**Overcoming health systems bottlenecks in implementing Kangaroo Mother Care at district and sub-district level health facilities in Bangladesh**

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**Introduction:**

In Bangladesh, estimated 45% of all newborn death are due to complications of premature birth. The USAID’s funded MaMoni Health System Strengthening (HSS) project and other partners are supporting MOHFW to introduce facility based Kangaroo Mother Care (KMC) for improve survival of low birth weight and preterm babies following national guideline.

**Methodology:**

To understand the state of readiness for KMC implementation and what is needed to provide KMC services, an initial assessment of 3 primary (Sub district) and 3 secondary (District) level facilities of was conducted with a structured checklist. Assessment included review of available data, registers and logistics management, interview with key providers and managers and direct observations of service provision. Data on training and capacity-building inputs on KMC was also reviewed.

**Results and Discussion**

Significant challenges in implementing KMC at public sector health facilities are high bed occupancy rate (as high as 200%), vacant position (as high as 30% for doctor and 50% for nurses), drop out of targeted training participants (46% doctor, 40% nurse), availability of physical space, providers perception which delayed implementation process. Project have accommodated appropriate changes in implementation plan to address the challenges. Strengths and challenges of implementation of this introductory phase would be shared with conference participants.

**Conclusion**

Understanding health system issues associated with the introduction of KMC services within a public health structure prepares MOHFW to address various health systems challenges for the effective implementation of KMC at scale.