



# Challenges and Processes in the introduction of Kangaroo Mother Care in Zambia

10<sup>th</sup> KMC INTERNATIONAL CONFERENCE ON KMC  
LEMIGO HOTEL, KIGALI, RWANDA

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# Plan of presentation

- Introduction
- Objective
- Methodology
- Results
- Conclusion



# Introduction-1

- Kangaroo Mother Care (KMC) provides a well preterm or low birth-weight baby with the benefits of incubator care, by keeping mother and baby together with body contact (skin-to-skin)
- First introduced in Columbia in 1979 by Drs. Martinez and Rey to deal with overcrowded neonatal units and a shortage of incubators.
- Research has proved that KMC is more than an alternative to incubator care and is effective for thermal control, breastfeeding and bonding in all newborn infants, irrespective of setting, weight, gestational age and clinical conditions.



# Introduction-2-Health Situation

- Population -13million
- MM-591/100,000 live births
- Neonatal mortality-30/1000LB
- Infant mortality-70/1000LB
- Under-5 mortality-119/1000LB
- Premature deilvery-12%



# Introduction-3-Causes of Neonatal deaths in Zambia

- Birth Asphyxia
- Sepsis (including neonatal septicaemia, pneumonia, other ARIs, neonatal tetanus, diarrhoea and meningitis)
- Low birth weight
- Birth injury
- Hypothermia
- Congenital abnormality



# Introduction-4-KMC in Zambia

- KMC practised at 2 rural hospitals since 2009 but not in a standardised way
- KMC was officially introduced in Zambia by a Ministerial decree in 2010 but ended with a change of Government in 2011.
- Local research from perinatal audits which has been on going since 2010 showed hypothermia was a leading cause of morbidity/mortality



# Objective

To document the feasibility of introducing KMC in a KMC averse and naïve environment by step wise involvement of stakeholders

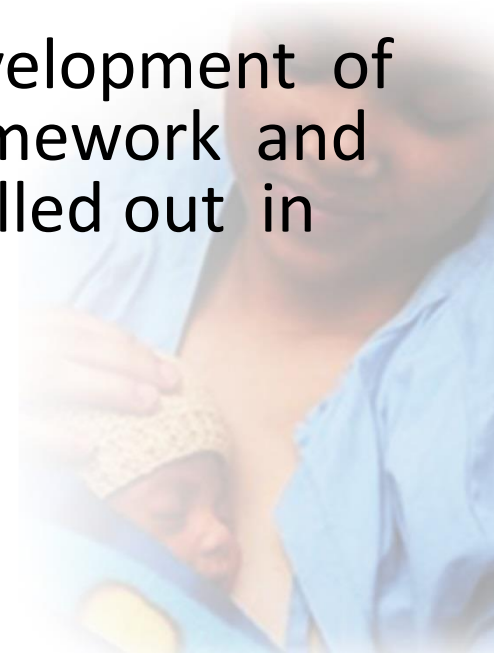




# Methodology-1

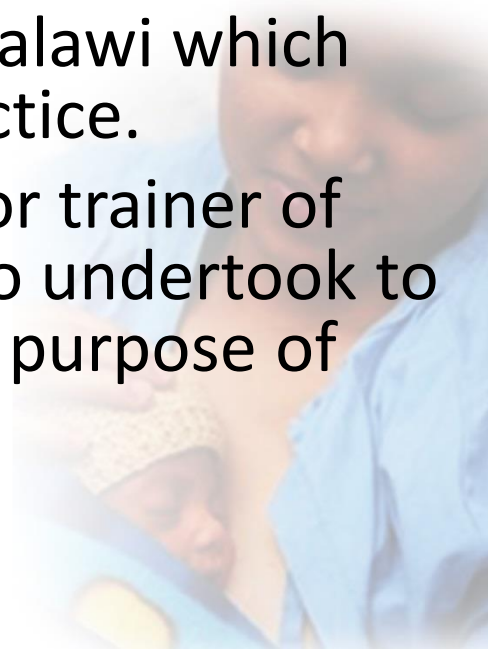
Riding on plans of the Ministry of Community Development Mother and Child Health (MCDMCH) to develop national plans for KMC to be included in the Essential Newborn Care Package, SAVE the CHILDREN supported and convened a stakeholders meeting in June 2013

Aim : To brainstorm and discuss the development of KMC guidelines within the newborn framework and how the program can be initiated and rolled out in Zambia.



