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Title: Kangaroo mother care in Viet Nam: an overview for implementation and scaling up

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Background: The neonatal mortality rate in Viet Nam is 12 per 1000 live births¹. It is estimated that LBW newborns account for 5.7% of all births². Kangaroo mother care (KMC) for LBW newborns was introduced 20 years ago.

Methodologies: We conducted desk reviews, consultations with relevant neonatal and KMC experts, and hospital visits to understand key challenges and establish priority actions to accelerate KMC.

Results: National KMC standards were produced in 2004 and 2009³. In 2014 the Ministry approved KMC technical guidelines for all health facility levels⁴. By 2015, KMC had been implemented in 18/63 provincial hospitals and three national hospitals⁵. In 2015, routine national data estimated that 8.2% of all LBW newborns receive KMC. By August 2016, data from 17 implementation hospitals showed that only 22% of LBW babies receiving KMC⁶. In April 2016, a review of 70 LBW babies in 7 hospitals found that only 42% received immediate skin to skin contact after birth, 19% completed the first breastfeed before separation⁷. A high proportion of preterm and LBW newborns were separated for observation in the newborn unit. Hospital reviews found that several actions were needed to support improved management of LBW babies including: updating policies to support KMC practices; securing commitment from hospital

directors and senior staff; allocating space, staff and equipment to support KMC; further implementing KMC clinical coaching and mentoring; and improving hospital counselling and health education for mothers and families.

Conclusion: Although progress has been made by Viet Nam, access to KMC remains low and quality limited. Key next steps to national scale up include updating policies to support KMC; securing support of health programme managers and hospital leaders; and use of a quality assurance approach to manage systems gaps and monitoring practice.

¹ General Statistics Office and UNICEF, 2015. Viet Nam Multiple Indicator Cluster Survey 2014, Final Report. Ha Noi, Viet Nam.

² General Statistics Office and UNICEF, 2015. Viet Nam Multiple Indicator Cluster Survey 2014, Final Report. Ha Noi, Viet Nam.

³ Ministry of Health. National Standards and Guideline on Reproductive Health Care 2009. Ha Noi, Viet Nam.

⁴ Ministry of Health. Decision 4674 on KMC technical guidelines for all health facility levels, 2014. Ha Noi, Viet Nam.

⁵ Maternal and Child Health Dept., Ministry of Health. Annual Report 2015. Ha Noi, Viet Nam.

⁶ National KMC facilitators. Direct interviews with 17 hospitals implementing KMC, August 2016

⁷ WPRO experts and National KMC facilitators. Immediate Newborn Care and Feeding Practices for Preterm and Low Birth Weight Babies, Seven Hospitals, Viet Nam. April, 2016.