

## SUCCESS STORY

# From Surviving to Thriving: Strengthening Newborn Care at Dabani Hospital, Busia District Improves Survival of Pre-term Babies

USAID'S REGIONAL HEALTH INTEGRATION TO ENHANCE SERVICES IN EAST CENTRAL UGANDA (USAID RHITES-EC)

Carol (26 years old) visited a private healthcare facility in Busia district because she was experiencing labour-like pains. Carol was assisted by the midwife to deliver a premature baby boy at 28 weeks of gestation, who was severely underweight (weighed 1.4 kg). Given that the private healthcare facility lacked the appropriate facilities and staff to manage premature babies, Carol and baby Ethan were referred to Dabani Hospital for further management.

At Dabani Hospital, a private-not-for-profit (PNFP) hospital supported by USAID Regional Health Integration to Enhance Services in East Central Uganda (USAID RHITES-EC), baby Ethan was placed in an incubator and given antibiotics to avoid infection.

*"We were scared to see our pre-term baby being fed through a tube and supported by a machine to breathe, but the nurses assured us that the quality care he was receiving would enable him to survive," said Carol and her husband Ambrose.*

The Neonatal Intensive Care Unit (NICU) team monitored and assessed Ethan daily. After three weeks he developed a good sucking reflex and was able to swallow. Doreen (a midwife) then removed the feeding tube and replaced it with



Left: A pre-term Baby Ethan, Right: Baby Ethan at 6-months  
Photo by Doreen Ntumba, midwife at Dabani Hospital, Busia

"spoon and cup" feeding. Ethan started gaining weight and was discharged at 1.9 kgs. Carol learned how to provide baby Ethan with kangaroo care (holding him against his mother or father's bare chest); and feed him every two hours. While still at the hospital, baby Ethan also received immunization, his parents were also equipped with nutrition education and other guidance to ensure that Baby Ethan grows to be a healthy baby. "Our hope was on every bit of instruction that

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we were given. My husband Ambrose also supported me to provide skin-to-skin contact with the baby as we were taught at the hospital,” says Carol.

Carol and Ambrose received regular follow-up visits by a community health worker (CHW), popularly known as a Village Health Team (VHT) member. These visits helped assess baby Ethan’s wellbeing and reaffirm health messages received at the hospital. The hospital collaborates with VHTs who operate in each of the sub-counties across East Central Uganda. Besides providing basic health services to community members, they also follow up mothers with pre-term babies to ensure that they follow hospital instructions, until their next appointment. During the follow-up visits, they look out for any danger signs such as difficulty in breathing or not breathing at all; if the baby turns blue (cyanosis)—a condition that affect oxygen transportation in the blood; or if the baby’s skin turns yellow (jaundice); and if the baby is unable able to feed (suckle and swallow). The CHWs report these findings to the hospital contact person. With this close monitoring, baby Ethan grew from just surviving to thriving!

*“Today, Ethan is 6 months old, weighs 7 kgs, and is thriving well,” says Carol and Ambrose with delight.*

Dabani Hospital has experienced an improvement in newborn survival from 71% in May 2019 to 98% in June

2020. Improvement in infrastructure—from an improvised newborn corner to a 12-bed well equipped NICU—as well as training and mentorship providers on newborn care management were critical to this success. In addition, mentorship on data use to review outcomes of newborns admitted in the units and use of a QI approach to focus on processes of infection prevention, sepsis management, feeding maintenance and warmth of the babies also contributed to the achievements in newborn survival.

In order to improve birth outcomes and newborn survival for premature babies like Ethan in East Central Uganda, the USAID RHITES EC supports the following: the setup of neonatal intensive care units at high volume facilities across the region; the renovation and remodeling of maternity units at healthcare facilities; on-site training and mentoring of health care workers at high-volume health facilities across the 12 districts on essential newborn care and the management of preterm babies; mentorship of staff at Newborn Intensive care units (NICUs). At the NICUs, the mentorship included data use by reviewing outcomes of newborns admitted in the units and clinical skills/QI approaches, in particular focusing on processes of infection prevention, sepsis management, feeding maintenance and warmth of the babies; referrals and community follow-up; and maternal and perinatal surveillance.

**Figure 1:** Trends in newborn survival at Dabani Hospital have steadily improved from 71% in May 2019 to 100% in June 2020.

