



KANGAROO MOTHER CARE IN ETHIOPIA

OVERVIEW

Kangaroo mother care (KMC) was first introduced in Ethiopia in 1996 at Black Lion Hospital. Since then, KMC services have been expanded to other hospitals and health facilities at all levels. Recently, KMC was included in a series of policy documents issued by the Federal Ministry of Health (FMOH): the *Newborn and Child Survival Strategy 2015/16–2019/20*, the *Health Sector Transformation Plan*, and the *Ethiopian National Health Care Quality Strategy*. The KMC target in these policies was set to reach 80% of preterm babies with KMC by 2020. Despite the emphasis that the government has put into reducing newborn mortality by using evidence-based strategies such as KMC, the number of preterm/low-birthweight newborns initiated in KMC remains low.

Table 1. Status of kangaroo mother care in Ethiopia by strategic area

Domain	Prior to and during 2014	2015–2017
Policy		
National Health Policy	The Federal Ministry of Health (FMOH) drafted a policy and plan to integrate kangaroo mother care (KMC) into the national coordination mechanism of newborn and child health care (Ethiopia FMOH 2014).	<ul style="list-style-type: none"> • KMC was integrated in the <i>National Strategy for Newborn and Child Survival in Ethiopia for 2015/16–2019/20</i> (Ethiopia FMOH 2015c) as part of the package of high-impact child survival interventions along the continuum of care. • KMC is also covered in the <i>Health Sector Transformation Plan (HSTP)</i>, which aims to improve equity, coverage, and utilization of health services, and improve quality of health care (Ethiopia FMOH 2015b). Building on the HSTP, the <i>Ethiopian National Health Care Quality Strategy 2016–2020</i> (Ethiopia FMOH 2015a) was developed to improve the quality of prioritized interventions such as KMC.
National Guidelines	<ul style="list-style-type: none"> • The first edition of the standard treatment guidelines for district hospitals included an annex on KMC (DACA 2004). • There are national guidelines about the care of preterm/low-birthweight (LBW) babies that include inpatient KMC. These guidelines were adopted from American Academy of Pediatrics manuals for newborn care. 	

Domain	Prior to and during 2014	2015–2017
Country Support/Implementation		
Levels and types of facilities implementing KMC	Black Lion Hospital started providing KMC services in 1996. KMC was later expanded to seven hospitals.	All teaching hospitals and most general hospitals in Ethiopia are expected to provide KMC services. However, KMC is provided at some tertiary-, secondary-, and primary-level facilities, and some private hospitals. Initiation of facility-based KMC remains low. Save the Children led an assessment between 2014 and 2015 of the delivery of KMC in six hospitals and 19 health centers across three zones (East Shewa in Oromia Region, and Sidama and Gurage in SNNP Region). All six hospitals reported providing KMC services within the past 3 months of the assessment. However, only 14% of babies born at the surveyed hospitals who weighed less than 2,000 g were documented as enrolled into KMC, suggesting low levels of KMC initiation and identification of small newborns (Mathewos et al. 2015).
Percentage of LBW newborns initiated on facility-based KMC		<ul style="list-style-type: none"> • About 10% to under 25% of preterm and/or low-birthweight babies receive KMC in Ethiopia. This estimate is derived from an assessment that was conducted in two hospitals that were providing KMC services in Ethiopia. After training, these hospitals provided KMC services to 36% of preterm babies. • A KMC indicator has been included in the health management information system (HMIS). It is expected that there will be national-level data about the preterm babies who are initiated in KMC.
Funding		Funding for KMC is mostly provided by the FMOH. There is a need for partners to support KMC.
Research		
Major or program-based studies being conducted related to KMC currently		The World Health Organization is leading a multicountry KMC implementation research study to determine effective models of delivery for KMC. The study is ongoing in four regions in Ethiopia and will eventually inform national scale-up of KMC. Save the Children led a rapid assessment of availability and delivery of care to premature/LBW babies in three zones in Ethiopia (Mathewos et al. 2015).

