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Africa Regional Workshop on Improving Routine Data for Child Health in National Health Information Systems

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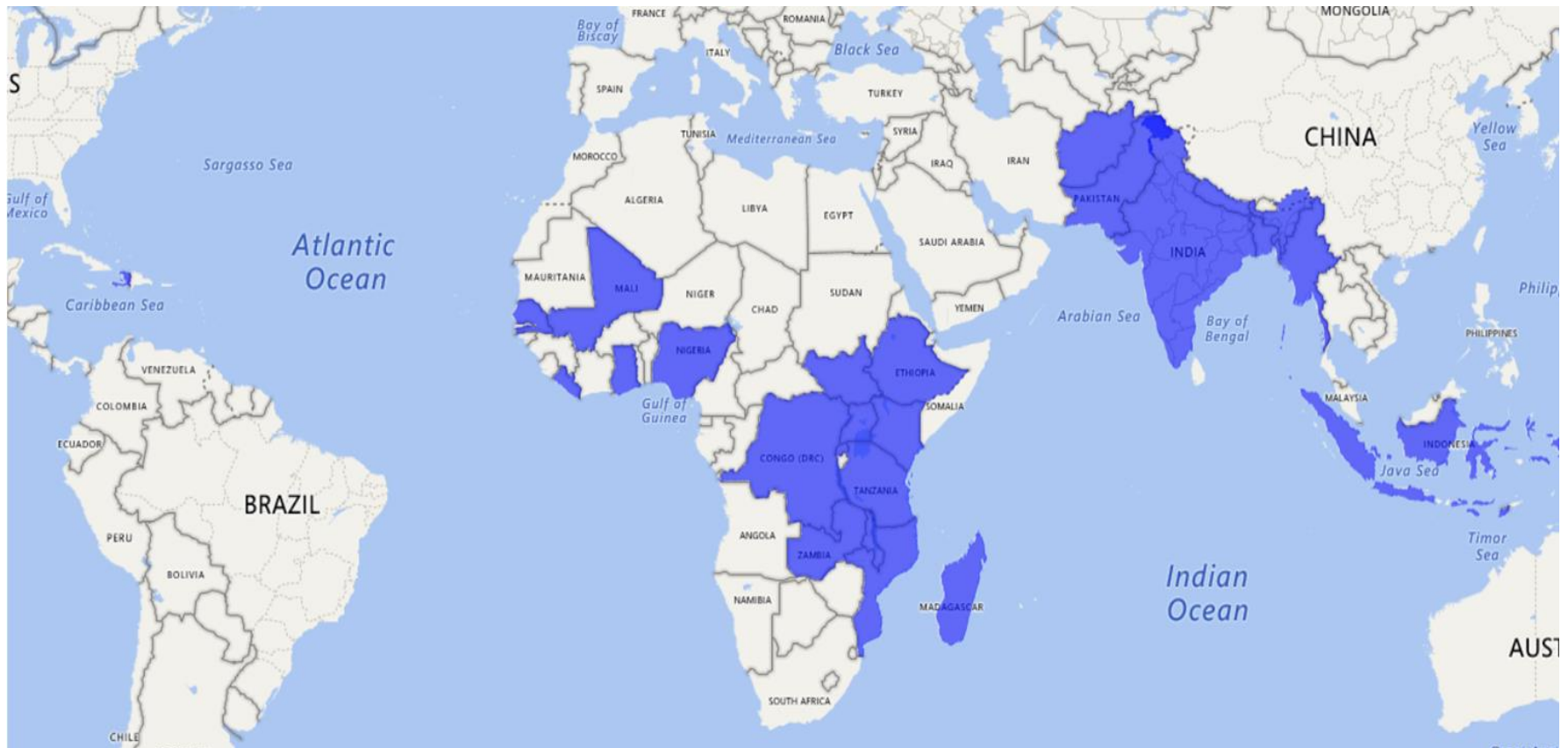
Review of Newborn Health Data Elements in HMIS of 24 Countries



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On Behalf of the MCSP MMEL Team

Background

Countries Included: USAID priority countries (except Yemen)



