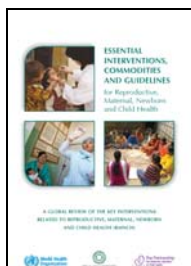


NEWBORN HEALTH: TOOLS AND MATERIALS

POLICY AND STRATEGY

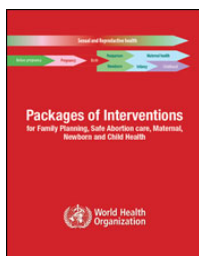
A Global Review of the Key Interventions Related to Reproductive, Maternal, Newborn and Child Health (2011)



This global review compiles existing evidence-based interventions which have high impact on causes of maternal, newborn and child deaths. It serves as an aid to develop consensus on the content of RMNCH packages of interventions at each level of the health system across the continuum of care. It aims to facilitate the scaling-up of these interventions, and the identification of research gaps in the content of core packages of interventions. The interventions are suitable for implementation in low- and middle-income countries. They are delivered through the health sector, from the community level to the first referral of health service provision. The document was developed under the umbrella of the Partnership of Maternal, Newborn and Child Health and is fully compatible with the document on 'Packages of interventions' described below.

http://www.who.int/pmnch/topics/part_publications/201112_essential_interventions/en/index.html

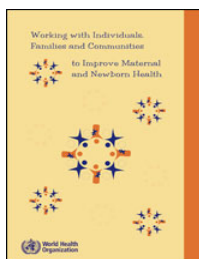
Packages of interventions for family planning, safe abortion care, maternal, newborn and child health (2010)



Evidence shows that high maternal, perinatal, neonatal and child mortality rates are associated with inadequate and poor quality health services. Explicit, evidence-based, cost effective packages of interventions can improve the processes and outcomes of health care when appropriately implemented. This document describes the key effective interventions organized in packages across the continuum of care through pre-pregnancy, pregnancy, childbirth, postpartum, newborn care and care of the child. The packages are defined for community and/or facility levels in developing countries and provide guidance on the essential components needed to assure adequacy and quality of care.

http://www.who.int/child_adolescent_health/documents/fch_10_06/en/index.html

Working with individuals, families and communities to improve maternal and newborn health (2010)



The purpose of this document is to establish a common vision and approach, as well as to identify the role of the WHO Making Pregnancy Safer initiative, for working with women, men, families and communities to improve maternal and newborn health. Part 1 of the document defines the concepts, values and guiding principles. Part 2 presents strategies, settings, and priority areas for intervention. Part 3 proposes an implementation process; and, finally, Part 4 considers the role and functions of WHO.

http://www.who.int/making_pregnancy_safer/documents/who_fch_rhr_0311/en/index.html

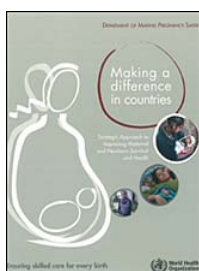
WHO/UNICEF Joint Statement - Home visits for the newborn child: a strategy to improve survival (2009)



Every year, about 3.7 million babies die in the first four weeks of life (2004 estimates). Most of these newborns are born in developing countries and most die at home. Up to two-thirds of these deaths can be prevented if mothers and newborns receive known, effective interventions. While both mothers and newborns need care during the period after birth, this statement focuses on the care of the newborn child, and the evidence for the same. Studies have shown that home-based newborn care interventions can prevent 30–60% of newborn deaths in high mortality settings under controlled conditions. Therefore, WHO and UNICEF now recommend home visits in the baby's first week of life to improve newborn survival. This Joint Statement includes information on how to care for the newborn child at home, specific recommendations for countries, and next steps.

http://www.who.int/child_adolescent_health/documents/who_fch_cah_09_02/en/index.html

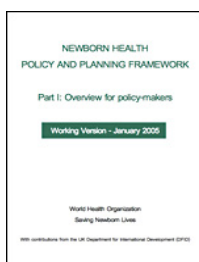
Making a difference in countries: Strategic approach to improving maternal and newborn survival and health (2006)



