie.com/research/>.

### **Description of partnerships**

ReadyRosie has focused its efforts on partnering with government-funded programs, nonprofits, and various school districts. The tool qualifies for ESSA (Every Student Succeeds Act) government funding in the United States. Key partners include Head Start (a public preschool program), public elementary schools, school districts, public libraries, programs for migrant youth and indigenous communities, and medical institutions.

### **Tool/Initiative Contact**

#### **Tool contact:**

Kevin Roden, Vice President, Partner Success at Teaching Strategies  
kevin.roden@teachingstrategies.com  
kevin@readyrosie.com

### **Additional Filters**

**Equity considerations** - meets the needs of:

- indigenous communities
- migrant/displaced communities
- [low socio-economic status](#)
- [ethno-linguistic minorities](#)
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

### **Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean

- Middle East and North Africa
- [North America](#)
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

#### **ECD Ages of interest**

- Pregnancy
- [Infant \(0-12 months\)](#)
- [Toddler \(1-3 years\)](#)
- [Preschool \(3-5 years\)](#)
- [Early primary \(5+ years\)](#)

#### **Program integration**

- Standalone tool
- [Hybrid \(used as part of a program or other services\)](#)
- Both (can either be used independently or embedded in a program)

#### **Government support or partnership**

- [Yes](#)
- No

#### **Data protection policy**

- [Available](#)
- Unavailable

#### **Additional References**

[https://teachingstrategies.com/webinar/transformational-family-partnerships-with-readyrosie/#gf\\_5](https://teachingstrategies.com/webinar/transformational-family-partnerships-with-readyrosie/#gf_5)

## **Sésamo Chatbot**

#### **Headline**

The Sésamo Chatbot offers educators and caregivers of children from birth through age 6 an automated assistant through WhatsApp which provides free, educational content.

#### **Tool/Initiative Link**

[Turn.io and Sesame Workshop](#)

#### **Tool Overview**

**Tool/Initiative description**

Through extensive research and testing, the Chatbot has been refined from its original launch in 14 Latin American countries with videos, games, and fun activities relating to health, wellbeing, early learning, and social-emotional learning. Different generations of the Chatbot have been tailored to meet the needs of specific contexts including migrant and displaced families from Venezuela. The tool supports Sesame's outreach programs in close collaboration with local partners including the Secretariat of Education (SEP) in three Mexican states and Instituto Colombiano de Bienestar Familiar (ICBF) in Colombia.

**Active since**

2020

**Developer**

Sesame Workshop/Plaza Sésamo

**Age**

0-6

**ECD Focus areas**

- **Responsive caregiving**
- **Health and nutrition needs**
- Developmental milestones
- Safety and security
- **Caregiver well-being and mental health**
- **Early learning**

**Target audience**

- **Parents and caregivers**
- home visitors
- Health care providers
- community health workers
- supervisors
- social workers
- **Early childhood care and education personnel**
- Program administrators

**Technology utilized**

- App
- Audio/video assisted
- Text-based messaging service
- **Text-based Chatbots**
- Learning management system (LMS)
- Resource page/Database

## How it works

Sésamo Chatbot connects caregivers and teachers to a range of free learning resources, including videos, educational games, and fun activities through an automated assistant on WhatsApp.

- Sésamo Chatbot has four generations, which are all currently active. Users can decide which generation they want to engage with by messaging a specific number to gain access.
  - The first generation was launched at the start of the COVID-19 pandemic, with a wide selection of Sesame content. The chatbot was promoted through TV broadcast of Plaza Sésamo programming across 14 Latin American countries.
  - The second generation was designed to address the needs of migrant and displaced families from Venezuela, with new materials focused on social-emotional learning, wellbeing, school reinforcement, and community.
  - The third generation centers on promoting healthy habits and encouraging adults to model healthy behaviors for children.
  - The fourth generation is dedicated to educators, with play activities and other content that they can download, and share with caregivers to engage at home with their children.
- The resources, including graphics, audio files, and short videos, can be downloaded and used with limited access to technology or internet.
  - New materials focused on social-emotional learning to meet the needs of families affected by crisis are regularly added.
  - The menu is updated with new content twice a month with resources from the general database.
  - Descriptive audio accompanies the text and simplified instructions are shared to accommodate users with low-literacy.
  - To increase user engagement, the Chatbot sends messages and push notifications; interactive quizzes and stickers as prizes are also used to motivate interaction.

