

Postnatal home visit: An effective strategy to a successful postnatal care

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Abstract

Home visiting is a crucial aspect of postnatal care services as recommended by the WHO, but it appears to be the most neglected service. This is due to various challenges like a shortage of manpower, inadequately skilled or trained health care workers, the non-availability of assessment tools and resources, and a lack of community awareness of the importance of postnatal care. However, it's the responsibility of health care workers, especially the midwives, to carry out postnatal home care visits to ensure the well-being of both the mother and the neonates, as well as the assessment of the environment where the newborn will be nurtured. Therefore, to ensure effective postnatal home care visits, there should be availability of adequate tools and resources for the services, training of health care personnel, allocation of experienced health care workers, and community awareness of the importance of postnatal home care visits. This review thus explained the concept of postnatal home care visits, the timing of visits, who should conduct postnatal home visits, what to look out for in mothers, babies, and environments.

Keywords: home visits, postnatal care, strategies, health care personnel

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Visite postnatale à domicile: une stratégie efficace pour une prise en charge postnatale réussie

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Résumé

Les visites à domicile sont un aspect crucial des services de soins postnatals recommandés par l'OMS, mais il semble que ce soit le service le plus négligé. Cela est dû à divers défis comme une pénurie de main-d'œuvre, des travailleurs de la santé insuffisamment qualifiés ou formés, la non-disponibilité d'outils et de ressources d'évaluation et un manque de sensibilisation de la communauté à l'importance des soins postnatals. Cependant, il est de la responsabilité des travailleurs de la santé, en particulier des sages-femmes, d'effectuer des visites de soins postnatals à domicile pour assurer le bien-être de la mère et des nouveau-nés, ainsi que l'évaluation de l'environnement où le nouveau-né sera nourri. Par conséquent, pour assurer des visites de soins postnatals à domicile efficaces, il devrait y avoir la disponibilité d'outils et de ressources adéquats pour les services, la formation du personnel de santé, l'affectation de travailleurs de la santé expérimentés et la sensibilisation de la communauté à l'importance des visites de soins postnatals à domicile. Cette revue a donc expliqué le concept des visites postnatales à domicile, le moment des visites, qui devrait effectuer les visites postnatales à domicile, ce qu'il faut surveiller chez les mères, les bébés et les environnements.

Mots-clés : Visites à domicile, soins postnatals, stratégies, personnels soignants

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INTRODUCTION

Post-natal care is the care given to women and their newborns after delivery within the first six weeks, which is also considered important as other natal care because complications could arise if both the baby and mother are not closely monitored (1). As part of the responsibilities of midwives, postnatal home visiting helps the healthcare professionals achieve the purpose of ensuring that mother and baby go through the normal changes of this phase without any danger or discomfort to the mother or the child (2, 3, 4). The World Health Organization (5) recommended that mothers and their newborns have at least four postnatal visits scheduled for the first day (first 24 hours), third day (48–72 hours), 7–14 days, and six weeks after birth. Some of those recommendations include a full assessment of the baby, health talk on breastfeeding, thermal care, care of the cord, and harmful signs (6).

However, despite these recommendations, in 2016, it was estimated that about 2.6 million babies die annually within the first 28 days after birth (7, 8). Evidence suggested that accessibility, knowledge of the health extension worker, and their availability are challenges faced in ensuring strategic home visits (9, 10, 11). Therefore, the purpose of this review is to provide effective strategic postnatal home visiting based on the WHO guidelines on postnatal care for both mothers and babies so as to prevent the incidence of neonatal death and postnatal complications.

Timing for home visits based on WHO guidelines

The first six (6) weeks postpartum are the most crucial and sensitive time for both mother and newborn, as they are prone to various health challenges (12, 13). Home visiting during this period, especially the first 2-3 days following delivery, is important because about 7,000 neonates die every day, with about one-third occurring within the first few weeks of life (14). Studies had shown that factors associated with neonatal mortality could be averted through postnatal inspections and examinations of both mothers and babies. More so, postnatal care (PNC) for the newborn and mother is as important as the birth experiences of the baby, and as such, it is an important opportunity to look out for danger signs such as jaundice, fever, lethargy, breastfeeding problems, and fast breathing, among others, during this period (5, 6). Mothers can also be counseled on how to identify

and deal with danger signs and the importance of exclusive breastfeeding in the first six months of life (15).

Who should conduct postnatal home visits?

Traditionally, postnatal care services should be done by skilled health personnel because they are trained to perform all the necessary care needed by both mother and baby. In many health care facilities, however, this is often not possible because of a shortage of skilled health workers, lack of passion, lack of transportation, or excessive workload that prevents them from making time for the visits. Otherwise, the postnatal care home visits can be conducted by trained health assistants, community health extension workers, and other trained community health workers who are part of the healthcare delivery system.

What are the things to look out for in mothers, babies, and the environment?

During postnatal home care visits, there are certain things the health personnel have to look out for to ensure the wellbeing of the new mother and baby.

For mothers

Postnatal home visits require regular evaluation and examination of vaginal bleeding, uterine tonus, fundal height measurement, and checking of heart rate during the first 24 hours after delivery (16). Blood pressure should also be measured immediately after birth and 6 hours after delivery. After the first 24 hours, inquiries should be made to know the general wellbeing of the mother in the following areas: bowel function, healing of stitches if any, headache, fatigue, breast pain, lochia, and uterine tenderness (5, 6, 16).