This strategic approach paper sets out a way forward for making pregnancy and childbirth safer for women and their newborns, and accelerating the reduction of maternal and perinatal mortality and morbidity – especially in the developing world, where 90% of these deaths occur. The key message in this paper is continuum of care and universal coverage ensuring skilled care at every birth within the context of a continuum of care. 'Integrated Management of Pregnancy and Childbirth' (IMPAC) will help shape technical support to countries in strategic and systematic ways to improve maternal and perinatal health. The paper sets out four strategic areas with 12 component approaches to reach the target of assuring skilled care at every birth within the continuum-of-care principle.

http://www.who.int/making_pregnancy_safer/documents/wa3102006ma/en/index.html

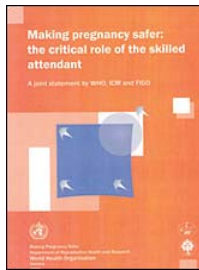
Newborn health policy and planning framework (2005)



The aim of this framework is to assist countries with a high burden of neonatal mortality and morbidity to develop strategies for improving newborn health that are integrated with maternal and child health plans and set within broader health and development frameworks. It outlines a structured approach to developing the newborn health component of a strategy. The approach is consultative and participatory, takes account of national needs and resources, and builds on existing programmes and services. More specifically, it provides guidance on the main steps involved in strategy development including situation analysis, prioritizing and choosing interventions, and mechanisms of intervention delivery, monitoring and evaluation.

http://www.who.int/child_adolescent_health/documents/newborn_hppf/en/index.html

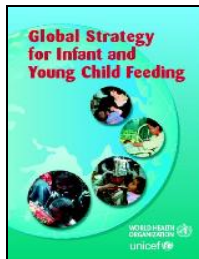
Making pregnancy safer: The critical role of the skilled attendant - A joint statement by WHO, ICM and FIGO (2004)



In this statement, WHO, the International Confederation of Midwives (ICM) and the International Federation of Gynaecology and Obstetrics (FIGO) advocate for skilled care for all women during pregnancy, childbirth and the immediate postnatal period. This document is especially aimed at countries in which the coverage of skilled attendance at birth is below 85%. It defines clearly who is a skilled attendant, what skills she/he should have and how she/he should be trained and supported.

http://www.who.int/making_pregnancy_safer/documents/9241591692/en/index.html

Global strategy for infant and young child feeding (2003)

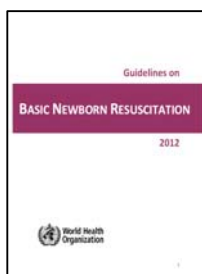


The global strategy for infant and young child feeding was endorsed by all WHO member states in 2002, and provides the main framework for WHO's actions to promote breastfeeding and complementary feeding. It also addresses feeding of children living in special circumstances, such as those of low birth weight or who are born to mothers who are HIV-infected. The strategy specifies responsibilities for all concerned parties including governments, international agencies, civil society and the private sector.

<http://www.who.int/nutrition/publications/infantfeeding/9241562218/en/index.html>

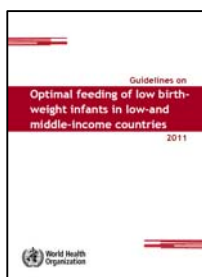
GUIDELINES

Guidelines on Basic Newborn Resuscitation (2012)



One quarter of all neonatal deaths are caused by birth asphyxia. Effective resuscitation at birth can prevent a large proportion of these deaths. The updated WHO guidelines on basic newborn resuscitation are based on best available evidence and address the needs of newborns in resource-limited settings. The guidelines contain 13 recommendations. These are expected to be used by policy-makers and managers of MCH programmes to develop national or local guidelines, standards and training for resuscitation as part of essential newborn care services. The primary audience for implementation are health professionals responsible for attending women in childbirth or care for the newborn immediately after birth. However the guidelines are also relevant for managers of health facilities and teaching institutions, to set up and maintain appropriate and functional maternity and newborn care services.