## User engagement strategies

- Customized messages
- Flexible tool experience
- **Gamification**
- **Interactive quizzes**
- **Nudges and reminders**
- Goal setting
- User progress tracking
- Network sharing

## Design features

- **Sharing tips and resources**
- Facilitating peer connections
- Providing referrals to service providers
- Providing expert support
- Tracking ECD milestones

- **Supporting program implementation**
- Training program implementers

## Reach, Relevance, and Access

### Number of users

Since launching in April 2020, the Sésamo Chatbot has had 26,185 total users, with an engagement of 864,155 messages. Sesame Workshop is active in 14 Latin American countries.

### Country of origin

Mexico

### Countries where tool has been used

14 countries in Latin America, including Mexico, Colombia, Peru, Bolivia, and Brazil.

### Language(s) in which tool is available

Spanish

### Dissemination strategies

Plaza Sésamo works closely with partners and community organizations to reach parents through various strategies, such as mass media, social media, and community-based communications campaigns. For example, Plaza Sésamo collaborated with WorldVision to promote the tool among Venezuelan caregivers at community kitchens and during informational sessions at Jornadas Sésamo (Sésamo days), while explainer videos and digital posters were shared through World Vision's WhatsApp groups with beneficiaries of migrant-facing interventions.

## Technology requirements and features

The Sésamo chatbot is currently available for use through Whatsapp on smartphones. Internet connectivity or mobile data is required to receive the messages, but content can be downloaded and viewed offline.

### Minimum connectivity requirements

- **Partial or full offline functionality**
- Cellular service
- Internet connectivity/Mobile data

### Device specifications

- basic mobile/feature phone
- **smartphone**
- computer
- tablet
- e-reader
- specialized assistive devices

## Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

In 2021, Sésamo and partner organization World Vision conducted a [study](#) to validate the effectiveness of Jardín Sésamo (plug-in devices that broadcast over free local Wi-Fi access in selected spaces) and Sésamo Chatbot as alternative delivery channels. The study examined World Vision services provided to migrant and host community families in Lima, Trujillo, and Tumbes, Peru, revealing 30,013 Sésamo Chatbot interactions and 96.8% of caregiver respondents indicating weekly use of Sesame content at home.

The project aimed at supporting Venezuelan families in Peru has also undergone monitoring and evaluation to gather insights and improve its effectiveness.

### Description of partnerships

Implementing partners include World Vision, Norwegian Refugee Council, and Instituto Colombiano de Bienestar Familiar (ICBF). Turn.io serves as the tech partner for developing the platform. Sésamo has also partnered with leading humanitarian organizations in Peru to address children in crisis.

Funding partners include the Inter-American Development Bank (IDB), JuntosEsMejor Challenge, USAID, IDB, Bernard van Leer Foundation, the Ministry for Foreign Affairs of Finland, and the LEGO Foundation.

## Tool/Initiative Contact

### Tool contact:

Jocelyn Negrete

[jocelyn.negrete@sesame.org](mailto:jocelyn.negrete@sesame.org)

### Additional Filters

**Equity considerations** - meets the needs of:

- indigenous communities
- **migrant/displaced communities**
- **low socio-economic status**

- ethno-linguistic minorities
- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- rural communities
- **communities affected by emergencies**
- lgbtq communities
- male caregivers
- **low-literacy audiences**
- users w/ disabilities

### **Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- **Latin America and the Caribbean**
- Middle East and North Africa
- North America
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

### **ECD Ages of interest**

- Pregnancy
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- **Early primary (5+ years)**

### **Program integration**

- Standalone tool
- Hybrid (used as part of a program or other services)
- **Both (can either be used independently or embedded in a program)**

### **Government support or partnership**

- **Yes**
- No

### **Data protection policy**

- **Available**
- Unavailable

## SMS4Dads

### Headline

SMS4Dads supports dads and dads-to-be across Australia with information and resources to care for their babies and partners through short text messages

### Tool/Initiative Link

<https://www.sms4dads.com.au/>

### Tool Overview

#### Tool/Initiative description

SMS4Dads helps dads and dads-to-be across Australia understand and connect with their baby and partner by providing relevant information and resources straight to their phones. These messages, developed by a team of pediatricians, midwives, researchers, and specialist health workers, focus on the baby's health and development from pregnancy through the baby's first birthday. The SMS-based tool also provides resources to support fathers' well-being. The tool is available free of charge and includes customized, culturally-appropriate messages for fathers who identify as Aboriginal or Torres Strait Islander.

