

FIGURE 2.8 **KEEPING THE BABY WARM**



CHART 2.10 **HOW THE FAMILY CAN KEEP THE NEWBORN WARM**

- Keep the room where the newborn stays warm and free from drafts day and night.
- Dress the baby in warm clothing (the newborn needs at least 1-2 more layers than an adult).
- Keep the baby's head covered with a hat or cloth.
- Use loose clothing and covers. Tight clothing and coverings do not keep the baby as warm.
- Put the newborn in bed with the mother for warmth and breastfeeding.
- Keep the newborn skin-to-skin with the mother. Use a warm cloth or blanket to cover them both together. Be sure not to cover the baby's face so he can breathe freely.

TEACH AND COUNSEL A MOTHER AND FAMILY ABOUT NEWBORN CARE

An important part of the help you give to the newborn, mother, and family is teaching and counseling about newborn care. You should explain:

- What care to give
- Why to give the care

Even if a woman has had a baby before, there may be new information that can help her. When speaking with her, include other family members such as the grandmother, mother-in-law, aunt, sister, and/or husband. This gives everyone a chance to hear the same things the mother hears. It also gives the mother and family time to ask questions. Below is information to talk about when you teach and counsel. The mother and family may have other baby care questions not included below. Take time to discuss all the family's concerns and questions.

Warmth

A newborn needs to be warm—especially for the first few weeks of life. Because newborns cannot adjust their temperature like adults, they get cool or warm much more quickly. The newborn's body is small and not able to stay warm on its own. If the newborn gets too cold, he can die.

Sleep

Newborns need sleep. If they are healthy, they sleep most of the time between feedings (up to 18 hours out of 24). They wake up every 2-3 hours to feed. During the night the baby may sleep up to 4 hours between feeds

Newborns wake up a lot at night. Because of this a mother needs to rest or sleep during the day when her baby is asleep. This pattern changes with time and the baby will begin to sleep more at night and stay awake more during the day.

A baby who is hard to wake up or who sleeps too much may be sick.

Loving Care

A newborn cannot survive without loving care. At birth, he is unable to meet any of his own basic needs. When a newborn is hungry, wet, cold, uncomfortable, in pain or sick, he can only cry or send out other cues.

Every newborn is different. He may be easily irritated or calm and sleepy. He may be fussy and hard to satisfy, or happy and easy going. He may have a loud piercing cry, or a soft, quiet one. A mother must get to know her baby's personality. His survival depends on her understanding and responding appropriately to the signals he sends.

When the baby cries and his needs are met, he learns that the world is a safe and loving place. He also learns confidence and trust: confidence that he can communicate his needs to others and trust that someone will care for him when he needs it. The newborn's crying should not be ignored.

Newborns should always be handled gently. Mothers learn to do what they see you doing. Handle the baby gently, talk to him in a quiet voice, and observe him carefully so that you can respond appropriately to his needs.

Protection from Infection

The system to fight infections is not mature in a newborn. This means that a newborn can get infections more easily than an older child or adult. As the baby grows, the infection fighting system becomes stronger. The mother and family need to protect the newborn from infection at birth and in the early months of life (see chart 2.11).

CHART 2.11 HOW THE FAMILY SHOULD PROTECT THE NEWBORN FROM INFECTION

- Wash hands with soap and water before and after touching the newborn.
- Keep fingernails short (germs can live under the fingernails).
- Do not put anything (dressing or herbal or medicinal products) on the umbilical cord.
- Keep the cord clean and dry.
- Wash anything in the home that will touch the baby: clothing, bedding, covers.
- Keep sick children and adults away from the baby.
- Protect the newborn from smoke in the air (from cigarettes or a cooking fire) because this can cause breathing problems.
- Put the newborn to sleep under an insecticide-treated bed net (if available) to protect him from malaria.
- Breastfeed the newborn exclusively. A mother's milk gives infection protection to her newborn.
- Make sure the baby gets all his immunizations on time.

