



MIDIT: Comprehensive Early Childhood Development Model

A Territorial Experience to Reduce Inequalities in Early Childhood in Mexico

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1. Executive Summary

The Comprehensive Early Childhood Development Model (MIDIT), implemented by Un Kilo de Ayuda, represents a territorial experience aimed at reducing inequalities that affect early childhood development in highly vulnerable contexts in Mexico. Grounded in a child rights-based approach and aligned with global frameworks such as the Nurturing Care Framework, the model places children at the center, recognizing the family as the primary caregiving environment and the community as a key actor in creating the conditions for their development.

In a context where nearly half of all children in Mexico live in poverty and face multiple risk factors that limit their development, MIDIT offers an integrated intervention that brings together health, nutrition, responsive caregiving, early learning, and community strengthening. This approach responds to evidence showing that inequalities in the early years have long-lasting effects on health, learning, and wellbeing trajectories.

Currently, the model supports more than 23,000 children and 20,000 families across 500 highly marginalized communities through a structured system of periodic visits, individualized monitoring, and family capacity-building. The experience shows that continuous engagement with families, combined with community-based interventions, has been associated with improvements in child nutritional status, caregiving practices, and developmental outcomes.

One of the key lessons from MIDIT is that family-centered integrated interventions, supported by monitoring systems and the strategic use of data, enable the timely identification of risks and the adaptation of actions to the specific needs of each child. In addition, the model highlights that active family participation and strong community leadership are critical for the sustainability and ownership of interventions.

This experience offers relevant insights for the design of public policies focused on early childhood in contexts of inequality. It underscores the importance of: (i) adopting multisectoral approaches that integrate health, nutrition, early learning, and parenting support; (ii) strengthening continuous family engagement as a central mechanism of intervention; and (iii) incorporating digital tools for monitoring and evidence-based decision-making.

MIDIT contributes directly to the achievement of the Sustainable Development Goals, particularly in reducing poverty, improving nutrition, promoting health, and strengthening the foundations for learning. In this regard, it represents a practice with strong potential for adaptation and scaling in contexts facing similar challenges.

2. Context

Early childhood development is a critical stage for the realization of rights and the formation of capabilities that shape health, learning, and wellbeing trajectories throughout the life course. However, in contexts marked by structural inequalities, millions of children face barriers that limit their access to essential conditions for their development (1,2).

In Mexico, these inequalities are particularly evident in early childhood. Nearly half of all children live in poverty, resulting in cumulative exposure to risk factors that affect their nutrition, health, learning, and overall wellbeing. Recent indicators reveal persistent developmental delays, as well as limited access to learning environments at home, positive caregiving practices, and adequate conditions for care (1-3).

These disparities are particularly pronounced in contexts of territorial marginalization, in indigenous communities, and in households facing multiple disadvantages, where opportunities for early childhood development are significantly reduced. In such environments, barriers to health services, adequate nutrition, early stimulation, and safe, protective conditions contribute to the persistence of intergenerational inequality (1,2).

Evidence shows that prolonged exposure to adverse conditions in early life, especially in the absence of stable, nurturing relationships, can disrupt brain development and constrain children's long-term potential. Consequently, inequalities in early childhood extend beyond immediate wellbeing, becoming a critical driver of social inequality across the life course (4,5).

In this context, experience shows that it is essential to implement integrated interventions that address the multiple determinants of early childhood development simultaneously, starting with early identification, followed by early intervention and the strengthening of family capacities and community environments, with support from longitudinal follow-up during early childhood to promote sustained changes in caregiving practices (6,7).

3. Comprehensive Early Childhood Development Model (MIDIT)

The Comprehensive Early Childhood Development Model (MIDIT) represents Un Kilo de Ayuda's operational response to the inequalities affecting child development in highly vulnerable contexts in Mexico. Its design translates global early childhood development frameworks into a concrete, territorial intervention centered on strengthening family and community capacities (8).