#### Active since

2015

#### Developer

The University of Newcastle

#### Age

Pregnancy - 1 year

#### ECD Focus areas

- **Responsive caregiving**

- **Health and nutrition**
- Developmental milestones
- Safety and security
- **Caregiver well-being and mental health**
- Early learning

#### Target audience

- **Parents and caregivers**
- home visitors
- community health workers
- social workers
- ECCE personnel
- Program administrators

#### Technology utilized

- App
- Audio/video assisted
- **Text-based messaging service**
- Text-based Chatbots
- Learning management system (LMS)
- Resource page/Database

#### How it works

SMS4Dads supports fathers to bond with and care for their baby, work as a team with their partner, and look after their own mental health.

- Users receive short, user-tested messages three days a week related to the stage of the pregnancy or the age of the baby. These include:
  - tips and encouragement about their role and influence as a father,
  - health related and developmental information related to looking after the baby, and
  - messages about being mindful of their own health and ways to support their partner.
- The tool also has a *MoodChecker* message set that checks in on fathers' well-being and how they are coping every three weeks. If the dad flags that he's not doing well, a relevant health professional reaches out to provide additional support.
- The tone of messages are in the "voice" of the baby and one-third of messages also have links to additional information and helpful resources.

In the future, SMS4Dads plans to launch message sets to support dads who have a premature baby or who have experienced a pregnancy loss.

#### User engagement strategies

- **Customized messages**
- Flexible tool experience
- Gamification
- **Interactive quizzes**
- **Nudges and reminders**
- Goal setting
- User progress tracking
- Network sharing

## Key functions

- **Sharing tips and resources**
- Enabling connections
- **Providing referrals to service providers**
- **Providing expert support**
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

## Reach, Relevance, and Access

### Number of users

5,000 users as of January, 2023

### Country of origin

Australia

### Countries where tool has been used

The tool is available across Australia. It has also been piloted in Kenya, Colombia and Spain.

### Language(s) in which tool is available

English, Swahili, Spanish

### Dissemination strategies

The tool leverages social media platforms through targeted ads on Facebook and Instagram, influencer marketing, and planned posts on its own and its partners' social media handles to target fathers and their partners. A dedicated marketing budget supports the creation of radio advertisements to reach fathers in rural areas. In addition, SMS4Dads also partners with health centers where providers are briefed about the tool and given informative pamphlets for distribution. Interested users are asked to fill out an onboarding survey with basic information and begin to receive brief messages three times a week.

## Technology Components

### Technology requirements and features

Users require a basic mobile phone with cellular service to receive messages from SMS4Dads.

#### Connectivity requirements

- Partial offline functionality
- **Cellular service**
- Internet connectivity/Mobile data

#### Device types

- **basic mobile/feature phone**
- smartphone
- computer
- tablet
- e-reader
- specialized assistive devices

### Cost model

- **free**
- freemium
- ad-based
- subscription
- free with partnership
- price discrimination

## Measurement and Partnerships

### M&E Approaches

SMS4Dads collects user engagement data including how long users were part of the program (enrolment to exit) and how many users accessed links to further information or professional help. The responses to the Mood Checker messages are also recorded. Acceptability surveys and exit surveys are also administered and recorded.

SMS4Dads carries out user research to tailor-make messages for various groups. In addition, the tool has also conducted research on user engagement across groups, feasibility studies, and process evaluations. Key research questions addressed by these studies include variation in engagement across urban and rural areas, improving quality of partner support, and acceptability of the tool across the target population. The Telethon Kids Institute is carrying out an evaluation of the program. A list of published research studies on SMS4Dads can be found [here](#).

### Description of partnerships

In 2021, SMS4Dads received federal government funding from the Australian Department of Health to scale-up nationally. Other partners include PANDA (Perinatal Anxiety and Depression Australia) and Red Nose who provide mental health and grief management services respectively. SMS4Dads has also partnered with National Rural Health Alliance and Indigenous HealthInfoNet to expand their support to fathers in rural and remote areas and Aboriginal and Torres Strait Islander men. The Telethon Kids Institute is the evaluation partner of the tool.