CHART 2.12 KEEP THE NEWBORN WARM DURING A BATH

1. Bathe the newborn in a warm room with no drafts.
2. Have everything ready before the bath so the newborn is not left uncovered for long.
3. Make sure the bath water is warm. Test the bath water by touching it with your elbow.
4. Wash the face first and the hair last. Much heat is lost through the head so it should be bathed last.
5. Bathe the baby quickly.
6. Dry the baby quickly and completely with a warm towel. Be sure to dry the hair thoroughly.
7. Put the baby in skin-to-skin contact with the mother after the bath and cover them both. Remember to cover the baby's head again.

CHART 2.13 BATHING RECOMMENDATIONS

- Clean the baby's eyes by wiping each one with a clean cloth or with a clean corner of the same cloth. Start near the nose and wipe outward.
- Look for signs of infection while you wash the newborn.
 - **Skin infection:** spread the skin folds to look for pustules or rashes.
 - **Cord infection:** redness of skin, swelling, pus, or foul odor around the cord or umbilicus.
 - **Eye infection:** red, swollen eyelids and pus-like discharge from the eyes.
- Wash the baby's bottom from front to back.
- Never use soap on a newborn's face, only clean water.
- Do not clean inside the newborn's ear canals or nose, only the outside.
- Do not use baby powders. Powders can be dangerous to a newborn.
- Be sure to dry inside the skin folds.

Bathing the Newborn

As a health worker it is important for you to teach the mother and family how to wash the newborn. If you show them how to do this, not just tell them, they will remember more. You can also show them how to bathe the newborn with gentleness while checking each part of the baby's body.

Sponge bath: Wait to give the first sponge bath until a minimum of 6 hours after birth, preferably 24 hours. At 3 days of age the newborn's temperature is usually more stable. Give the baby only a sponge bath until the cord falls off and the umbilicus is healed. This helps the cord stay dry and come off more quickly. If the baby has been circumcised, give a sponge bath until the penis is healed.

- During a sponge bath, the newborn is sponged off with a warm, wet washcloth (do not sit the baby in a tub of water).
- First wash the upper body quickly with the washcloth, while the lower body is clothed. Dry the upper body quickly and cover or dress it immediately afterwards.
- Then take the clothes off the lower body, wash it quickly with the washcloth, dry it quickly, then cover or dress the baby again.

Full bath: After the cord falls off and the umbilicus and circumcision are healed, give a full bath every 2-3 days.

Wash the buttocks: The newborn's buttocks can be washed each time the baby urinates or has a bowel movement.

See chart 2.12 for information on keeping a newborn warm during a bath and chart 2.13 for tips to prevent infection while bathing the baby.

Cord Care

Cord care is an important way to prevent a newborn from getting tetanus or sepsis (generalized body infection). Teach and show the mother and family how to do cord care (see chart 2.14).

Putting certain substances on the cord or covering it with dressings can cause serious cord infections, such as tetanus and septicemia.¹³ These infections are major causes of neonatal death but are preventable. To prevent these infections:

- Give the mother tetanus toxoid during pregnancy.
- Cut the cord with a sterile instrument or new clean blade.
- Keep the cord clean and dry.
- Do not put anything on the cord.

In a study that reviewed cord care from 10 countries, it was found that keeping the cord clean was as effective and safe as using antibiotics or antiseptics.¹⁴

Immunizations

Immunizations are given to prevent illnesses that cause serious problems and even death.

The timing of immunizations is important. The baby should receive immunizations in the first few days after birth, at 6 weeks, 10 weeks, 14 weeks, and 9 months. There must be at least 4 weeks between immunizations (see Appendix A).

