Title of the project Baseline And Endline Evaluation Survey of Neonatal Essential Care

In Garut, West Java, Indonesia

Conducted by Center for Health Research & Center of Health Promotion, Faculty of

Public Health, University of Indonesia

Collaboration with Save the Children

Sample Size ...

Date 2007-2011

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In the world every year 130 million babies born, about 4 million of whom die before reaching one month of age. Neonatal mortality in Indonesia is still high at 19/1000 live births in 2007. An effort has been made to overcome these problems is a program of saving newborn lives (SNL) phase 1 in Cirebon District in 2005. The program succeeded in increasing the ability of village midwives (BDD) in the management of neonatal asphyxia (BBL) using a simple technology of the tube and the lid, and the impact on neonatal mortality. Garut District is one of regencies in West Java neonatalnya mortality is still high, while the existing health resources is still low. Therefore, the SNL-2 project is run in Garut regency with a broader scope, which is essential neonatal health.

In the framework of monitoring and evaluation of the project, has conducted a baseline survey in 2007 and 2008 and an evaluation survey in 2011. The survey was conducted in 10 districts, with a sample of 640 mother infant 1-11 months on a survey of 2007 mothers and 400 infants 1-11 months of the survey in 2008 and 2011.

The results of this study indicate: coverage of prenatal care increased at least 1 time (91.4% to 98.3%), while the coverage of prenatal care increased at least 4 times (66.1% to 91.4%). Scope of delivery by health personnel increased (41.5% to 53.5%), as well as coverage of deliveries in health facilities showed an increase (12.8% to 21.5%). Contact childbed within 2 days after delivery by health personnel increased (16.3% to 53.8%). The increase also occurred in a neonatal contact (6-48 hours after birth) by health (15.3% to 55.0%).

Care infants weighing 2000 grams or less by the mother is better than before the intervention, but not so with that done by health personnel. The practice of early breastfeeding proved increased almost 2 times (35.5% to 64.7%), as well as prevention of hypothermia in the form of the practice of delaying a bath more than 6 hours after birth. The opposite was found in the practice of direct skin contact mother-infant, and immediately drain and wrap the baby immediately after birth is decreasing. Umbilical cord care practices by not giving anything on the cord, either after the cut and get out the better (17.8% to 46.8%). The same findings are found in mother's knowledge of postpartum danger signs in mothers and newborns.

Based on the above, then in order to increase KN1 can be even higher, then the coverage of deliveries by health professionals need to be improved with better partnership to enable the midwife-healer. Knowledge of mothers and the public about the danger signs of postpartum mothers and infants has not been good, the cadres and activities that exist in society can be utilized to disseminate information. In addition, to improve delivery by health personnel, needs to be done socialization labor warranty, so cost is no longer a constraint.