## Tool/Initiative Contact

### Tool contact:

For more details about the tool contact [info@sms4dads.com.au](mailto:info@sms4dads.com.au)

## Additional Filters

**Equity considerations** - addresses the needs of:

- **indigenous communities**
- migrant/displaced communities
- low socio-economic status
- ethno-linguistic minorities

**Regions where active**

- East Asia and Pacific
- Europe and Central Asia
- **Latin America and the Caribbean**

- racial minorities
- caregivers of children with disabilities
- adolescent parents/caregivers
- **rural communities**
- communities affected by emergencies
- lgbtq communities
- **male caregivers**
- low-literacy audiences
- users w/ disabilities

- Middle East and North Africa
- North America
- South Asia
- **Sub-Saharan Africa**
- **Oceania**
- Global

#### **ECD Age**

- **Pregnancy**
- **Infant (0-12 months)**
- Toddler (1-3 years)
- Preschool (3-5 years)
- Early primary (5+ years)

#### **Program integration**

- Standalone tool
- Hybrid
- **Both**

#### **Government support**

- **Yes**
- No

#### **Data protection policy**

- **Available**
- Unavailable

#### **References:**

- Key informant interview
- Website: <https://www.sms4dads.com.au/>

## Thinking Healthy (digital version)

### Headline

The Thinking Healthy app supports and trains community health volunteers deliver and monitor their sessions with women experiencing perinatal depression

### Tool/Initiative Link

No link

### Tool Overview

#### Tool/Initiative description

Thinking Healthy is a WHO-endorsed, evidence-based program that supports non-specialist service providers referred to as “peers” to deliver mental health interventions to support mothers experiencing perinatal depression from pregnancy through one year postpartum. The app helps peers implement key ingredients of the program with expected quality, provides training and supervision modules, and supports data collection to monitor progress. The efficacy of the app is currently being evaluated in rural Pakistan.

### Age

Pregnancy - 6 months postnatal

### Active since

2021

### Developer

Human Development Research Foundation, Pakistan and University of Liverpool, UK

### ECD Focus areas

**Responsive caregiving**

**Health and nutrition**

Developmental milestones

Safety and security  
**Caregiver well-being and mental health**  
Early learning

### Target audience

Parents and caregivers  
home visitors  
Health care providers  
**community health workers**  
**supervisors**  
social workers  
ECCE personnel  
Program administrators

### Technology utilized

**App**  
Audio/video assisted  
Text-based messaging service  
Text-based Chatbots  
Learning management system (LMS)  
Resource page/Database

### How it works

The Thinking Healthy program uses techniques based on cognitive behavioral therapy (CBT), which aims to modify negative thought patterns to address emotional and behavioral challenges, to help mothers develop problem solving skills and improve their mental health.

- The program, delivered by peers or non-specialist workers with support of the app, includes 8 30-60 minute sessions that focus on three areas of mothers' well-being: their physical and mental health, connection with her baby, and relationship with significant others.
  - To maintain the integrity of the session content, key therapeutic messages are delivered through the app in short segments by 'avatar therapists' or animated characters through contextually-appropriate illustrations and voiceover videos, while the peer provides empathy and support. The peer pauses between segments to facilitate a discussion on the relevance of the message on the mother's own life and offers encouragement.
  - The app also has brief animated videos that depict stories from the lives of women from the community who experienced depression and how they overcame it.
- Peers also help mothers set a goal related to their health (e.g., diet, relaxation exercises) and can track its progress on the app through a 'progress tree' that flowers when a goal is achieved. In case the mother has not been able to make progress towards the goal, the peer helps develop a solution to address it by utilizing a pre-populated list of challenges and solutions located in the app.
- Validated screening and evaluation tools for maternal depression have been integrated into the app to help peers identify women experiencing depression and track improvement in their symptoms over time. Peers also have access to referral guidelines through the app to support mothers who do not show improvement or are at a risk of self harm or interpersonal violence.
- The app can also be used by peer trainers to conduct group trainings and supervision sessions for the peers.