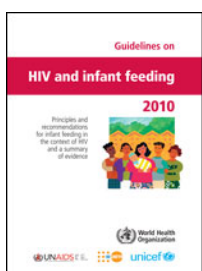
Guidelines on Optimal feeding of low birth-weight infants in low- and middle-income countries (2011)



Improving care of low birth-weight (LBW) infants can substantially reduce infant mortality. Evidence from developed and low- and middle-income countries shows that appropriate care of LBW infants, including feeding, temperature maintenance, hygienic cord and skin care, and early detection and treatment of complications, can substantially reduce mortality in this vulnerable group. The objective of these WHO guidelines is to improve the quality of care received by LBW infants in developing countries through improved capacity of health workers. These recommendations and clinical guidelines are restricted to the feeding of clinically stable LBW infants in low- and middle-income countries. The primary audience is intended to be health-care workers in first-level health facilities and referral hospitals. However, the guidelines are expected to be used by policy-makers, programme managers and health-facility managers to set up a system for optimal care of LBW infants.

http://www.who.int/maternal_child_adolescent/documents/infant_feeding_low_bw/en/index.html

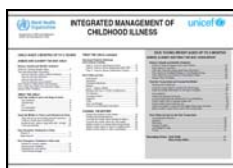
Guidelines on HIV and infant feeding (2010)



Significant programmatic experience and research evidence regarding HIV and infant feeding have accumulated since WHO's recommendations on infant feeding in the context of HIV were last revised in 2006. In particular, evidence has been reported that antiretroviral (ARV) interventions to either the HIV-infected mother or HIV-exposed infant can significantly reduce the risk of postnatal transmission of HIV through breastfeeding. Together, breastfeeding and ARV intervention have the potential to significantly improve infants' chances of surviving while remaining HIV uninfected. While the 2010 recommendations are generally consistent with the previous guidance, they recognize the important impact of ARVs during the breastfeeding period, and recommend that national authorities in each country decide which infant feeding practice should be promoted and supported by their Maternal and Child Health services. This differs from the previous recommendations in which health workers were expected to individually counsel all HIV-infected mothers about the various infant feeding options, and it was then for mothers to decide between them.

http://www.who.int/child_adolescent_health/documents/9789241599535/en/index.html

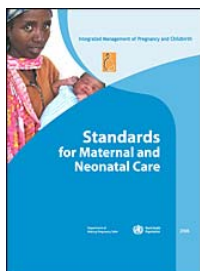
IMCI chart booklet (2008)



The IMCI training materials and chart booklet were originally developed in 1995, and are now being used in more than 100 countries around the world. Over the past decade, new evidence has emerged which has been synthesized and published as "technical updates" in 2006. This revised version of the chart booklet includes new sections on the management of illness in the first week of a child's life. This chart booklet is a job-aid to be used by health workers mostly at first-level health facilities in places where there is not a high prevalence of HIV.

http://www.who.int/child_adolescent_health/documents/IMCI_chartbooklet/en/index.html

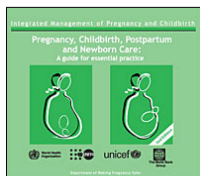
Standards for maternal and newborn health (2007)



These are a set of user-friendly leaflets that present WHO key recommendations on the delivery of maternal and neonatal care in health facilities, starting from the first level of care. Facilities at higher levels of care should also have these standards in place as a minimum (essential) care for all mothers and babies; in addition, they should have standards for the care of women and newborns in need of obstetric and special care. The standards are part of the WHO IMPAC package, which provides guidance for assisting countries to improve the health and survival of women and their newborn babies during pregnancy, childbirth and the postnatal period.

http://www.who.int/making_pregnancy_safer/documents/a91272/en/index.html

IMPAC - Pregnancy, childbirth, postpartum and newborn care: a guide for essential practice (2006)

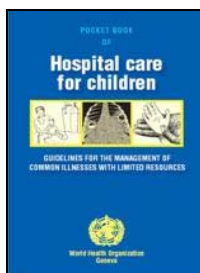


This guide provides evidence-based recommendations to guide health-care professionals in the management of newborns during their first week of life in addition to the management of women during pregnancy and after child birth. It is a guide for clinical decision-making. It facilitates the collection, analysis, classification and use of relevant information by suggesting key questions, essential observations and/or examinations, and recommending research based interventions. It promotes the early detection of complications and the initiation of early and appropriate treatment, including timely referral, if necessary.