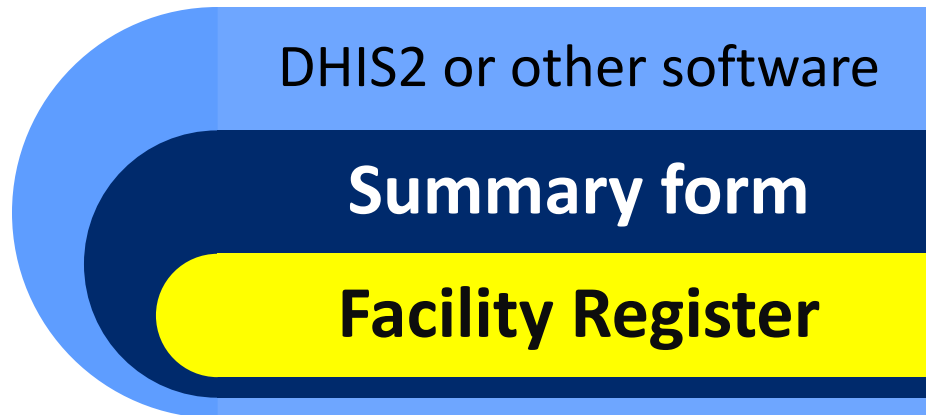
Objectives of the Review

- **To better understand and document** what information on MNH service content and health outcomes is currently included in national HMIS for 24 select USAID priority countries for ending preventable child and maternal mortality
- **Identify gaps and advocate** at the national level for incorporation of new MNH data elements or indicators related to service content and/or health outcomes as part of national HMIS

Methods

Focused on:

- Antenatal care (ANC)
- Labor and delivery (L&D)
- Postnatal care (PNC)



Identified 286 key data elements to review in consultation with USAID

Methods

Collected HMIS forms from
24 countries:

- Partographs
- Facility registers
- Facility monthly/quarterly summary forms

Used standardized data abstraction template

Multiple rounds of data quality assurance

[illegible]

Newborn-Related Findings



Findings

Essential newborn care

- *Breastfeeding within one hour* is a data element that is often present in **L&D registers, N=15**
- *Chlorhexidine use*: **Bangladesh, Nepal and Madagascar**
- *Immediate skin to skin*: **Bangladesh, Haiti, Mozambique, Rwanda and Uganda**



Source: HNN Healthy Newborn Network

Emergency Newborn Care

Countries reporting on **Asphyxia**
diagnosis and treatment, N= 14

Only 6 countries
record **both**
asphyxia **diagnosis**
& **provision** of
neonatal
resuscitation