- The training modules feature ‘avatar trainers’ who deliver the core messages that focus on the use of technology, developing counseling skills, and dealing with challenging situations. Peer trainers pause after each message to facilitate practice through role plays.
- The app also has modules on supervision and provides access to peers’ attendance, session duration, and progress made by their clients. During monthly supervision meetings, peer trainers can access this data to discuss challenges, brainstorm solutions, and if needed, revise training content.
- The app was [co-developed and user-tested](#) with the end users using principles of human centered design (see case study)

In the future, there will also be a mobile app for mothers so they can refer back to session content on demand. Further, on completion of the ongoing evaluation, the program will be translated to English and content will be tweaked to be context-agnostic so it can be used in other settings.

### **User engagement strategies**

Customized messages  
Flexible tool experience

#### **Gamification**

Interactive quizzes  
Nudges and reminders

#### **Goal setting**

#### **User progress tracking**

Network sharing

### **Key functions**

Sharing tips and resources  
Enabling connections

#### **Providing referrals to service providers**

Providing expert support  
Tracking ECD milestones

#### **Supporting program implementation**

#### **Training program implementers**

### **Reach and Relevance**

#### **Number of users**

50 peers and 500 women with perinatal depression are currently part of the trial.

#### **Country of origin**

Pakistan

#### **Countries where tool has been used**

The tool is currently being evaluated in Pakistan.

## Language(s) in which tool is available

Urdu

## Dissemination strategies

To identify women from the community who could serve as a peer, the Thinking Healthy team worked closely with the [Lady Health Worker Program](#), a program instituted by Pakistan's Ministry of Health to build a network of community health workers. Identified women were then interviewed and recruited. For the first session, lady health workers accompanied the peers to mothers' homes to facilitate an introduction.

## Technology Components

### Technology requirements and features

The Thinking Healthy app is currently available for use on tablets and smartphones. Once downloaded, the app can be used completely offline and all the data inputted by peers (e.g., session duration, progress of mother) is stored in the tablet. When the peer has internet access, they can upload all the data to the central server.

### Device types

basic mobile/feature phone  
**smartphone**  
computer  
**tablet**  
e-reader  
specialized assistive devices

### Connectivity requirements

**Partial offline functionality**  
Cellular service  
Internet connectivity

### Cost model

free  
freemium  
ad-based  
subscription  
**free with partnership**  
price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

The Thinking Healthy app has in-built features to monitor the fidelity and impact of the program. The [Patient Health Questionnaire \(PHQ-4\)](#), a validated 4-item tool to detect depressive and anxiety symptoms, is integrated into the app, and used at baseline and then every 3 months to track mothers' improvement. In addition, the app supports monitoring by tracking session duration, peers' attendance, and progress towards mothers' goals. A randomized control trial evaluating the app is currently underway.

## Description of partnerships

The program is funded by National Institute of Health Research, UK. The tool is developed through the partnership between the University of Liverpool, UK and the Human Development Research Foundation, Pakistan. The developers of the tool are also keen to partner with interested teams to test and validate the tool in countries outside Pakistan.

## Tool/Initiative Contact

### Tool contact:

For more details about the tool or for enquiries regarding adapting and testing tool in other contexts, contact Prof Atif Rahman ([atif.rahman@liverpool.ac.uk](mailto:atif.rahman@liverpool.ac.uk))

## Additional Filters

### Equity considerations - meets the needs of:

indigenous communities  
migrant/displaced communities  
**low socio-economic status**  
ethno-linguistic minorities  
racial minorities  
caregivers of children with disabilities  
adolescent parents/caregivers  
**rural communities**  
urban communities  
communities affected by emergencies  
lgbtq communities  
male caregivers  
low-literacy audiences  
users w/ disabilities

### Active regions

East Asia and Pacific  
Europe and Central Asia  
Latin America and the Caribbean  
Middle East and North Africa  
North America  
**South Asia**  
Sub-Saharan Africa  
Oceania  
Global

### ECD Age

**Pregnancy**  
**Infant (0-12 months)**  
Toddler (1-3 years)  
Preschool (3-5 years)  
Early primary (5+ years)

### Program integration

Standalone tool  
**Hybrid**  
Both

## Government support

- Yes
- No

**Data protection policy**

Available

Unavailable

## Thrive by Five

**Headline**

The Thrive by Five app provides culturally relevant content and activities that elevate local parenting practices in 10 countries across Africa and Asia.