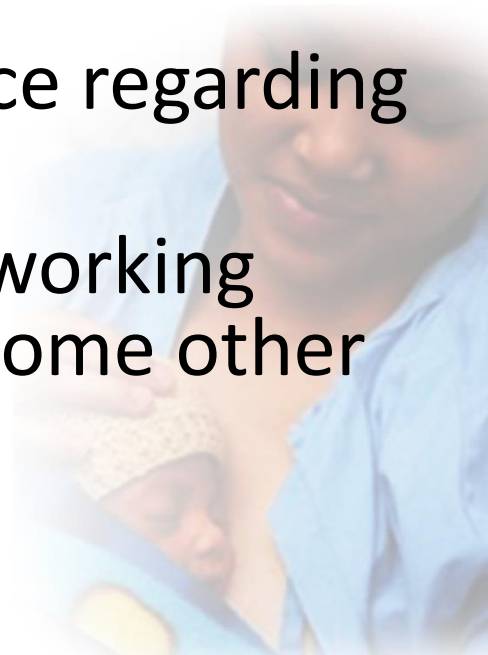
# Methodology-2

- Discussions were held with the leadership/physicians at the University Teaching Hospital (UTH) to explore their perspectives regarding KMC.
- UTH is the main training institution for health personnel in Zambia and starting new programs there leads to easy replication to the rest of the country.
- Representatives of MCDMCH and UTH also conducted a learning tour of the practice of KMC in Malawi which had already nationally embraced the practice.
- In addition to supporting 5 day training for trainer of trainers in KMC, SAVE the CHILDREN also undertook to rehabilitate an identifiable facility for the purpose of KMC practice at UTH.



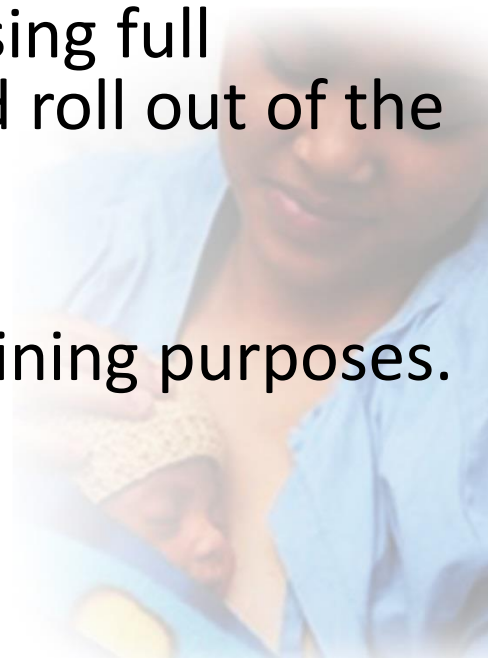
# Results-1

- The consultative meeting unanimously agreed that KMC was a high impact intervention and needed to be introduced in Zambia.
- UTH management was supportive of initiatives that would help improve early newborn outcomes and promised to support KMC and make UTH a training area for KMC .
- The physicians reviewed the evidence regarding the benefits of KMC.
- In particular it was noted KMC was working already in wards to some extent in some other parts of Zambia



# Results-2

- 15 trainers of trainers in KMC were successfully trained.
- A nursery at UTH was refurbished and equipped by SAVE THE CHILDREN.
- The KMC Centre at UTH was officially opened on 6 May 2014 by the Minister of MCDMCH promising full Government support and sustenance and roll out of the practice to the rest of the Country.
- The KMC center is also being used for training purposes.



# KANGAROO MOTHER CARE UNIT

NO ENTRY

25

- NURSERY -



This K M C Unit  
The Minister Of Community Development  
With support









# Other KMC activities done

- **2013 August**

Launch of Essential Newborn care Guidelines with KMC

- **2013 December**

KMC included in the following;

- ✓ Zambia Newborn Health Care Scale Up Framework





# Lessons learnt

- In areas where practice of KMC is not standard of care, its introduction is feasible if stakeholders are involved in planning and implementation.
- Consensus from local line ministries, partners and implementers is important when introducing new practice despite international research evidence
- Policy change is more easily achieved with local research evidence



# KMC POSITION

.....the best place to be.