R=Register

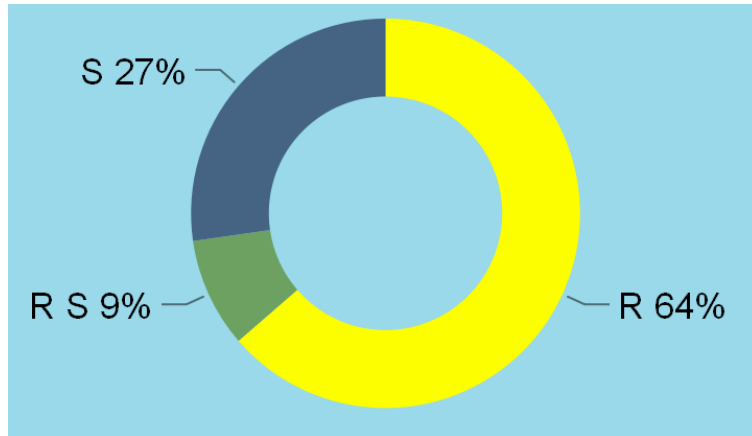
S=Summary form

RS=Both register and
summary

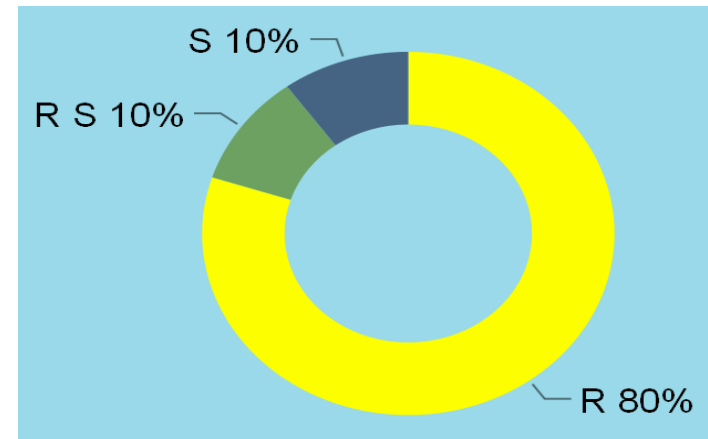
Countries	Asphyxia diagnosed	Resuscitation provided
Bangladesh		
DRC		
Ethiopia		
Ghana		
Malawi		
Mali		
Mozambique		
Nepal		
Nigeria		
Rwanda		
Senegal		
Tanzania		
Uganda		
Zambia		