http://whqlibdoc.who.int/publications/2006/924159084X_eng.pdf

http://www.who.int/making_pregnancy_safer/documents/924159084x/en/index.html

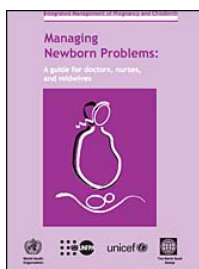
Pocket book of hospital care for children (2005)



This is a pocket-sized manual for use by doctors, senior nurses and other senior health workers who are responsible for the care of young children including newborns at the first referral level in developing countries. It presents up-to-date clinical guidelines which are based on a review of the available published evidence by subject experts, for both inpatient and outpatient care in small hospitals where basic laboratory facilities and essential drugs and inexpensive medicines are available. It covers neonatal problems and surgical conditions of children which can be managed in small hospitals. This pocket book is part of a series of documents and tools that support the Integrated Management of Childhood Illness (IMCI).

http://www.who.int/child_adolescent_health/documents/9241546700/en/index.html

IMPAC - Managing newborn problems: a guide for doctors, nurses and midwives (2003)

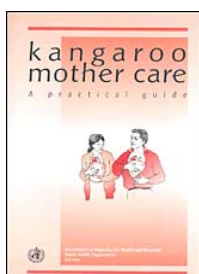


This guide is designed to assist countries with limited resources in their efforts to reduce neonatal mortality and to ensure care for newborn babies with problems due to complications of pregnancy and childbirth, such as asphyxia, sepsis, and low birth weight or preterm birth. The main section of this guide is arranged by clinical signs or findings, which facilitates early identification of illness, and provides up-to-date guidelines for clinical management. This guide is complementary to the IMCI guidelines for care of the sick young infant: the major illnesses emphasized in this guide originate at birth or during the first week of life, while the illnesses covered in the IMCI guidelines generally originate after that period.

http://www.who.int/making_pregnancy_safer/documents/9241546220/en/index.html

<http://whqlibdoc.who.int/publications/2003/9241546220.pdf>

Kangaroo mother care: a practical guide (2003)

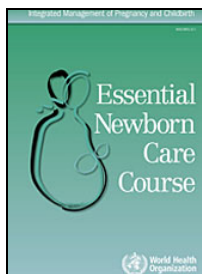


Kangaroo mother care is a method of care of preterm infants. The method involves infants being carried, usually by the mother, with skin-to-skin contact. This guide is intended for health professionals responsible for the care of low-birth-weight and preterm infants. Designed to be adapted to local conditions, it provides guidance on how to organize services at the referral level and on what is needed to provide effective kangaroo mother care. The guide includes practical advice on when and how the kangaroo-mother-care method can best be applied.

http://www.who.int/making_pregnancy_safer/documents/9241590351/en/index.html

TRAINING TOOLS

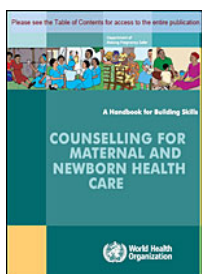
Essential newborn care course (2010)



The Essential Newborn Care Course (ENCC) aims to ensure health workers have the skills and knowledge to provide appropriate care at the most vulnerable period in a baby's life. Health workers are taught to use WHO's Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice (the PCPNC Guide) – and particularly the sections concerned with newborn care – that provides up-to-date evidence-based information and management of babies with a range of needs in the initial newborn period.

http://www.who.int/making_pregnancy_safer/documents/newborncare_course/en/

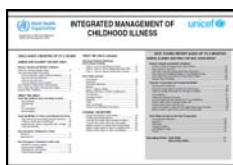
Counselling for maternal and newborn health care (2009)