The model is aligned with the Nurturing Care Framework, integrating key components such as health, nutrition, responsive caregiving, early learning, and protection(9). In practice, MIDIT adopts a comprehensive approach that addresses the multiple factors influencing early childhood development simultaneously, recognizing that conditions of inequality require coordinated and sustained responses over time.

Operationally, the model is structured around four complementary components aimed at influencing both caregiving practices and the environments in which children grow and develop:

1. Responsive and nurturing caregiving. This component strengthens the capacities of mothers, fathers, and caregivers to provide nurturing, respectful, and responsive care, reinforcing caregiver-child relationships and supporting children's socio-emotional, cognitive, and physical development from the earliest years, with play serving as a central mechanism to foster responsive interactions and strengthen caregiver-child relationships.

It also includes monitoring children's neurodevelopment to enable early identification of developmental risks and guide timely caregiving practices and interventions.

2. Access to nutritious food and safe water. Strengthens access to nutritious food at the household level through the provision of food packages. It also promotes breastfeeding and appropriate complementary feeding practices in early childhood, as well as the consumption of safe water. These actions contribute to food security and support adequate physical and cognitive development, particularly in contexts of high vulnerability.

3. Access to health services. Promotes preventive care for children and pregnant women through regular monitoring of nutritional status, micronutrient supplementation, the detection and treatment of anemia, and referral to health services when needed, ensuring timely care and continuity of services.

4. Community organization. MIDIT promotes family participation and the development of community leadership as key mechanisms to create safe, healthy, and protective environments, strengthening social cohesion and shared responsibility for child wellbeing. It also incorporates actions for disaster preparedness, prevention, and risk mitigation, strengthening community response capacities. In addition, it facilitates referral pathways to essential services, including birth registration, early detection and response to violence, and access to early childhood education, contributing to the protection of rights and the strengthening of community support systems.

Implementation is carried out by an interdisciplinary team that includes managerial staff, operational coordinators, health professionals, community facilitators, and more than 1000 volunteer community leaders. This structure allows for close, context-specific engagement within each community. Through a continuous support model that includes 16 annual visits, MIDIT delivers group sessions and follow-up activities that integrate child development monitoring, caregiver guidance, and the strengthening of family and community capacities.

In practice, this approach allows not only for tracking each child's developmental trajectory but also for fostering sustained learning processes and changes in caregiving practices within households. Across all components, the model recognizes that strengthening family capacities is essential for the effectiveness of interventions, making continuous engagement and active caregiver participation central to its sustainability.

4. Play as a Strategy for Child Development and Family Wellbeing

Play is a central component of the Comprehensive Early Childhood Development Model (MIDIT) as a key strategy to promote early learning, socio-emotional development, and the strengthening of bonds between children and their caregivers. International evidence recognizes play-based learning as an effective mechanism to support cognitive, social, emotional, and language development, particularly in contexts where access to formal learning opportunities is limited (9,10).

Within MIDIT, play is intentionally incorporated as a tool to strengthen sensitive, purposeful, and frequent interactions between caregivers and children, recognizing that the quality of these interactions is a key determinant of early childhood development. Through free, semi-structured, and guided play activities, the model promotes the creation of safe and stimulating play environments both at home and in the community, using accessible materials that encourage curiosity, imagination, and the development of diverse skills.

Field experience shows that integrating play into families' daily routines not only supports early learning but also strengthens caregivers' confidence in their role, facilitating the adoption of more responsive and participatory caregiving practices. This contributes to creating more stimulating and protective environments for children's development.

In addition, shared play has been shown to have positive effects on overall family wellbeing. Play activities provide opportunities to improve communication, strengthen emotional bonds, and promote more positive family dynamics. In vulnerable contexts, these practices can also contribute to reducing the use of violent discipline and fostering more respectful and empathetic relationships within the household (10).