Postnatal Care

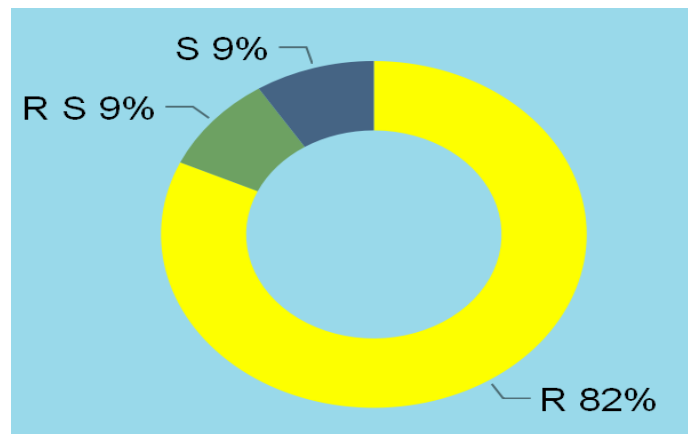
PNC in 2 days, N=12



PNC in 3 days, N=10



PNC in 7-14 days, N=13



PNC is
commonly
recorded in
registers

R=Register

S=Summary form

RS=Both register and
summary

Prematurity

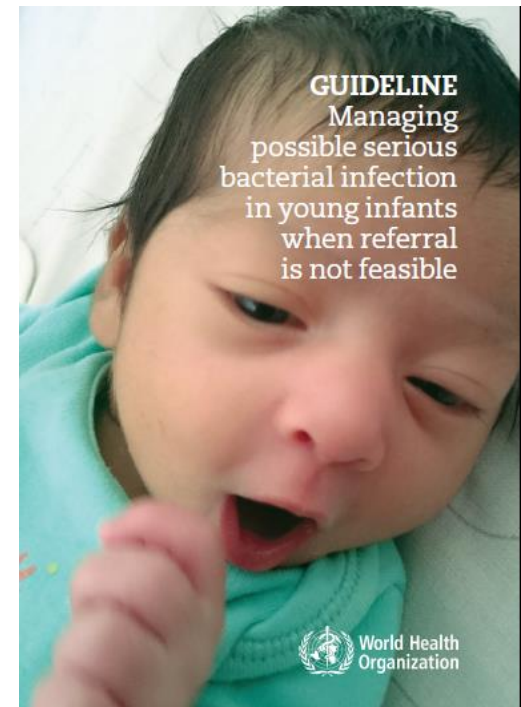
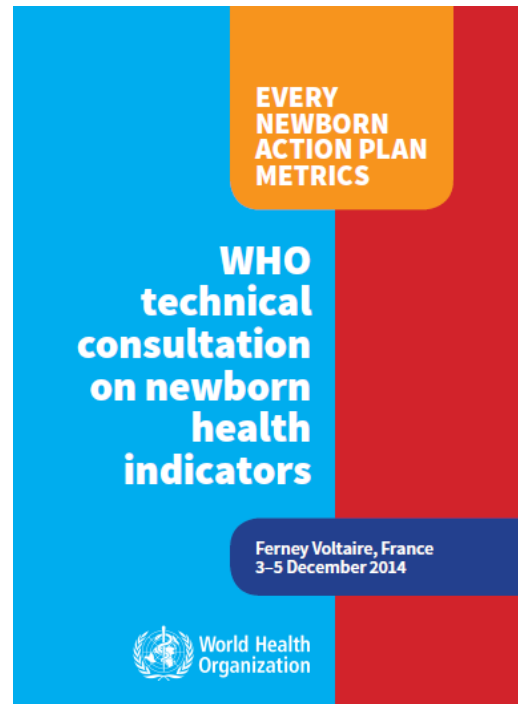
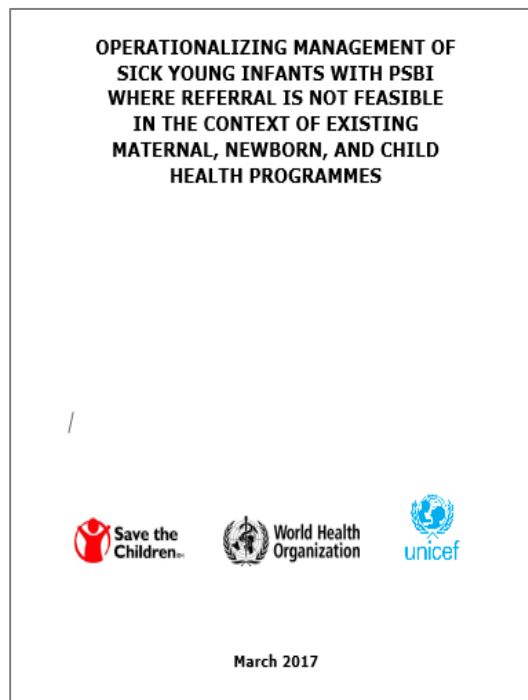
- Low birth weight is the most common newborn complication in country summary forms, **N=11**