The main aim of this handbook is to strengthen counselling and communication skills of health providers including skilled birth attendants, helping them to effectively discuss with women, their husbands/partners and families and communities the important issues surrounding pregnancy, childbirth, postpartum, postnatal and post-abortion care. Key information from the clinical guide 'Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice' (PCPNC) has been integrated. The handbook relies on a self-directed learning approach. Although it is designed to be used by groups of health workers with the help of a facilitator, it can also be used by an individual. All topical sessions contain specific aims and objectives, clearly outlining the skills that will be developed and corresponding learning outcomes. There is a review at the end of each session to ensure that the learner has understood the key points before progressing to subsequent sessions.

http://www.who.int/making_pregnancy_safer/documents/9789241547628/en/index.html

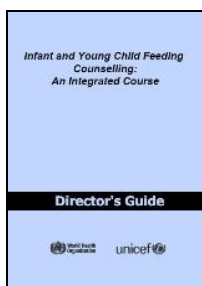
IMCI Training course (2008)



This training course is designed to teach the case management process to doctors, nurses, and other health workers who see sick children and infants. It is a case management process for a first-level facility such as a clinic, a health centre or an outpatient department of a hospital. The modules include exercises that will help the health care providers learn the steps. The guidelines describe how to care for a child who presents at a clinic with an illness for the first time or for a scheduled follow-up visit to check the child's improvement. They address most but not all of the major reasons a child is brought to a clinic for illness. They also describe counselling for mothers and other caretakers.

http://www.who.int/child_adolescent_health/documents/9789241597388/en/index.html

Infant and young child feeding counseling: an integrated course (2006)



This five-day course is designed to provide knowledge and skills to health workers and counsellors (including lay counsellors) to support appropriate breastfeeding and complementary feeding, as well as feeding of infants born to HIV-infected mothers. The course includes a specialized counselling course on breastfeeding the newborn infants, the 'Breastfeeding counselling: a training course', apart from the courses on HIV and infant feeding, and complementary feeding.

<http://www.who.int/nutrition/publications/infantfeeding/9789241594745/en/index.html>

MONITORING AND EVALUATION

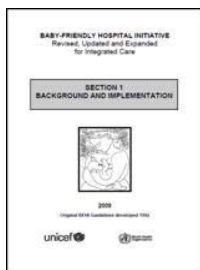
Countdown to 2015: taking stock of maternal, newborn & child survival (2010)



Countdown to 2015 is a global movement of academics, governments, UN agencies, foundations, health care associations and nongovernmental organizations formed in 2005 to track progress in reducing maternal and child deaths in the 68 countries where over 95% of these deaths occur. The movement aims to raise awareness and stimulate country action to accelerate progress towards reducing child mortality and improving maternal health. Countdown collects and analyses data and produces profiles for 68 countries. Each country profile presents coverage data for a range of key health services, including skilled attendance at delivery, postnatal care, and child health among others. The 2012 report reviews progress over the years 2000–2012.

http://www.who.int/child_adolescent_health/documents/9789241599573/en/index.html

Baby-Friendly Hospital Initiative (2009)



The Baby-friendly Hospital Initiative (BFHI) is a global effort launched by WHO and UNICEF to implement practices that protect, promote and support breastfeeding. It was launched in 1991 in response to the Innocenti Declaration. The global BFHI materials have been revised, updated and expanded for integrated care. The materials reflect new research and experience, reinforce the International Code of Marketing of Breast-milk Substitutes, support mothers who are not breastfeeding, provide modules on HIV and infant feeding and mother-friendly care, and give more guidance for monitoring and reassessment.

<http://www.who.int/nutrition/publications/infantfeeding/9789241594950/en/index.html>

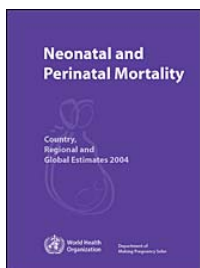
Indicators for assessing infant and young child feeding practices (2008)



This document summarizes new and updated indicators to assess infant and young child feeding. It is the first in a series of three documents issued by WHO that also include an operational guide on measurement issues and an update on the indicator values for 54 countries using data from Demographic and Health Surveys. It is hoped that the indicators will be widely used in large-scale population-based surveys in countries to assess progress in the implementation of the Global Strategy for Infant and Young Child Feeding and to measure the coverage of effective nutrition interventions in young children.

