

Indicator: # of mothers who had a postpartum visit within two days of giving birth (HE_MNCH_242)**HEALTH SECTOR** **PROJECT AREA:** Maternal and Newborn Health**Type:** Outcome**Unit of Measure:** Individual**Disaggregation:** None**Related Objective:** Increase knowledge and skills of women to adopt practices that contribute to a healthy pregnancy, safe delivery, good postpartum, and a healthy newborn (Objective 1)**Precise definitions**

Mothers with infants under 12 months: The mothers included in the outcome indicator should have attended a multisession training on maternal and newborn health, ideally during their pregnancy, co-facilitated by the PCV and their counterpart or local health staff/volunteer. The individual should have attended at least 75 percent of sessions to be counted in the denominator for *HE_MNCH_079: Number of target population reached with individual or small group education on maternal and newborn care services*, and therefore this indicator.

Postpartum visit: At a postnatal-care checkup, newborns should be assessed for key clinical signs of severe illness and referred as needed. The following signs should be assessed during each postnatal-care contact, and the newborn should be referred for further evaluation if any of the signs is present: stopped feeding well, history of convulsions, fast breathing (breathing rate of ≥ 60 per minute), severe chest in-drawing, no spontaneous movement, fever (temperature ≥ 37.5 °C), low body temperature (temperature < 35.5 °C), any jaundice in first 24 hours of life, or yellow palms and soles at any age.

Mothers should be screened to ensure physical, social, and psychological well-being. Women who desire contraception should receive it during the comprehensive postpartum visit. Recommended services during the postpartum visit can also include infant feeding, expressing breast milk if returning to work or school, postpartum weight retention, sexuality, physical activity, and nutrition.

A role of Peace Corps Volunteers is to advocate to mothers that they receive postpartum visits from a qualified provider, help them understand the importance of these visits for them and their newborn, and link them to services if needed.

Within two days of giving birth: The days and weeks following childbirth—the postnatal period—are a critical phase in the lives of mothers and newborn babies. Most maternal and infant deaths occur in the first month after birth; almost half of postnatal maternal deaths occur within the first 24 hours. For home births, the first postnatal contact should be as early as possible within 24 hours of birth, and an extra contact for home births at 24–48 hours is desirable. If giving birth in a facility, the mother should remain there until she can be given a checkup as described above.

Data collection

Tool: Maternal Health Outcomes Survey

This survey is intended to be given to the pregnant women who participated in a multisession training focused on maternal and newborn health facilitated by the PCV and their counterpart. The pregnant woman should have attended at least 75 percent of the defined information sessions to be included in the survey. Data for the outcome indicators ideally would be collected three to six months after the birth of their baby. If the timing of a PCV's close of service (COS) or other factors will not allow for this, a survey could be conducted earlier, but indicators that reference specific timeframes may need to be removed, such as the one focused on exclusive breastfeeding for six months. While it is the pregnant woman/mother who is taking the survey, some of the questions are focused on the infant. The survey should be conducted by the PCV and their counterpart or co-facilitator of the group following the instructions provided in the outcomes survey tool closely. The survey should include an indicator for each area of prevention of maternal and newborn health that was covered in the training. See the Maternal Health Outcomes Survey for a complete list.

Reporting

To be counted for this indicator the following criteria must be met:

- The women had a live birth in the past 12 months.
- During her pregnancy, the woman received training on the essential maternal care services and/or participated in a group that was facilitated by a PCV or their partner and was encouraged to attend antenatal care as a result of being in the group.
- The training was provided by the PCV or their partner in an individual or small group setting of 25 or less.
- Attendance at the educational sessions was documented by the Volunteer or their partner.