- Referral specified for KMC in **Malawi, Nigeria and Rwanda** (register or summary form)
- KMC follow up after discharge: **Ethiopia, Haiti, Nigeria, Rwanda and Tanzania** (register or summary form)



KMC in Black Lion Hospital Ethiopia
Photo: Yordanos Molla, August 2017

Sepsis Management

Only DRC records antibiotic use for sepsis management in maternity register



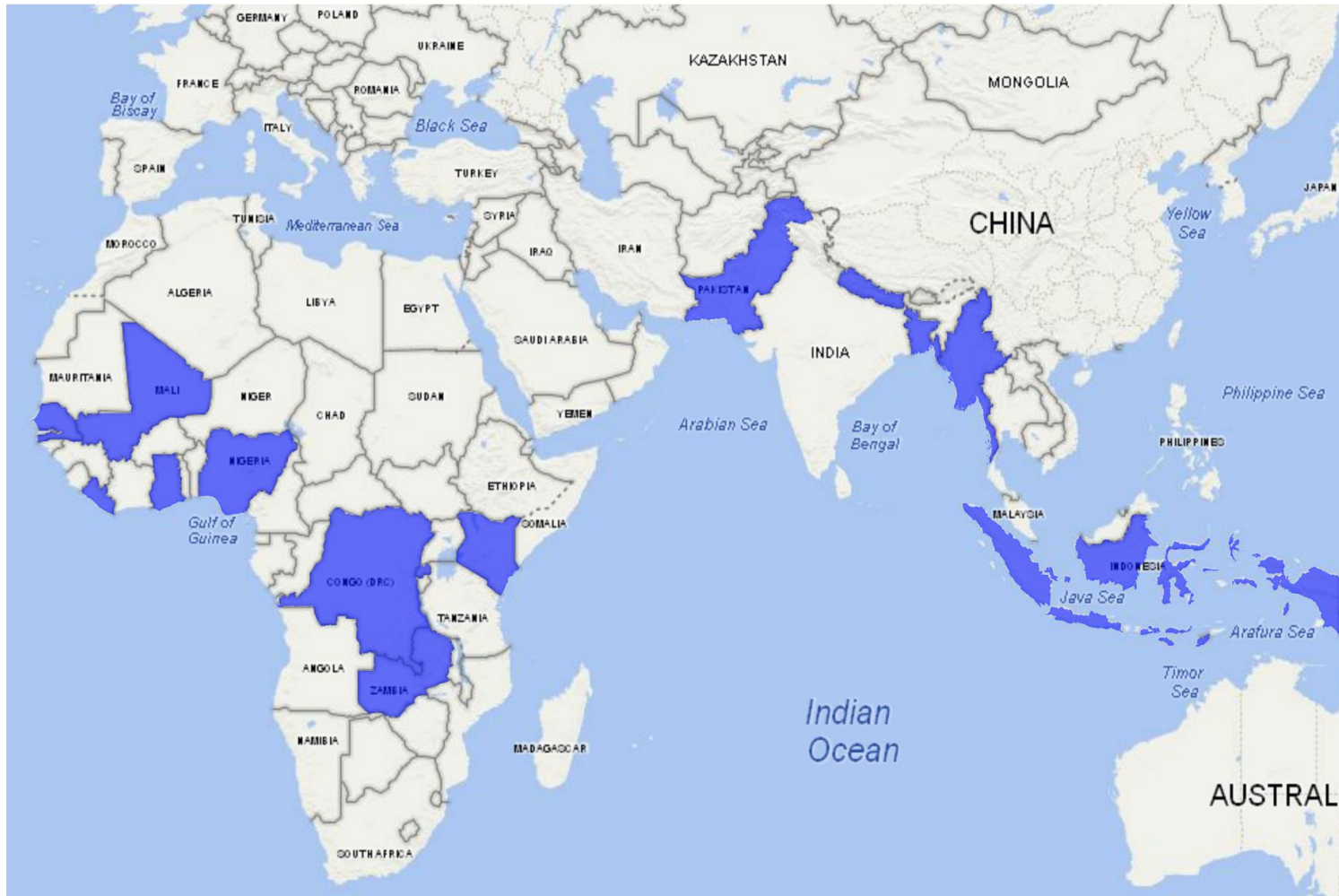
Countries reporting on Stillbirth, N= 24