**Tool/Initiative Link**

<https://www.thrivebyfive.com/>

**Tool Overview****Tool/Initiative description**

The Thrive by Five program supports parents and caregivers of children aged 0-5 by providing 100+ fun and easy to understand, evidence-based parenting activities that reflect their local contexts. The primary goal of the program is to empower parents and caregivers to have more frequent and quality interactions with children. One of the primary means to reach parents and caregivers is the Thrive by Five app, currently available in 10 countries across Africa and Asia. The content's activities elevate local parenting practices through illustrations and examples that are unique to each country. All the content in the app has been validated by in-country experts and caregivers through an extensive [localization and co-design process](#) (see case study). To improve accessibility and reach communities with low literacy, the app content can be fully accessed through audio recordings and also disseminated through other channels like radio, printed assets, and on-the-ground activations (community health workers in Namibia, educators in Indonesia, regional lectures in Kyrgyzstan, etc.) based on local needs. In addition, the content is also

available through a Whatsapp chatbot in Cameroon, Namibia, Kyrgyzstan, and the Democratic Republic of Congo.

**Active since**

2022

**Developer**

Minderoo Foundation

**Age**

0-5

**ECD Focus areas**

**Responsive caregiving**

**Health and nutrition**

Developmental milestones

**Safety and Security**

Caregiver well-being and mental health

**Early learning**

**Target Audience**

**Parents and caregivers**

home visitors

Healthcare providers

community health workers

social workers

ECCE personnel

Program administrator

**Technology Utilized**

**App**

Audio/video assisted

Text-based messaging service

**Text-based Chatbots**

Learning management system (LMS)

Resource page/Database

**How it works**

Thrive by Five provides ‘collective actions’ or a collection of locally-adapted activities across 5 key domains: Connect, Talk, Play, Healthy Home, and Community. These collective actions together aim to build responsive relationships, support children’s language and brain development, create a safe home environment, and encourage involvement of extended family and trusted members of the community.

- The app is organized by different sections.
  - The ‘Activities’ section is a library of 100+ activities across the 5 domains and recommends age-appropriate activities to the user. Each activity begins with ‘The Why’ that provides brief information on the developmental area targeted by activity followed by short instructions on how and when to use the activity.

- The ‘Activity Planner’ section features pre-set activity plans developed to target skill development in areas such as developing routines, building bonds, managing emotions, motor skills, keeping healthy, and creativity.
- The ‘Memory Album’ can be used to upload photos or videos of the child during an activity.
- The ‘Achievements’ section allows users to track their progress and displays the skills and domain related to the completed activities.
- The ‘Support’ section provides users links to other external services like immunisations and government services in their region.
- Users can also receive simple and casual nudges and reminders to try activities from the app.
- All activities and other features in the app can be accessed through an audio recording to promote accessibility.
- In some contexts (Cameroon, Namibia, Kyrgyzstan, and the Democratic Republic of Congo) the app content can be accessed through a Whatsapp chatbot.
  - The chatbot provides users a culturally relevant tip or activity supported by images and audio recordings.
  - Users can interact with the chatbot via press button and emojis to receive content at their desired frequency

### **User engagement strategies**

#### **Customized messages**

#### **Flexible tool experience**

Gamification

Interactive quizzes

#### **Nudges and reminders**

Goal setting

#### **User progress tracking**

Network sharing

### **Key functions**

#### **Sharing tips and resources**

Enabling connections

#### **Providing referrals to service providers**

Providing expert support

Tracking ECD milestones

Supporting program implementation

Training program implementers

### **Reach and Relevance**

#### **Number of users**

50,000 users have downloaded the app as of March 2023

## Country of origin

Australia

## Countries where tool has been used

The app is currently available in 10 countries: Afghanistan, Cameroon, Democratic Republic of the Congo, Ethiopia, Indonesia, Kenya, Kyrgyzstan, Malaysia, Namibia, and Uzbekistan

## Language(s) in which tool is available

Afrikaans, Amharic, English, French, Indonesian, Kyrgyz, Malay, Oshindonga, Pashto, Persian, Russian, Simplified Chinese, Swahili, Tamil, Tok Pisin, Uzbek

## Dissemination strategies

With support from M&C Saatchi, an international communications network, Thrive by Five develops tailored dissemination strategies based on local contexts and needs in a country. Local in-country partners including government entities and civil society organizations support the promotion of the program through social media campaigns, on-the-ground activities (e.g., dissemination through community health workers, educators, and regional lectures in Kyrgyzstan), radio, television, SMS, and print media. In addition, the widely-acclaimed [Thrive by Five TED talk](#) has been dubbed in many languages and used as a key awareness raising tool about Thrive by Five's programming including the app across social media and maternity hospitals.

