Online Supplementary Document

Table S1. Health Surveillance Assistant (HSA) Tasks for Community Based Maternal Newborn Care (CBMNC) in Malawi

- Identify pregnant women in the community so that HSA can make home visits during pregnancy and in the first days after birth for the greatest impact
- 2. Make two home visits to all pregnant women in the community:

First pregnancy visit — as early in pregnancy as possible —

- To encourage the pregnant woman to go for early antenatal care
- To encourage her to learn her HIV status so that she can take action to best protect her health and protect her baby from HIV
- To promote birth in a health facility
- To help prepare for birth
- To teach home care for the pregnant woman.

Second pregnancy visit — about 2 months before delivery —

- To review antenatal care visits, plans for birth, and home care for the pregnant woman.
- To encourage the family to follow optimal newborn care practices mmediately after birth.
- If the woman has HIV, to check that she is taking ARVs every day and will continue through delivery and breastfeeding.
- 3. Make 3 home visits after birth for all mothers and babies, regardless of place of birth.

First postnatal visit — on Day 1 after birth —

- To assess the mother and baby for signs of illness, weigh the baby, and help the mother with early and exclusive breastfeeding and keeping the baby warm.
- If the mother has HIV, to check that the mother is taking her ARVs and giving the baby the ARV syrup at the same time every day.

Second postnatal visit — on Day 3 after birth —

 To assess for signs of illness, help the mother to sustain breastfeeding and prevent breastfeeding problems, and advise on optimal care for the mother and her baby.

• If the mother has HIV, to check that the mother is taking her ARVs and giving the baby ARV syrup at the same time every day. (NOTE: If the first postnatal visit is delayed until day 2 for some reason, this visit should still be made on day 3.)

Postnatal visit 3 — on Day 8 after birth —

- To assess for signs of illness, and advise on optimal care beyond the first week of life.
- If the mother has HIV, to encourage her to continue taking her ARVs and giving the baby the ARV syrup at the same time every day; and to bring the baby to the health facility when the baby is 4–6 weeks old, so that the baby can be tested for HIV and started on cotrimoxazole.

 (NOTE: If the second postnatal visit is delayed for some reason, this visit should still be made on day 8.)
- 4. Make two extra home visits after birth for small babies (birth weight less than 2.5 kg) on day 2 and day 14 so that the HSA can provide the extra care that small babies need
- 5. Make a follow-up visit for a baby who is referred to a health facility for illness

Source: Malawi MOH. Caring for the Newborn at Home: Participant Manual. Lilongwe, 2014