

# Use of Kangaroo Mother Care Guidelines

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## Abstract

**Background.** In collaboration with members of the International Network of Kangaroo Mother Care (INK), the World Health Organization (WHO) developed a document, the *Kangaroo Mother Care: A practical guide*, to assist countries in introducing Kangaroo

Mother Care (KMC) as a feasible, cost-effective intervention responding to the needs of preterm and low birth weight infants. The guide, published in 2003, presented the available evidence on KMC and provided recommendations for use in low resources countries. Following the publication the guide was disseminated through WHO routine distribution system to about 3000 entities, including Ministries of Health, teaching institutions, professional organizations, international organizations, non governmental organizations, collaborating centers and individuals, as well as upon request and at exhibits. In 2006 a survey was conducted to assess the use of the guide in institutions practicing KMC.

**Objectives.** The objective of the study was to evaluate the use and need for the revision of the WHO KMC Guide.

**Methods.** Six questions focusing on the awareness, use, adaptation and need for updating of the *Kangaroo Mother Care: A practical guide*, were developed by WHO and incorporated into the KMC survey designed by the Faculty of Health Science in Pretoria. The questionnaire was then distributed through the INK to institutions and programmes known to practice KMC around the world. The results were complemented with the information available at WHO on the distribution and use of the KMC Guide.

**Results.** According to WHO data, the *Kangaroo Mother Care: A practical guide* was published by WHO in English in 2003, in Spanish in 2004 and in French in 2005, for a total of 16 960 copies, of which about 70% have been distributed by WHO through established mailing lists, upon request and at exhibits. The guide can also be downloaded at the WHO web site [www.who.int/reproductive-health/publications/kmc/](http://www.who.int/reproductive-health/publications/kmc/). In addition, the guide has been translated in Albanian, Bahasa Indonesia, Bengali, Italian, Mongolian, Portuguese, Swedish and Vietnamese and thus made more extensively available for country programmes.

We received 29 completed questionnaires, from Europe (14 institutions, 5 countries), Africa (13 institutions, 2 countries), Asia (1 institution, 1 country) and North America (1 institution, 1 country). Of 29 institutions, 20 (69%) were aware of the WHO KMC Guide, however, only 14 used it. Among these, 10 institutions used the guide to improve clinical practice, 9 as reference material, 6 for developing a KMC programme, and 6 for other purposes, including training, staff development and to strengthen the baby friendly

programme. Seven institutions, of which 3 in developing countries, modified the guide, to adapt it to the local context. Language was reported as a barrier to use in 3 cases. Among the reasons for not using the guide, 3 respondents reported having national or provincial guidelines and 8 having institutional guidelines, however 2 of them were also not aware of the WHO publication on KMC. Suggestions for revision included: application of KMC at all levels of care, including settings with optimal resources; uninterrupted KMC from birth in moderately preterm/sick infants; early, prolonged, as continuous as possible skin-to-skin care in infants with intensive care; frog position; CP AP and KMC; maternal smoking; update the feeding section; and consider revising the ambulatory component.

**Conclusions.** The *Kangaroo Mother Care: A practical guide* is widely distributed and accessible in many languages. However, little information is available on its practical use and impact. Improving the feedback from the users will be beneficial for its revision.