## Technology Components

### Technology requirements and features

The Thrive by Five app, once downloaded, can be fully accessed offline. While a smartphone is required to download the app, it has been successfully tested and proven to work on very old devices and does not require the latest software for optimal functionality. The app content is also available through a Whatsapp Chatbot in some contexts which requires internet access.

### Device types

basic mobile/feature phone  
**smartphone**  
computer  
tablet  
e-reader  
specialized assistive devices

### Connectivity requirements

**Partial offline functionality**  
Cellular service  
Internet connectivity

### Cost model

**free**  
freemium  
ad-based

subscription  
free with partnership  
price discrimination

## Measurement and Partnerships

### M&E Approaches

The University of Sydney's Brain and Mind Center (BMC) leads the evaluation of the app and is assisted by in-country partners who support data collection. The Center uses mixed methods approaches including surveys, interviews, focus group discussions, and workshops to examine behavior change and collect user experience feedback. The Systems Usability Scale, Parenting Confidence Scale and adapted Parenting and Family Adjustment Scale, and citizen ethnographies via audio diaries are also used as part of the evaluation. The published findings of these evaluations are forthcoming. In addition, M&C Saatchi, the program's marketing partners conduct evaluations focused on the reach of the app.

### Description of partnerships

Funded by Minderoo Foundation, Thrive by Five partners with grassroots NGOs and government entities that support the co-design, validation, and implementation of the tool in specific countries. Efforts are specifically made to engage and partner with government ministries that oversee early childhood development to reach users. The University of Sydney's Brain and Mind Center is the global research partner which also supports the development of content for each country. Other key partners include a global tech partner responsible for the development of the platform and M&C Saatchi which supports the promotion and dissemination of the program across participating countries.

### Tool/Initiative Contact

#### Tool contact:

For more details about the tool contact [hello@thrivebyfive.com](mailto:hello@thrivebyfive.com)

### Additional filters

**Equity considerations** - addresses the needs of:

indigenous communities  
migrant/displaced communities  
**low socio-economic status**

**Active regions**

**East Asia and Pacific**  
**Europe and Central Asia**  
Latin America and the Caribbean

ethno-linguistic minorities  
racial minorities  
caregivers of children with disabilities  
adolescent parents/caregivers  
**rural communities**  
communities affected by emergencies  
lgbtq communities  
male caregivers  
**low-literacy audiences**  
**users w/ disabilities**

Middle East and North Africa  
North America  
**South Asia**  
**Sub-Saharan Africa**  
Oceania  
Global

#### **ECD Age**

Pregnancy  
**Infant (0-12 months)**  
**Toddler (1-3 years)**  
**Preschool (3-5 years)**  
Early primary (5+ years)

#### **Program integration**

**Standalone tool**  
Hybrid  
Both

#### **Government support or partnership**

**Yes**  
No

#### **Data protection policy**

**Available**  
Unavailable

## Winnie

### Headline

Winnie is a commercially available tool which has been used by millions of parents to identify childcare, preschool, and school age programs in the United States.

### Tool/Initiative Link

<https://winnie.com/>

### Tool/Initiative description

Through Winnie, parents can use the app or web-based database to search for and connect with childcare, preschool, and school age program providers based on a number of criteria including geographic location, schedule, and language. Winnie also supports providers to connect with prospective families, fill staffing needs, and grow their business.

### Active since

2016

### Developer

Winnie

### Age

0-8+

### ECD Focus areas

- Responsive caregiving
- Health and nutrition needs
- Developmental milestones
- Safety and security
- Caregiver well-being and mental health
- **Early learning**

### Target audience

- **Parents and caregivers**
- home visitors
- Health care providers

- community health workers
- Supervisors
- social workers
- Early childhood care and education personnel
- **Program administrators**

### **Technology utilized**

- **App**
- Audio/video assisted
- Text-based messaging service
- Text-based Chatbots
- Learning management system (LMS)
- **Resource page/Database**

### **How it works**

Winnie provides resources and a searchable database that helps parents to identify childcare, preschool, and school age programs for free.