Furthermore, the play-based approach within MIDIT promotes shared responsibility for caregiving among household members and strengthens community support networks, which are key to sustaining protective environments in early childhood. In this sense, play is not only understood as a developmental tool, but as an integral strategy that contributes to family wellbeing and social cohesion in contexts of inequality.

5. Innovation, Monitoring, and Evaluation with a Digital Equity Approach

One of the most innovative components of the Comprehensive Early Childhood Development Model (MIDIT) is its monitoring and evaluation system, InfoKILO 3.0, a digital monitoring platform designed to operate in contexts with limited connectivity and to support longitudinal tracking of child development. This tool systematically integrates individualized information for each child, including anthropometric records, hemoglobin measurements, neurodevelopmental assessments, family-level data, monitoring of nutritional interventions, and participation in program activities.

The use of InfoKILO 3.0 allows data to be transformed into actionable information for decision-making at the individual, family, and programmatic levels. In practice, this enables the timely identification of risks, the monitoring of developmental trajectories, and the adaptation of interventions to the specific needs of each child. It also strengthens evaluation processes, institutional learning, and continuous improvement, contributing to the generation of evidence on the effectiveness of integrated early childhood interventions.

Experience shows that the use of digital tools in highly vulnerable contexts is feasible when they are designed with accessibility and territorial adaptation in mind. In this regard, MIDIT has incorporated widely available communication channels, such as WhatsApp groups, to strengthen community communication, facilitate coordination of activities, and promote family participation.

In addition, a WhatsApp-based chat bot is currently being developed to provide timely guidance on caregiving, health, early stimulation, and nutrition for mothers, fathers, and caregivers. This tool seeks to reduce barriers to accessing key information and to strengthen family capacities through accessible digital solutions.

Overall, these innovations highlight the potential of technology to strengthen early childhood service delivery systems, particularly when implemented with a digital equity approach. Beyond its operational role, the strategic use of data and digital tools in MIDIT contributes to improved targeting, service quality, and the generation of relevant information for evidence-based policy design.

6. Impact, Learning and Evidence

The institutional trajectory of Un Kilo de Ayuda has placed family participation at the center of change, in line with evidence on early childhood development that highlights the importance of everyday interactions and responsive caregiving in shaping positive developmental trajectories. In this context, MIDIT has been designed not only as an intervention, but as a model oriented toward continuous learning, with the potential for adaptation across contexts, integration into public policy systems, and scaling through the strategic use of data and technology. Its design enables the articulation of monitoring, training, and community engagement processes, generating continuous feedback and improvement.

At the implementation level, the model is supported by a robust data system derived from longitudinal tracking of participating children. Key indicators include anthropometric monitoring based on international standards, hemoglobin measurement for the timely detection and treatment of anemia, neurodevelopmental assessment, and monitoring of vaccination schedules. This data system provides a critical input for decision-making, programmatic learning, and continuous improvement.

In terms of results, accumulated institutional evidence shows consistent trends in improving key conditions for child development. More than 7 out of 10 children improve or maintain an adequate nutritional status; 3 out of 4 recover from anemia and nearly 9 out of 10 prevent it; while 6 out of 10 reach development levels appropriate for their age, with a sustained reduction in developmental delays.

These results are associated with high levels of family participation, with 90% of families actively engaged in MIDIT activities, promoting the adoption of caregiving, stimulation, and nutrition practices within the home. At the community level, the model is supported by a network of more than 1,000 community-based volunteers (locally known as *comisionadas*) who act as local leaders, strengthening implementation, proximity to families, and community ownership of interventions.

Taken together, these findings suggest that integrated early childhood interventions, when they begin with timely diagnosis and early intervention, followed by the strengthening of family capacities, continuous engagement with families, systematic monitoring, and community participation, can contribute to improved outcomes in nutrition, development, and child wellbeing in contexts of inequality.