Stillbirth

The majority of the countries (N=16) reported on stillbirth disaggregated by ***Fresh and Macerated***

Register		Countries	Summary Form	
F&M	Combined		F&M	Combined
		Afghanistan		
		Bangladesh		
		DRC		
		Ethiopia		
		Ghana		
		Haiti		
		India		
		Indonesia		
		Kenya		
		Liberia		
		Madagascar		
		Malawi		
		Mali		
		Mozambique		
		Myanmar		
		Nepal		
		Nigeria		
		Pakistan		
		Rwanda		
		Senegal		
		South Sudan		
		Tanzania		
		Uganda		
		Zambia		

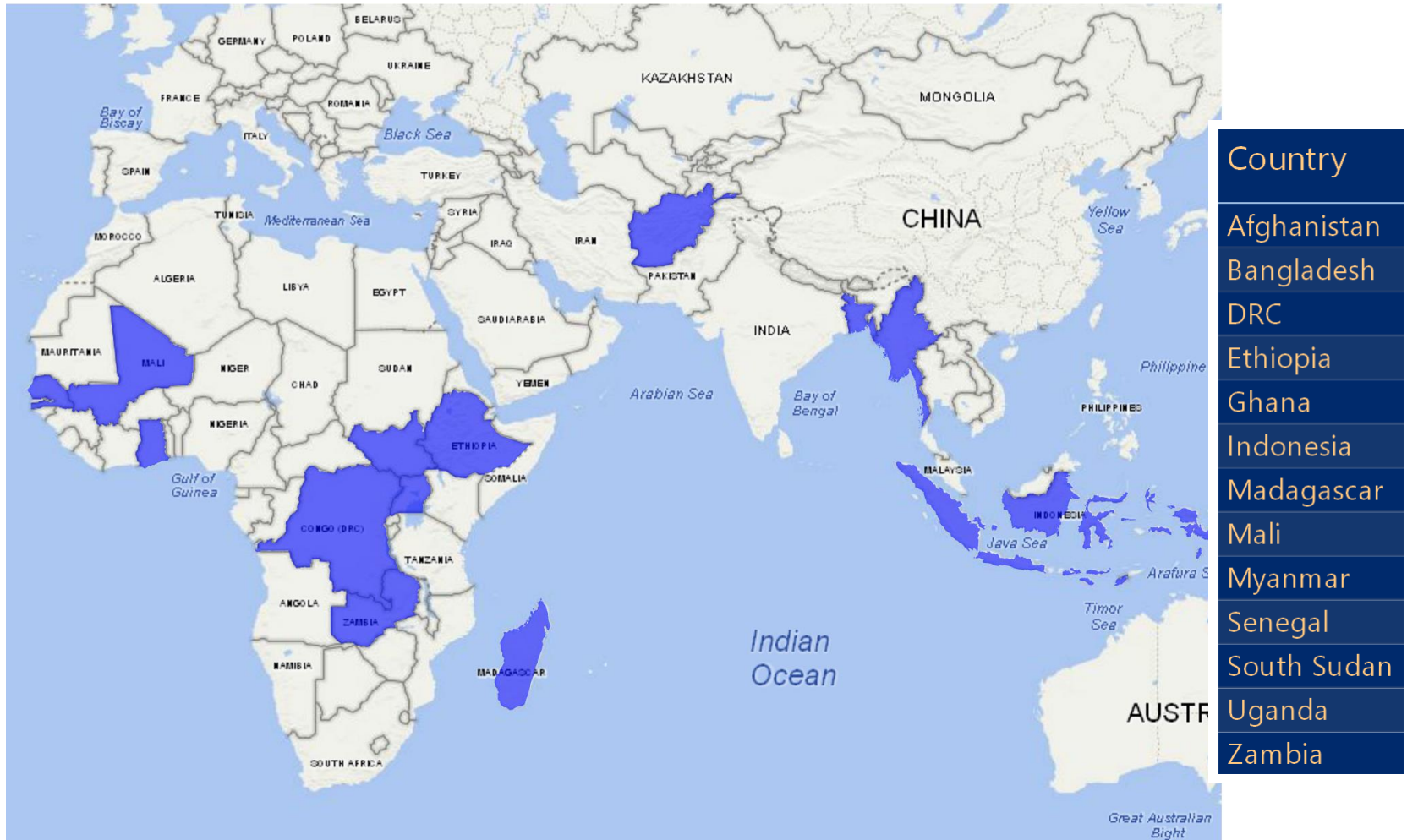
Facility-based Newborn Mortality



Country
Bangladesh
DRC
Ghana
Indonesia
Kenya
Liberia
Mali
Myanmar
Nepal
Nigeria
Pakistan
Rwanda
Senegal
Zambia

**Countries that report on newborn deaths at facilities
within 28 days of birth**

Early Facility-based Newborn Mortality



Countries that report on newborn deaths at facilities within 7 days of birth

Where to Find More Findings and Resources:

<http://www.mcsprogram.org/resource/hmis-review/>



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Health Management Information Systems (HMIS) Review

Survey on Data Availability in Electronic Systems for Maternal and Newborn Health Indicators in 24 USAID Priority Countries

www.mcsprogram.org

Review of the Maternal and Newborn Health Content of National Health Management Information Systems in 24 Countries

Publish Date: September 2017
Author: MCSP

Routine Health Management Information Systems (HMIS) are the backbone of monitoring service delivery programs at the national level in low- and middle-income countries. Several global initiatives, such as [Ending Preventable Maternal Mortality](#), [Every Newborn Action Plan](#), and [Every Woman Every Child](#), have issued recommendations for core maternal and newborn health (MNH) indicators, including some that should be tracked at the global and national levels via routine HMIS. However, it is not well understood which countries are already collecting this information and which ones would need to revise their HMIS to track these indicators.

With this in mind, MCSP conducted a desk review of HMIS data collection and reporting forms in 24* USAID priority countries. The review aims to document the status of national HMIS capacity to track indicators on the content and quality of MNH services. Covering antenatal care, labor and delivery services, and postnatal care, it summarizes which data elements countries are collecting through their HMIS and in what format. It also discusses data elements within the context of recommended international standard measurements for MNH.

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Credit: Karen Kasmauski/MCHIP

For more information, please visit
www.mcspprogram.org

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