Domain	Prior to and during 2014	2015–2017
Knowledge Management		
Centers of excellence or state-of-the-art facilities for KMC/care of LBW babies	Black Lion Hospital has been advocating for KMC for the past 20 years.	Currently, no facilities have been nominated as centers of excellence for KMC, but Black Lion Hospital continues to lead KMC advocacy efforts.
KMC manuals, trainings, and campaigns	<ul style="list-style-type: none"> In 2009, the <i>KMC Trainee's Manual</i> was published (JSI et al. 2009). The <i>Newborn Care Training Participants Manual</i> (Ethiopia FMOH 2012) recommended that all LBW babies below 2,000 g be referred to the nearest health facility with KMC services or to a higher level of care. 	In 2015/16, a training manual for care of preterm/LBW babies was developed.
Monitoring and Evaluation		
There (are/are not) KMC indicators included in the national HMIS		In 2017, a KMC indicator was included in the HMIS to calculate the proportion of preterm/LBW babies for whom KMC was initiated.
KMC data recorded at health facilities	Health facilities use the integrated supportive supervision checklist to report if they provide KMC services.	<ul style="list-style-type: none"> Although admission to KMC services is included in the HMIS delivery register, KMC is not included on the reporting form, and registers are often incomplete (Save the Children 2016). There is a quality self-assessment for facilities, which includes a KMC indicator.
Advocacy		
Professional organizations that endorse KMC	The Ethiopian Pediatrics Society, which is the lead professional association on newborn health matters in Ethiopia, has endorsed KMC as a high-impact newborn health intervention.	
Awareness campaigns		<ul style="list-style-type: none"> In 2016, the FMOH, regional health bureaus, and the FMOH's partners raised awareness about KMC during World Prematurity Day under the motto "Kangaroo mother care is an effective method of treating premature babies." Annually during the month of November, newborn care, including KMC, is promoted through mass media.
Champions	Professor Bogale Worku introduced KMC at Black Lion Hospital.	Professor Worku, considered a global expert in KMC, has contributed to evidence-based findings of KMC in Ethiopia.

Table 2. Demographic and Health Survey (DHS) proxy indicators for kangaroo mother care (Ethiopia DHS 2016)

Identification of Low-Birthweight Babies	Characteristic	Percentage
Percentage of live births in the 5 years preceding the survey by mother's estimate of baby's size at birth, according to background characteristics.	<i>Very small</i>	16
	<i>Smaller than average</i>	10
Percentage of births that have a reported birthweight		13.6
Percentage of babies weighing less than 2.5 kg among births with a reported birthweight		13.2
Initial Breastfeeding		Percentage
Percentage of children born in the 2 years preceding the survey who started breastfeeding within 1 hour of birth		73.3
Percentage of children born in the 2 years preceding the survey who started breastfeeding within 1 day of birth		91.9
Skin-to-Skin Contact		Percentage
Percentage of births that have skin-to-skin contact among most recent live births in the 3 years preceding the survey		24.3

CHALLENGES

- There are some gaps in training, mentoring, support, and overall scale-up of KMC. Recently, the FMOH and World Health Organization released a call for proposals to identify efficient ways to scale up KMC in Ethiopia.
- KMC activities lack funding partly due to the belief that there are no costs involved. However, resources are needed to conduct training, purchase supplies, designate physical space for KMC in health facilities, and assign a nurse to KMC spaces.
- There is a gap in terms of education and mentoring of health care providers, given that some providers perceive KMC as an inferior alternative to incubators.
- There is a need to document the successes of KMC in Ethiopia.

LESSONS LEARNED

- Inclusion of KMC as a national target in the *Health Sector Transformation Plan* and in the *National Strategy for Newborn and Child Survival in Ethiopia* has been critical in improving the availability and quality of KMC services in Ethiopia.
- Standardizing referral and follow-up of premature babies is important.

FUTURE ACTIONS

- Include KMC in the integrated systems strengthening supportive supervision checklist.
- Adapt the job aids from the World Health Organization KMC implementation research sites to use for KMC scale-up.
- Ensure KMC is part of continuing medical education/continuing professional development for maternal and child health professional associations (Ethiopian Pediatrics Society, Ethiopian Society of Obstetricians and Gynecologists, Ethiopian Midwives Association)
- Make sure KMC is adequately included during the revision process of maternal and child health training materials, such as those on basic and comprehensive emergency obstetric and newborn care, integrated management of newborn and childhood illnesses, and integrated community case management.
- Synthesize and use KMC data from the newly added health management information system data.

DOCUMENTS AND RESOURCES

Document Title	Link to Document
<i>Standard Treatment Guidelines for District Hospitals, 1st edition (2004)</i>	http://collections.infocollections.org/whocountry/en/d/js6852e/12.4.html
<i>Newborn and Child Survival Strategy Document Brief Summary 2015/16–2019/20 (2015)</i>	www.unicef.org/ethiopia/Child_Survival_Strategy.pdf
<i>Health Sector Transformation Plan (2015)</i>	www.researchgate.net/file.PostFileLoader.html?id=56efcc94cbd5c2c1930fae21&assetKey=AS%3A342023027609601%401458556052424
<i>Ethiopian National Health Care Quality Strategy 2016–2020 (2015)</i>	www.medbox.org/et-policies-others/ethiopian-national-health-care-quality-strategy-2016-2020/preview
<i>Newborn Care Training Participants Manual (2012)</i>	www.epseth.org/a/files/NBT%20manual%20Bogale%20august%202012.pdf
“Kangaroo mother care: a randomized controlled trial on effectiveness of early kangaroo mother care for the low birth weight infants in Addis Ababa, Ethiopia” (2005)	www.ncbi.nlm.nih.gov/pubmed/15840760
<i>Rapid Health Facility Assessment on Service Availability and Delivery of Care to Premature and/or Low Birth Weight Babies (2016)</i>	www.healthynewbornnetwork.org/hnn-content/uploads/KMC_Facilities_Brief_.pdf

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