However, in areas prone to HIV, the mother should be tested to know her status, especially for those who missed it during the antenatal visit. Screening for postpartum depression should be carried out, and she should be encouraged to eat healthy foods and continue with iron supplements and/or folic acid up to 6–12 weeks after delivery (17). Additionally, the importance of rest should be emphasized, and mothers should be encouraged to do mild exercise that does not stress the body. Also, information on contraceptive use and services should be provided, as well as information on breastfeeding. In other words, mothers should be counseled and provided with support for exclusive breastfeeding at each home visit (5).

For newborn

Newborns should be assessed for danger signs such as fast breathing, jaundice, fever, no spontaneous movement, severe chest in-drawing, convulsions, abnormalities in the eye, etc. (18, 19). Screening for neonatal hyperbilirubinemia and checking of the umbilical cord should be done, and regular cleaning of the cord (21, 22). Assessment of the sleeping position of the baby (back to sleep) to prevent Sudden Infant Death Syndrome (SIDS) (23, 24) Furthermore, the use of routine drugs for newborns should be discouraged except on rare occasions of complications. Gentle body massage for the baby and exclusive breastfeeding for the first 6 months of life should be encouraged. Health care personnel on visit should provide adequate knowledge on the importance of immunization for the newborn (25, 26).

The environment

The environment should be assessed for cleanliness and whether it is appropriate for a newborn, because babies are easily prone to infection. The families and those around the new mother should be encouraged to ensure proper hygiene around the baby. The room where the baby would be staying should be properly arranged, with just enough ventilation for a newborn (5, 6, 27).

Expected role of health care personnel on postnatal home visit

The health personnel must be adequately prepared for what is needed for both the mother and the newborn (28). They should have sufficient knowledge of the care needed to be given to a new mother. It is the role of health care personnel to explain the immunization schedule to the mothers and encourage them not to miss any appointments. They should encourage the mother to get to the hospital if she notices anything unusual in her body or her baby and help the woman with different breastfeeding styles to ensure proper latching of the baby as well as a comfortable position for mother and baby. Health care personnel should also discuss the best time to resume sex with her husband. Most mothers may not feel comfortable discussing this in the hospital, but a home visit will afford them the opportunity to open up and ask for help. The health personnel should guide her on the best contraceptives to use in preventing unwanted pregnancy (29, 30).

Moreso, it is the responsibility of health

care personnel to counsel the new mother on nutrition and advise her on what to eat. Foods such as vegetables, meat, beans, a lot of water, and fruits should be encouraged. Also, they are to inform the mothers about the best foods to eat to enhance lactation and breastfeeding (28, 29). Additionally, healthcare providers are required to check for danger signs in both mother and baby, check for postpartum depression in the mother, and ensure she is adequately cared for by her family or people around her. Finally, they are to encourage new mothers to enjoy the newborn period, which can be stressful, but once they do things they enjoy, it can be easy for them. Emphasis must be laid on the importance of rest and sleep when the baby is sleeping (5, 6, 17, 29).

Challenges of a postnatal home visit

Postnatal care visits appear to be one of the components of maternal and child care services that is poorly utilized despite being a critical period for the survival of both mother and baby (10). Research has shown that rates of provision, uptake, and quality of skilled postnatal care are generally lower than those of other maternal healthcare services (10, 11). More emphasis and resources tend to go to antenatal and intrapartum care (10, 11). This may be due to poor infrastructure, a shortage of skilled healthcare workers, poor access to services, and poor knowledge, among others. It was also reported that postnatal care visits had the lowest median national coverage of relevant interventions among the various maternal and child health services (5, 6).

Solution to the challenges of postnatal home visits

Training the healthcare personnel: Regular training of healthcare personnel is very important in ensuring the effective practice of postnatal home visits. (10) Evidence has shown that most healthcare personnel do not know the importance of home visits during the postnatal period, and it would be helpful if the government could make enough resources and equipment available for these services (10). The provision of enough healthcare personnel would also go a long way in ensuring the effective and smooth running of postnatal care home visits, adequate coverage of postnatal homecare visits, and improved postnatal outcomes (29, 33, 35).

Availability of adequate postnatal care tools and resources at all levels of health facilities Evidence suggests that 10–15% of postnatal mothers experience mental derailment and

depressive symptoms, which are not discovered early due to inadequate physical examination by healthcare workers. However, if the right tools are available in healthcare facilities and accessible to health care workers to screen expectant and postpartum mothers, it will be easier to identify those that are prone to mental illness after delivery and also institute appropriate treatment on time (16).

Allocation of experienced healthcare workers or midwives for postnatal home care visits: Most healthcare facilities only allocate one healthcare worker to care for mothers and neonates in postnatal wards. As a result, care is compromised, and there is no allocation for home visits after they are discharged from the health facility (5, 6). More so, the healthcare workers are overworked and exhausted at the end of the day. However, WHO recommends that standards of care for mothers and newborns should be provided in health facilities according to WHO guidelines, which should also extend to home visits shortly after discharge (5, 16).

Awareness in the community of the importance of postnatal home visits

The health care personnel have a significant role to play in ensuring that the community members are aware of the importance of postnatal care home visits (30). This is very important, as most people in the community do not even know that they are entitled to postnatal care and visits after delivery. Collaborating with community members may help individuals, families, and the community to embrace these activities as a form of health promotion and illness prevention after delivery (19, 30).

CONCLUSION

Home visit is an important aspect of postnatal care, and the WHO recommends that home visit for postnatal mothers and their babies be conducted in the first week after birth and continued until 6 weeks postpartum. These visits are crucial for assessing general wellbeing as well as identifying postnatal challenges and dealing with them early. However, to increase and encourage postnatal home care visits, it is important to increase community awareness of the importance of PNC and improve health facility roles in conducting postnatal home visits. It is therefore recommended that efforts be made to ensure that mothers and health care professionals are well trained on the benefits and importance of postnatal home visits, as documented by the WHO.

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