

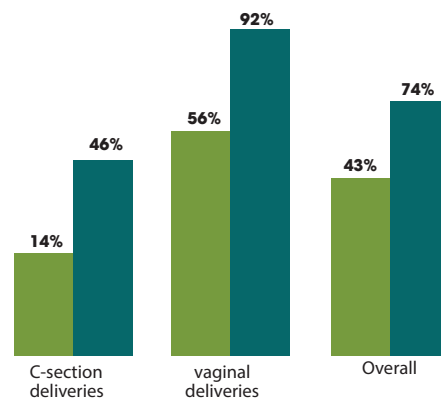


# EARLY ESSENTIAL NEWBORN CARE -A SIMPLE AND EFFECTIVE INTERVENTION

Early essential newborn care saves lives. It has been effectively implemented in seven provinces throughout Viet Nam and can and should be replicated across the country. Strong champions, convincing communications, and strategic use of data are vital to the success of early essential newborn care initiatives. Policy advocacy and communication campaigns can help multiply this success.

## Rapid Results

Early essential newborn care is a simple and effective intervention to prevent newborn mortality and promote well-being. From January to December 2015 in the facilities piloting early essential newborn care the rate of early initiation of breastfeeding increased from 43% to 74%. For vaginal deliveries, early initiation of breastfeeding increased from 56% to 92% while the increase for C-section deliveries was from 14% to 46%. Da Nang achieved the highest early initiation rates at 95% for vaginal deliveries and 81% for C-section deliveries. Across the seven project provinces<sup>1</sup>, two-thirds of newborns received early essential newborn care.



## Rationale

In Viet Nam, out of every 1,000 live births, 12.4 babies die in their first month. This adds up to approximately 12,000 newborn deaths every year<sup>2</sup>. Two out of three newborn deaths occur in the first 3 days of life<sup>3</sup>. Many of these infants die from preventable causes.

Early initiation of breastfeeding is becoming less and less common in Vietnam, especially in C-section births – the rate of which has been increasing dramatically. The early initiation of breastfeeding is vital because it ensures the newborn receives colostrum, or the first milk, which is rich in protective factors and nutrients. Early essential newborn care provides health staff with a method to ensure that all newborns receive the best support possible in their first moments of life, decreasing their risk of death and disease and setting them up for a healthy childhood.

<sup>1</sup> Hue, Da Nang, Quang Nam, Quang Ngai, Dak Lak, Tien Giang, and Ca Mau

<sup>2</sup> Ending Newborn Deaths, Save the Children (2014)

<sup>3</sup> Action Plan for Healthy Newborn Infants in the Western Pacific Region (2014–2020), WHO (2014)

## Recommended Early Essential Newborn Care Steps

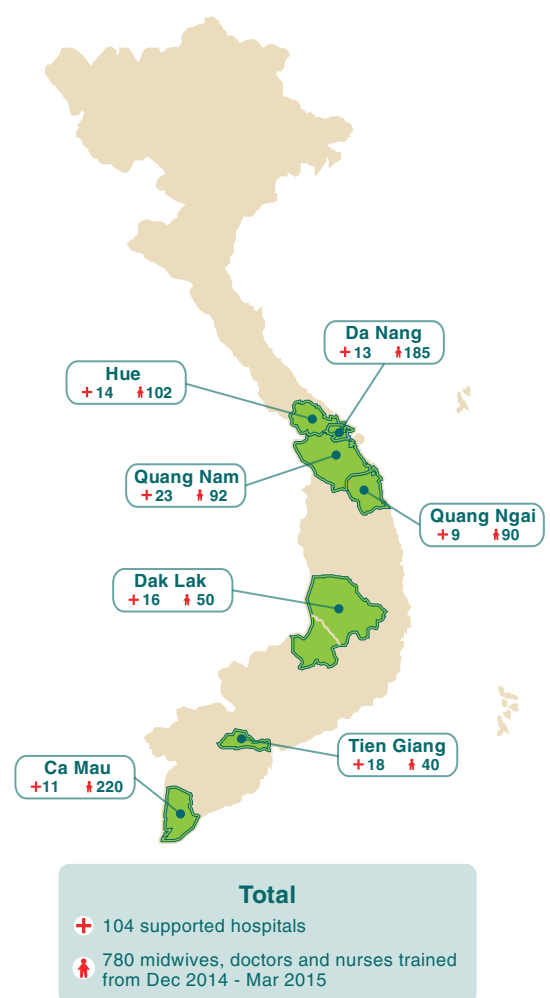
- 1 Immediate drying and skin-to-skin contact
- 2 Intramuscular injection of oxytocin
- 3 Delayed cord clamping
- 4 Controlled cord traction
- 5 Lower-abdominal massage
- 6 Early and exclusive breastfeeding within the first hour after delivery