Breastfeeding

Review the information from chapter 3 with the mother and the family. The following parts of chapter 3 are especially important:

- Benefits of Breastfeeding
- Exclusive Breastfeeding
- Starting to Breastfeed
- Continuing to Breastfeed

CHART 2.14 CORD CARE

- Do not put anything on the cord (no medication or dressing).¹²
- Keep the cord clean and dry.
- Urine or stool should not touch the cord. If they do, wash the cord with soap and water and dry it with a clean cloth or air-dry it.
- The cord normally falls off 5-10 days after birth, leaving the umbilicus to heal.
- Give the baby only sponge baths until the cord falls off and the umbilicus is healed.
- Look at the cord and umbilicus for signs of infection every day until it is dry and healed. Signs of infection are: delay in separation, pus discharge, foul smell, and redness and swelling of the skin around the umbilicus (see chapter 6).
- Get medical help right away if you see any of these signs.

Never leave a baby alone on a bed or table from which he can fall. And never hold a newborn by his feet with the head down.

Vitamin A

Because newborns have very small amounts of vitamin A, breastfed infants depend on vitamin A in breast milk to meet their requirements for this vitamin during the first months of life. The amount of vitamin A in breast milk depends on the mother's vitamin A level. Vitamin A helps babies grow and develop well and helps keep mothers and babies from getting infections. When they do get infections, vitamin A also helps them recover quickly.

Food sources of vitamin A for the mother are: red, yellow, and orange fruits and vegetables (mangoes, papaya, carrots); some foods from animal sources (egg yolk, liver, cheese, and fish); and some fats and oils (fish liver oil, palm oil, butter).

Another source is vitamin A capsules. Give the mother a single dose (200,000 IU) vitamin A capsule as soon after birth as possible but not after eight weeks postpartum. By eight weeks postpartum (6 weeks for a non-breastfeeding mother), there is a chance the mother might become pregnant again. Taking a high dose of vitamin A (i.e., more than 10,000 IU per day) in the first trimester could harm her growing fetus.

For the baby, breast milk is the main source of vitamin A. To make sure the baby gets lots of vitamin A, encourage every mother to breastfeed exclusively.

Safety and Security

Never leave a baby alone on a bed or table from which he can fall. Never hold a newborn by his feet with the head down.

Breastfeeding mothers should not smoke, drink alcohol, or take drugs or medications unless prescribed by health care personnel. They should also practice safe sex (condom use, abstinence, or sex only with an HIV-negative partner who is monogamous).

Newborn Danger Signs

Danger signs are the signs of serious health problems which cause the death of many newborns. To prevent death, the mother and family need to recognize the newborn danger signs and respond appropriately. Newborns often die because there is a:

- Delay in recognizing danger signs
- Delay in deciding to get medical care
- Delay in reaching a health worker or facility

Teach the mother and family to recognize newborn danger signs (see chart 2.15) and to get help immediately if one is seen. As you explain each danger sign, ask the mother or family to give you an example of the sign. This way you know they understand. You will find more information about what to do in chapter 6.

Danger signs in a baby are often nonspecific: each danger sign can be a sign of almost any disease or illness. The most common signs of illness in a baby are: he stops feeding well and is cold to touch.

Plan for Follow-up Visits

Make a plan with the mother for newborn follow-up visits. How many visits and when they happen depend on the newborn's health and government policy. For a healthy newborn with no problems, do at least four visits. Because most newborn deaths occur within the first week, especially the first 24 hours, the first 7 days of life are a critical time for postnatal care. A suggested schedule for newborn health care visits is as follows:

- Visit 1 Within 24 hours
- Visit 2 2-3 days
- Visit 3 7 days
- Visit 4 28 days

Also remember to make a plan for the 6-week immunization visit and counsel or refer the mother for family planning care. This should be done as soon as possible, preferably during initial postnatal counseling. The child will have a better chance of survival if the mother spaces her children 3-5 years apart.

CHART 2.15 NEWBORN DANGER SIGNS

- Breathing problems (less than 30 or more than 60 or breaths in 1 minute, gasping)
- Feeding difficulties or not sucking
- Feels cold
- Fever
- Red, swollen eyelids, and pus discharge from eyes
- Redness of the skin, swelling, pus, or foul odor around the cord or umbilicus
- Convulsions/fits
- Jaundice/yellow skin