<http://www.who.int/nutrition/publications/infantfeeding/9789241596664/en/index.html>

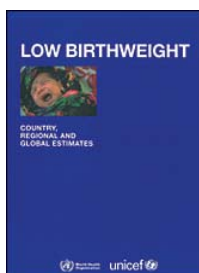
Neonatal and perinatal mortality 2004: Country, regional and global estimates (2007)



This leaflet provides internationally comparable estimates on neonatal and perinatal mortality on country, regional and global level in 2004. The document updates the estimates published for 2000. It includes new data from surveys and vital registration, using the same methodology and assumptions. The new statistics allow health managers to review and compare achievements in the area of newborn health.

http://www.who.int/making_pregnancy_safer/documents/9789241596145/en/index.html

Low birth weight: Country, regional and global estimates (2004)



This report presents country, regional and global estimates of low birth weight for 2000, together with a detailed description of the methods used in calculating the estimates. Some limited data on trends are also included. The limitations of low-birth-weight data are described and recommendations are made for further improvements in the data for this important indicator of health.

http://www.who.int/making_pregnancy_safer/documents/9280638327/en/index.html

TECHNICAL REVIEWS

Optimal feeding of low-birth-weight infants: A review (2006)



Up to 70% of newborn deaths occur in babies who are of low birth weight, many of which could be prevented with adequate care and feeding. This systematic review addresses the questions of what to feed, when to start feeding, how to feed, how often and how much to feed low-birth-weight babies. The outcomes considered are mortality, severe morbidity, growth, and development. The review is the basis of practical guidelines and training materials on feeding of low-birth-weight babies that will be published in

http://www.who.int/child_adolescent_health/documents/9241595094/en/index.html

Impact on economic growth of investing in maternal–newborn health (2006)



This paper is a systematic review of the evidence of the impact on economic growth of investments in maternal–newborn health. The methodology used for the review includes a systematic search for published literature in relevant electronic databases. The paper concludes that considerably more research in this area is needed before any advice can be provided to policy-makers about the contribution to economic growth of investments in maternal–newborn health.

http://www.who.int/making_pregnancy_safer/documents/9241594500/en/index.html

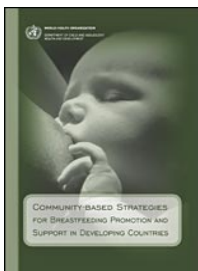
The costs of maternal–newborn illness and mortality (2006)



This paper is a systematic review of the estimation of the cost of illness related to maternal–newborn ill-health. The methodology used includes a systematic search on electronic databases for published literature and manual searches for the identification of grey (unpublished) literature. The review reveals some of the difficulties in measuring the cost of illness and suggests probable data sources for cost-of-illness studies of maternal–newborn ill-health.

http://www.who.int/making_pregnancy_safer/documents/9241594497/en/index.html

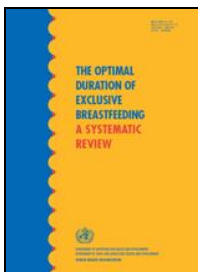
Community-based strategies for breastfeeding promotion and support in developing countries (2003)



WHO and UNICEF developed the 'Global Strategy on Infant and Young Child Feeding' in 2002 to revitalize world attention to the substantial impact of feeding practices on the growth and development, health, and survival of infants and young children. The present review examines the evidence for the contribution that community-based interventions can make to improve infant and young child feeding, and identifies factors that are important to ensure that interventions are successful and sustainable. It is intended that the experiences presented here will help policy makers, programme planners, and health professionals in the essential and challenging task of translating knowledge into action at all levels: the health system, the community and civil society at large.

http://www.who.int/child_adolescent_health/documents/9241591218/en/index.html

The optimal duration of exclusive breastfeeding: A systematic review (2001)



This review summarizes studies comparing the effects of exclusive breastfeeding for 6 months versus exclusive breastfeeding for 3-4 months on child health, growth and development, and on maternal health. This review documents the search and methods, provides results of the review and discusses these results.

