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Subject: Optional Newborn Module - recommendations from Newborn Indicators Technical Working Group

Posted by [dsitrin](#) on Wed, 02 Apr 2014 17:12:12 GMT

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Measuring coverage of life-saving interventions is critical to monitoring progress in improving Maternal, Newborn, and Child Health. DHS is a key source of such coverage data, yet DHS has collected limited data on coverage of interventions for newborn care. Newborn deaths now account for over 40% of all under 5 deaths (UNICEF 2013), and improving newborn survival is emerging as a global health priority. Yet while there is growing consensus on the interventions needed to reduce newborn deaths, there has been lack of clarity on how to measure progress and monitor implementation.

An inter-agency Newborn Indicators Technical Working Group (TWG) was established in 2008 to improve the capture and measurement of newborn care. The TWG includes representatives from United Nations agencies, nongovernmental organizations and national institutes of health, research and academic institutions, and donors. The group reached consensus on a short list of indicators that can be added to household surveys, such as DHS, to capture postnatal care and immediate care behaviors and practices for newborns. More information on the rationale behind these recommendations (plus interviewer instructions and a sample tab plan) can be found in the attached document. Recommendations related to deletions and revisions are also included below.

#### ADDITIONS

##### 1. What is the information needed?

Questions on maternal and newborn postnatal care contacts already exist in DHS. The TWG is advocating for the addition of 6 tested newborn care indicators to be collected through an Optional Newborn Module. Questions could be combined with additional questions on maternal health and pregnancy that expand upon ANC and delivery care.

The 6 recommended newborn indicators are:

- Newborns dried after birth
- Newborns given skin-to-skin care
- Newborns with bathing delayed
- Newborns with cord cut with a clean instrument (home births only)
- Newborns with nothing harmful applied to the cord
- Newborns that received postnatal care signal functions within 2 days after birth

In addition to these 6 indicators, the TWG has recommended questions that can be added based on programmatic focus in country - on topics such as postnatal home visits and chlorhexidine - in the attached document. The TWG also supports developing and testing indicators for high impact interventions such as Kangaroo Mother Care, which could be added to an Optional Newborn Module in the future.

Finally, while there are not recommended indicators on care-seeking for specific newborn conditions, we recommend adding a question on barriers to seeking care for sick newborns similar to Q1008 for women, which reads "Many different factors can prevent women from getting medical advice or treatment for themselves. When you are sick and want to get medical advice or

treatment, is each of the following a big problem or not?"

## 2. What questions will elicit this information?

The following questions are necessary to calculate the 6 recommended indicators:

- NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT WHAT HAPPENED SOON AFTER THE BIRTH OF (NAME). WAS (NAME) DRIED (OR WIPED) AFTER BIRTH?
- AFTER THE BIRTH, WAS (NAME) PUT DIRECTLY ON THE BARE SKIN OF YOUR CHEST?
- HOW LONG AFTER THE BIRTH WAS (NAME) BATHED FOR THE FIRST TIME?
- WHAT WAS USED TO CUT THE CORD?
- WAS THE INSTRUMENT USED TO CUT THE CORD BOILED PRIOR TO USE?
- WAS ANYTHING APPLIED TO THE CORD AT ANY POINT FROM THE TIME IT WAS CUT AND TIED UNTIL THE TIME IT FELL OFF?
- WHAT WAS APPLIED TO THE CORD?
- DURING THE FIRST TWO DAYS AFTER BIRTH, DID ANY HEALTH CARE PROVIDER DO THE FOLLOWING ACTIONS FOR YOUR NEWBORN EITHER AT HOME OR A FACILITY: [A] EXAMINE THE CORD? [B] COUNSEL YOU ON DANGER SIGNS FOR NEWBORNS? [C] ASSESS THE TEMPERATURE OF YOUR NEWBORN? [D] COUNSEL YOU ON BREASTFEEDING [E]OBSERVE YOUR NEWBORN BREASTFEEDING? [F] WEIGH YOUR NEWBORN?

## 3. How will the resulting information be used?

Uptake of these indicators can fill serious gaps in the available information on newborn care, helping to strengthen policies and programs in countries to improve newborn outcomes. More information on the rationale for these questions is included in the attached document.

## 4. What is the priority of suggested additions compared with what is already in the questionnaires?

Because there is very limited data collected on newborn care in most previous DHS surveys, these indicators should be given high priority.

## 5. If suggesting more than one addition, what is the priority among the suggested additions?

This short list of indicators was developed as the highest priority indicators for newborns based on previous data collection efforts. Therefore, all 6 should be included in an Optional Newborn Module.

## 6. Should the additional data be collected in all countries, or only in selected types of countries?

Since deaths during the newborn period are a large percentage of all under-5 deaths globally, these indicators should be recommended for all countries.

## DELETIONS

Delete the question on post-partum vitamin A (Q446). We have sound evidence for lack of effectiveness of this intervention and the current WHO recommendation is that post-partum vitamin A supplements NOT be given.

## REVISIONS

Change Q422 to: 'I would like to talk to you about checks on your baby's health after delivery, for example, someone checking the baby's cord, assessing the baby's temperature, weighing the

baby, observing breastfeeding and counseling on danger signs. In the two months after (NAME) was born, did any health care provider or a traditional birth attendant check on his/her health?' In DHS6, questions on postnatal contact for the mother are preceded by an explanation of the meaning of checks in her health (Q436) while there is no explanation preceding questions on checks for babies.

References:

1. UNICEF (2013). Committing to Child Survival: A Promise Renewed.

File Attachments

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1) [NBindicators\\_HHS\\_TWG Recommendations\\_v31Mar2014.docx](#),  
downloaded 888 times

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