- This database consolidates information on a diverse range of providers, including home based childcare providers, who have a limited online presence. Parents can search and filter providers in the database across a variety of options including geography, schedule (e.g., drop-in, 24 hour), language, curriculum, and availability of current openings. Each provider has a detailed profile with a short description, details on their programs, schedules, timings, financial aid, and current licensing status along with photos and reviews.
- There are options for parents to search for bilingual and Spanish-speaking programs, as well as special needs care, if relevant.
- Parents can use the platform to contact providers to set up tours and inquire about enrollment.
- The app and website also have resources for parents on how to identify the right providers based on their needs (e.g., childcare and preschool tour checklists, introduction montessori approach, cost of childcare and preschool programs).

Winnie also works with providers to support the growth of their business.

- Providers can claim a free page where they can list their business and connect with parents for enrollment inquiries. A number of free resources are available including articles on owning a daycare franchise and writing job descriptions for staff.
- Providers have the option of signing up for a paid subscription, Winnie Pro, which offers expanded features such as a boost in search results and other marketing support (e.g., optimized ads on Google and Facebook, spotlight in Winnie's email newsletter), a lead dashboard to manage enrollment interest, an opportunity to promote job openings, hands-on training from Winnie staff, and the ability to manage multiple centers through the platform.

- The platform also includes a job board for childcare and preschool staff.

### **User engagement strategies**

- **Customized messages**
- Flexible tool experience
- Gamification
- Interactive quizzes
- Nudges and reminders
- Goal setting
- User progress tracking
- Network sharing

### **Design features**

- **Sharing tips and resources**
- **Enabling connections**
- **Providing referrals to service providers**
- Providing expert support
- Tracking ECD milestones
- Supporting program implementation
- Training program implementers

## **Reach, Relevance, and Access**

### **Number of users**

Millions of parents and approximately 250,000 providers have used Winnie.

### **Country of origin**

United States

### **Countries where tool has been used**

United States

### **Language(s) in which tool is available**

English

### **Dissemination strategies**

Users learn about Winnie through search engines. In some regions of the country where Winnie has a strong foothold, users may learn about the service through word of mouth.

## **Technology Components**

## Technology requirements and features

Winnie can be accessed through a mobile/tablet based app or through a web-based database. It requires use of a smartphone, computer, or table.

Winnie is free for parents. Providers can utilize Winnie for free but have the option to sign up for a paid subscription with expanded features.

### Minimum connectivity requirements

- Partial offline functionality
- Cellular service
- **Internet connectivity/Mobile data**

### Device specifications

- basic mobile/feature phone
- **smartphone**
- **computer**
- **tablet**
- e-reader
- specialized assistive devices

### Cost model

- **free**
- freemium
- ad-based
- **subscription**
- free with partnership
- price discrimination (free for specific user populations)

## Measurement and Partnerships

### M&E Approaches

Winnie primarily measures success in parent engagement through understanding the number of contacts made by parents to childcare provider(s) of interest, as well as number of active parent users. For providers, Winnie looks at a number of metrics including how active they are on the platform, how many parents and job applicants engage with them, and how quickly they fill openings.

### Description of partnerships

Winnie has been supported by investments from venture capital firms including Reach Capital, Impact America Fund, Unusual Ventures, Ludlow Ventures, Afore Capital, Day One Ventures, Kairos, and April Underwood.

## Tool/Initiative Contact

### Tool contact:

info@winnie.com

## Pictures and Videos

### Additional Filters

**Equity considerations** - meets the needs of:

- indigenous communities
- migrant/displaced communities
- **low socio-economic status**
- ethno-linguistic minorities
- **racial minorities**
- **caregivers of children with disabilities**
- adolescent parents/caregivers
- **rural communities**
- communities affected by emergencies
- lgbtq communities
- male caregivers
- low-literacy audiences
- users w/ disabilities

### Regions where active

- East Asia and Pacific
- Europe and Central Asia
- Latin America and the Caribbean
- Middle East and North Africa
- **North America**
- South Asia
- Sub-Saharan Africa
- Oceania
- Global

### ECD Ages of interest

- Pregnancy
- **Infant (0-12 months)**
- **Toddler (1-3 years)**
- **Preschool (3-5 years)**
- **Early primary (5+ years)**

### Program integration

- **Standalone tool**
- Hybrid (used as part of a program or other services)
- Both (can either be used independently or embedded in a program)

### Government support or partnership

- Yes
- **No**

## Data protection policy

- Available
- Unavailable