7. Global Alignment

MIDIT contributes directly to the global sustainable development agenda, particularly in areas related to poverty reduction, food security, health and wellbeing, quality education, gender equality, and the reduction of inequalities. This reflects the model’s integrated approach, addressing multiple determinants of early childhood development simultaneously through a family-centered and community-based strategy.

Experience shows that early childhood interventions can generate interconnected impacts across multiple dimensions of sustainable development by strengthening capabilities from the earliest years and helping to break cycles of accumulated disadvantage. In this regard, the model aligns with the following Sustainable Development Goals:

SDG	Link to MIDIT	Main Mechanism
SDG 1: No Poverty	Strengthening capacities in early childhood.	Prevention of the intergenerational transmission of poverty through human capital development from the earliest years of life.
SDG 2: Zero Hunger	Improvement of child nutrition, supplementation, and access to safe water.	Reduction of risks associated with malnutrition and anemia, contributing to physical and cognitive development.
SDG 3: Good Health and Well-being	Access to preventive health services and child development monitoring.	Strengthening comprehensive early childhood care through prevention, early detection, and referral to health services.
SDG 4: Quality Education	Promotion of early learning through play and stimulation.	Strengthening the foundations for future learning trajectories through the development of cognitive and socio-emotional skills.
SDG 5: Gender Equality	Active participation of caregivers and strengthening of community leadership.	Promotion of shared responsibility in caregiving and strengthening the role of women as agents of community change.
SDG 10: Reduced Inequalities	Intervention in highly marginalized and vulnerable contexts.	Reduction of gaps in access to essential conditions for early childhood development.

8. Policy Recommendations and Conclusions

The territorial experience of MIDIT provides relevant insights for the design, implementation, and strengthening of public policies aimed at early childhood development, particularly in contexts of high inequality. The model’s findings suggest that family-centered, integrated interventions, combining health, nutrition, early learning, responsive caregiving, and community strengthening have been associated with improvements in child development and family wellbeing outcomes.

First, evidence indicates that governments should adopt multisectoral approaches that integrate services traditionally delivered in a fragmented manner. Bringing together health, nutrition, early stimulation, and parenting support allows for a more effective response to the multiple determinants of early childhood development (6,7).

Second, continuous engagement with families emerges as a central mechanism for achieving sustained change. Strengthening parental capacities, combined with community-based interventions, promotes the adoption of caregiving, stimulation, and nutrition practices that directly influence child development. This approach supports a shift from assistance-based models toward those that foster shared responsibility and local ownership (10).

Third, the MIDIT experience underscores the need to incorporate monitoring systems and digital tools for longitudinal tracking, timely risk identification, and evidence-based decision-making. The strategic use of data contributes to improving the targeting, efficiency, and quality of services aimed at early childhood (9).

In addition, the model highlights the importance of community participation and local leadership as key factors for sustainability. Building support networks and fostering community ownership help sustain interventions over time and adapt them to specific territorial contexts (12).

From a scalability perspective, MIDIT presents characteristics that support adaptation across contexts: a structured yet flexible design, a family-centered approach, the integration of community leadership, and the strategic use of data and technology. These elements facilitate its progressive integration into public systems and its alignment with existing policies in health, nutrition, and social development.

Key Policy Recommendations:

Building on these findings, the MIDIT experience highlights key directions for public policy:

1. Governments should prioritize integrated, multisectoral early childhood strategies that combine health, nutrition, early learning, and parenting support.
2. Policies should place families at the center of intervention design, strengthening caregiving capacities through continuous engagement and tailored support.
3. There is a need to invest in monitoring and data systems that enable early identification of risks and adaptive, evidence-based responses.
4. Strengthening community-based delivery mechanisms and leveraging accessible digital tools are critical to ensure effective implementation and reach in vulnerable contexts.
5. Ultimately, positioning early childhood development as a central pillar of social policy is essential to reduce structural inequalities and promote wellbeing trajectories across the life course.

9. References

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