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EVALUATING A COMMUNITY CAMPAIGN IN HAITI:

NEWBORN UMBILICAL CORD CARE IN HAITI: A COMMUNITY CAMPAIGN Susan Walsh, DNP, C-PNP; Leslie Cordes, MD Kathleen Norr, PhD; Girija Sankar, MA, MS; Heather Sipsma, PhD

INTRODUCTION

Reduce Under-5 Child Mortality

- Sepsis in top 3 leading causes of neonatal death
- Umbilical cord infection can lead to sepsis

Haiti: Poorest country in Western hemisphere

- Neonatal mortality rate 25.5/1000 live births
- 6% newborn deaths caused by sepsis
- 63% deliveries occur at home





Chlorhexidine application to cord stump

Known safety profile (delivering 4% chlorhexidine)



Design

• Cohort of first 200 women delivered by traditional birth attendants (TBAs) after campaign began

Participants

• Women in the community at least 18 years of age with a healthy baby 1-4 weeks old born at home



Table 2. Use of chlorhexidine (N=199)¹

• Questionnaire administered by CHWs at postnatal visit in





- World Health Organization recommended intervention
- Decreases cord infections and neonatal mortality in low resource settings with home delivery



- **Reduce sepsis from umbilical cord infection among** neonates born in Haiti
- **Develop/test a community campaign that** promotes newborn cord care based on World Health Organization recommendations



RESULTS

Table 1. Sample demographics (N=200)¹

	N	%
Age of mother		
< 20	23	11.6
20-29	130	65.3
≥ 30	46	23.1
Parity		
Primiparas	29	14.5
Multiparas: 2-3 births	131	65.5
Multiparas: 4 or more births	40	20.0
Potentially unhygenic home	154	78.2
Religion ²		
Catholic	110	56.7
Protestant	67	34.5
Voodoo	10	5.2
Other	5	2.6

the mother's home

Data analysis

• Descriptive statistics, unadjusted and adjusted statistics to determine differences in mothers' cord care practices

	Ν	%
Told about applying chlorhexidine to baby's cord		
Yes	196	98.5
No	3	1.5
Persons who advised about chlorhexidine use ^{2,3}		
TBA	190	98.4
CHW	16	8.3
Doctor/Nurse	1	0.5
Other	1	0.5
Used chlorhexidine		
Yes	193	97.0
No	6	3.0
Number of days applied chlorhexidine ⁴		
1	0	0
2	4	2.2
3	17	9.2
4	20	10.9
5	30	16.3
6	15	8.2
7	98	53.3
Adhered to instructions (applied chlorhexidine for 7 days or until baby's cord fell off) ⁶	166	88.3
Reasons for not applying chlorhexidine for all 7 days ^{2,5}		
Baby's cord fell off	68	81.0
Forgot	1	1.2
Other	0	0
Ease of chlorhexidine use		
Easy	181	94.3
Not too hard	11	5.7
Difficult	0	0
Baby's cord has fallen off (at home visit 7-10 post-		
birth)	183	92.0
Yes	16	8.0
No		
Day baby's cord fell off ⁵		
1	4	2.5
2	3	1.9
3	22	13.7
4	23	14.3
5	37	23.0
6	34	21.1
7	33	20.5
8	4	2.5
9	4	0
	0	

¹Missing values for each item range from 0 to 6.

²Respondents were instructed to select all that apply.

Table 3. Experiences with cord care (N=200)¹

	N (%)	%
Substances applied to newborn cord (N=121) ²		
Covering or Binding	87	71.9
Unhygienic substance ³	11	9.1
Symptoms observed in baby ²		
Red cord	9 (4.6)	
Swollen	2 (1.0)	
Pus	10 (5.2)	
Fever	1 (0.5)	
Poor eating	0	
Irritability	7 (3.6)	
Any of these ⁴	18 (9.3)	
When you noticed these things, what did you do? ^{2,5}		
Contacted nurse/doctor/hospital	9	50.0
Contacted TBA/ CHW/hoogan	3	16.7
Did nothing	8	44.4

1Numbers of missing responses per item range from 0 to 6 unless otherwise noted. 2Select all that apply. 3Among those who were told about applying chlorhexidine.

¹Numbers of missing responses per item range from 1 to 7 unless otherwise noted.

²Select all that apply.

³Includes powder, dirt, dung or water.

⁴Excludes irritability.

⁵Among those who reported the baby having any symptoms (n=18).

- Results demonstrate high level of acceptability for chlorhexidine use
- Message reached nearly all mothers
- Vast majority adhered to recommended application practices
- Using TBAs to implement campaign was successful
- Campaign was less successful in limiting use of coverings; no indication of negative impact on infant

4Among those who applied chlorhexidine (n=193); 9 missing responses (total valid responses=184). 5Among those who did not apply chlorhexidine all 7 days (n=86); 2 responses missing (total valid = 84). 6Among those who responded to questions regarding use and a combination of the number of days they applied chlorhexidine and reasons why not (n=188).

MPLICATIONS

- Mothers and local caregivers in Haiti are committed to improving neonatal health
- Results suggest adapting instructions to include clean gauze/cloth as substitute for traditional cord/abdominal coverings
- Community-campaigns promoting chlorhexidine application instead of unhygienic cord care practices may effectively reduce newborn cord infections, neonatal sepsis and death
- Such strategies can be used for improving other aspects of newborn care



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