http://www.who.int/nutrition/publications/infantfeeding/WHO_NHD_01.08/en/index.html

| Title | Target audience | Languages |
|--|---|-----------------|
| Policy and strategy | | |
| Effective interventions, , commodities and guidelines for reproductive, maternal, newborn and child health | Policy makers and program managers at the global, national, and sub-national level | E |
| Packages of interventions for family planning, safe abortion care, maternal, newborn and child health (2010) | Policy makers and program managers at the global, national, and sub-national level | E |
| Working with individuals, families and communities to improve maternal and newborn health (2010) | Policy makers and technical specialists involved in maternal and newborn health | A/E/F/R/S |
| WHO/UNICEF Joint Statement - Home visits for the newborn child: a strategy to improve survival (2009) | Policy-makers, national and mid-level programme managers, and health professionals | C/E/F/S |
| Making a difference in countries: Strategic approach to improving maternal and newborn survival and health (2006) | Policy makers, program managers, and other stake-holders at the global and national levels | A/E/F/R/S |
| Newborn health policy and planning framework (2005) | Policy makers and program managers at the national and sub-national levels | E |
| Making pregnancy safer: The critical role of the skilled attendant - A joint statement by WHO, ICM and FIGO (2004) | Policy makers, health care providers, donors and communities | E/F |
| Global strategy for infant and young child feeding (2003) | Policy makers, international organizations, health professional bodies, and social partners | A/C/E/F/G/I/R/S |
| Guidelines | | |
| Guidelines on basic newborn resuscitation | Policy makers, program managers, academics, and health care providers | E |
| Guidelines on feeding low birth weight babies | Policy makers, program managers, academics, and health care providers | E |
| Guidelines on HIV and infant feeding (2010) | Policy makers, program managers, academics, and health care providers | E |
| IMCI chart booklet - standard (2008) | Health care providers | E |
| Standards for maternal and newborn health (2007) | Policy makers, program managers, health professionals, non-governmental and community organizations | E |
| IMPAC - Pregnancy, childbirth, postpartum and newborn care: a guide for essential practice (2006) | Health care providers | A/E/F/P/R |
| Pocket book of hospital care for children (2005) | Health care providers | E/F/P/R |
| IMPAC - Managing newborn problems: a guide for doctors, nurses and midwives (2003) | Health care providers | A/E/F/R |
| Kangaroo mother care: a practical guide (2003) | Health care providers, program managers, and policy makers at the national and sub-national levels | E/F/S |
| Training tools | | |

| | | |
|---|---|-------|
| Essential newborn care course (2010) | Health care providers | E |
| Counselling for maternal and newborn health care (2009) | Health care providers | E |
| IMCI training course (2008) | Health care providers | E, F |
| Infant and young child feeding counseling: an integrated course (2006) | Health care providers | E/S |
| Monitoring and evaluation | | |
| Neonatal and perinatal mortality 2004: Country, regional and global estimates (2007) | Policy makers, program managers, and researchers at the global and national levels | E |
| Countdown to 2015: taking stock of maternal, newborn & child survival (2010) | Policy makers, program managers, and researchers | E |
| Baby-Friendly Hospital Initiative (2009) | Health professionals, policy makers, program managers, and evaluators | E |
| Indicators for assessing infant and young child feeding practices (2008) | Program managers and evaluators at the national level | E/F/S |
| Low birth weight: Country, regional and global estimates (2004) | Policy makers, program managers, and researchers at the global and national levels | E |
| Technical reviews | | |
| Optimal feeding of low-birth-weight infants: A review (2006) | Health care providers, and program managers at the national and sub-national levels | E |
| Impact on economic growth of investing in maternal–newborn health (2006) | Policy makers and program managers at the global and national levels | E |
| The costs of maternal–newborn illness and mortality (2006) | Policy makers and program managers at the global and national levels | E |
| Community-based strategies for breastfeeding promotion and support in developing countries (2003) | Policy makers, program managers, researchers, and community leaders | E |
| The optimal duration of exclusive breastfeeding: A systematic review (2001) | Policy makers and health care providers | E |

A = Arabic, C = Chinese, E = English, F = French, G = German, I = Italian, P = Portuguese, R = Russian, S = Spanish