## Alive & Thrive Support

In July 2014, Alive & Thrive supported Da Nang, Khanh Hoa, Vinh Long, and Tien Giang Departments of Health and Reproductive Health Centers to develop and implement provincial guidelines on good breastfeeding practices at health facilities providing obstetric and pediatric services. The guidelines focus on timely skin-to-skin contact, early initiation of breastfeeding, and exclusive breastfeeding for C-section, premature and low birthweight deliveries. Simultaneously, UNICEF supported the development and implementation of similar guidelines in Ho Chi Minh City.

In November 2014, the Ministry of Health issued Decision 4673/QĐ-BYT approving a technical guideline on essential maternal and newborn care during and after delivery for health facilities across all 63 provinces of Viet Nam. Following Ministry of Health approval of the guideline and their training of trainers across the 63 provinces, Alive & Thrive collaborated with the Departments of Health in seven provinces to support early essential newborn care implementation across 104 hospitals.

This initiative commenced with early essential newborn care training for 779 health staff across the seven provinces in January 2015. Supportive supervision was carried out in selected facilities by Alive & Thrive along with the local Departments of Health or Reproductive Health Centers in the following months. Approximately 90% of supported facilities submitted reports each month documenting their progress in implementing early essential newborn care.



## Reported Benefits

**HOSPITALS** saw a reduced rate of referrals to upper level facilities (especially for newborns with difficulty breathing) and a reduced rate of infections.

**MOTHERS AND FAMILIES** were reportedly happier, healthier, and needed less support from health staff.

**NEWBORNS** became calm, pink, and alert more quickly; felt safe and cried less; and easily latched onto breasts and suckled effectively. Their umbilical cords dried more quickly.

## Lessons for Success

Early essential newborn care is feasible in Viet Nam and can and should be replicated in other provinces. Three components are necessary to ensure success.

**CHAMPIONS TO ROLL OUT POLICY.** Strong, dedicated and supportive leaders contributed significantly to the success of this pilot program, including Departments of Health, Reproductive Health Centers, and hospitals.

**INTERPERSONAL COMMUNICATION & MASS MEDIA.** A combination of traditional and modern communication channels helped reach a large segment of the population, including interpersonal communication through antenatal care counseling, social media engagement, and community outreach including Women's Days and World Breastfeeding Week. Mothers and families who received accurate and comprehensive information were more confident in requesting early essential newborn care during and after delivery. In Da Nang, which had the most remarkable results during the pilot, early essential newborn care training was provided to all commune health center staff by the Department of Health in addition to the Alive & Thrive supported training for selected hospital staff.



**USE OF DATA.** Monthly measurement of key indicators with results shared with provincial partners, increased the visibility of encouraging early essential newborn care results. Supportive supervision was essential to ensure high quality data and handle arising difficulties.

## More That Can Be Done

Policy advocacy, improved interpersonal communications, and mass media could improve early essential newborn care across Viet Nam.

**POLICY ADVOCACY.** Strong collaboration should be established between key stakeholders to effectively plan for and implement early essential newborn care. Compliance with Decree 100/2014/ND-CP on trading and using nutritional products for young children, feeding bottles, and pacifiers should be enforced, along with validation of the necessary hospital certifications in all health facilities. Focusing both on early initiation of breastfeeding and early essential newborn care ensures that mothers receive the support they need to exclusively breastfeed both in the hospital and once they have returned home. Consistent messaging meets the requirements of quality certification for health facilities as regulated by the Ministry of Health and the criteria of the Baby-Friendly Hospital Initiative. Establishing human milk banks across the 63 provinces, as is intended, will also bolster these efforts and make exclusive breastfeeding available to new mothers who are unable to do so on their own.

**IPC & mass media.** Sufficient, practical, and clinically based instructions on high quality early essential newborn care should be included in pre-service and in-service trainings for health staff. Early essential newborn care educational videos should be produced and sent to all implementing facilities as well as used in training activities. Mothers and families should be provided with updated information on infant and young child feeding and early essential newborn care during pregnancy to empower them to seek skilled birth attendants and request skin-to-skin contact and the early initiation of breastfeeding.



