

Challenges of implementation of Kangaroo Mother Care (KMC) in selected public health facilities of Bangladesh

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Introduction

Bangladesh made its commitment for ending preventable newborn deaths by 2030 as per the country's commitment to SDG. Though remarkable success in reduction of under 5 mortality during last sector wide program, but neonatal mortality is still high. The strategic Investment Plan of the 4th Health Nutrition Population Sector Program (2016-2021) set an target to reduce NMR at or below 18 per 1000 live birth by 2021 from the baseline of 28 per 1000 live birth (BDHS-2014).

Newborn deaths in Bangladesh are largely preventable; complications due to prematurity, birth asphyxia and neonatal infections are the major contributor for neonatal deaths. To improve newborn survival through equitable and effective coverage of high impact newborn services and practices at scale, implementation of comprehensive newborn care package (CNCP) by the public health system required to be developed and demonstrate to identify the key challenges and potential solution.

Develop and Demonstration of CNCP

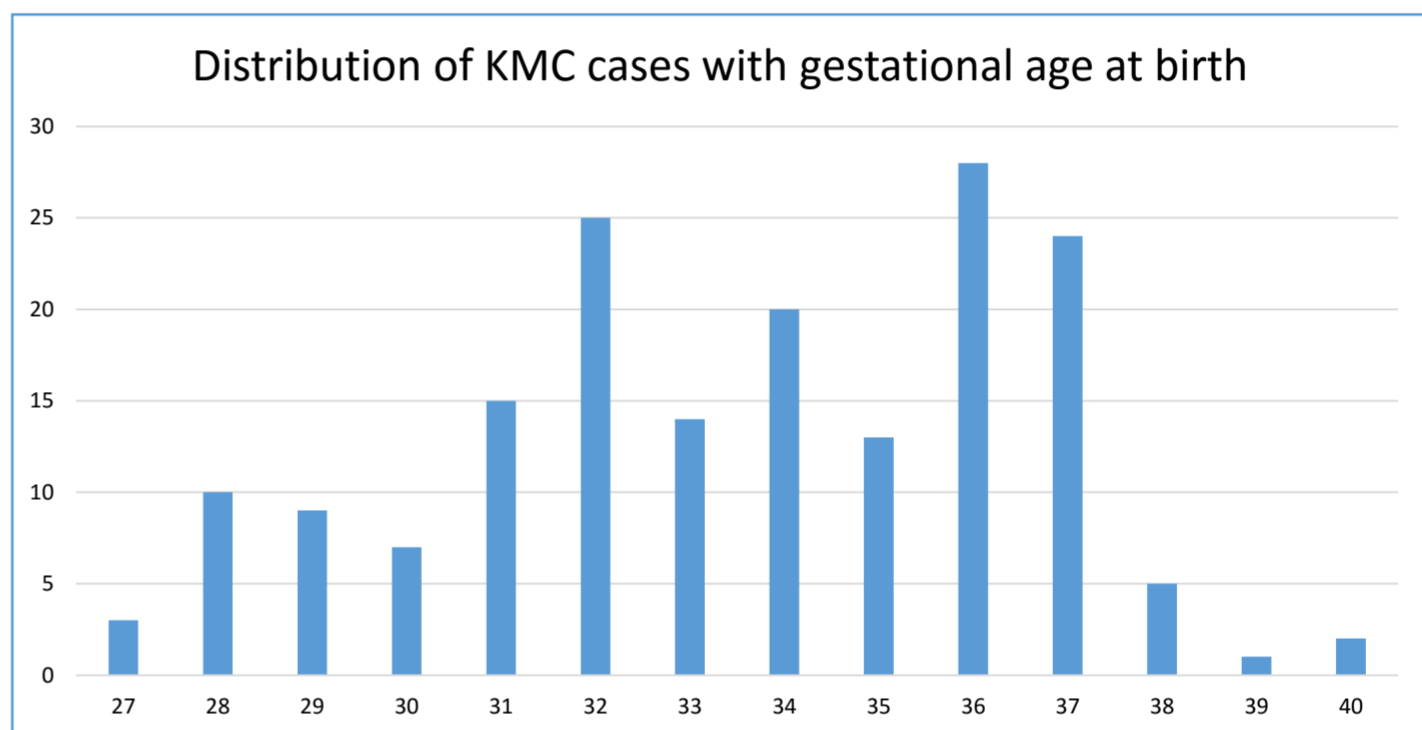
Ministry of Health and Family Welfare and its directorates developed and demonstrate CNCP for future national scale-up with the technical and catalytic support of Saving Newborn Lives Program of Save the Children.

The key interventions of the comprehensive newborn care package (CNCP) are

- Promotion of birth preparedness, newborn care preparedness and proper care seeking through a comprehensive SBCC approach
- Immediate newborn care; essential newborn care (ENC) including application of 7.1% Chlorhexidine; postnatal care for all newborn
- For newborn in need extra care due to illness or complications: newborn resuscitation, management of sick newborn; Kangaroo Mother Care (KMC) and proper use of antenatal corticosteroid
- Care of critically ill newborn through special care newborn unit

Implementation of KMC in Comprehensive Newborn Care Package

CNCP is now implemented in Kushtia District of Bangladesh. Kangaroo Mother Care (KMC) services has been introduced in six public health facilities of Kushtia district as part of CNCP implementation from January 2016 with an extensive evaluation plan.



Objectives

The learning specially challenges of KMC implementation and the approaches found effective to overcome the challenges in those facilities will help the MOH to scale-up KMC in public health facilities all over the country.

Methodology

Different monitoring tools, routine data and observation findings of preparatory and early implementation of KMC have been reviewed and analyzed to identify the key challenges of implementation of KMC in public health services.

Results

Regarding service providers' perspective some identified challenges are rotation of nursing staff as it hindered capacity building efforts; keeping other nursing stuffs engage after designating a KMC focal person and shifting the role of service providers as a coach and counselor. Considering challenge of the KMC mother and her families the following key challenges are identified: keeping the baby in KMC position during hot and humid weather; staying in the facilities; feeding smaller babies; continue KMC and follow-up visit after discharge. Availability of additional resources for facilities to renovate KMC unit; supplies of commodities; linking community health workers and demand creation found challenging for the health system.

Conclusion

More learning from the early implementing public health facilities to identify the successful approaches to overcome the challenges is crucial.

