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 **BASICS**

BASICS HEALTHY TIMING AND SPACING OF PREGNANCY TOOLKIT

CORE INDICATOR PROFILES



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Support for this publication was provided by the USAID Bureau for Global Health

BASICS (Basic Support for Institutionalizing Child Survival) is a global project to assist developing countries in reducing infant and child mortality through the implementation of proven health interventions. BASICS is funded by the U.S. Agency for International Development (contract no. GHA-I-00-04-00002-00) and implemented by the Partnership for Child Health Care, Inc., comprised of the Academy for Educational Development, John Snow, Inc., and Management Sciences for Health. Subcontractors include the Manoff Group, Inc., the Program for Appropriate Technology in Health, and Save the Children Federation, Inc.

HEALTHY TIMING AND SPACING OF PREGNANCY- BASICS CORE INDICATOR PROFILES

Expected Outcome	Indicator	Definition	Method of Data Collection	Data Source	Frequency & Timing of Data Collection	Comments, Challenges, etc.
<p>1.1. At least 3 countries have integrated birth spacing (HTSP) into their newborn and child health policies, guidelines, and training curriculum within child survival programs</p>	<p>Number of countries with policy or guidelines that have integrated HTSP into newborn and child health programs</p>	<p>Country shows integration of HTSP into child health programs through:</p> <ol style="list-style-type: none"> 1. the presence of child health policy or guidelines that include HTSP guidelines; 2. at least all newly revised training curriculum for HCWs or pre/ in-service nursing curriculum integrated HTSP in newborn and maternal and child health programs 	<p>Review of HTSP or child health policy/directive/guidelines; Survey district health directors to determine if they have/are aware of HTSP guidelines; Training report</p>	<p>HTSP or child health policy document/directive; National HTSP guidelines; District health directors; MOH or other organization's training report</p> <p>Program reports</p>	<p>Annually, before annual report compiled</p>	<p>It is expected that each target country has already newborn and child health policy and/or guidelines</p> <p>Bear in mind how difficult it is in many developing countries to make policy changes</p>
<p>1.2. In at least 3 countries have HTSP integrated into newborn and child health services at facility level</p>	<p>Number of countries in which facilities offering child health services are implementing HTSP policies/guidelines</p>	<p>Newborn and child health facilities offering integrated HTSP counseling , IEC or BCC activities</p>	<p>Records review</p>	<p>Health records; Health registers; Program records; Country reports</p>	<p>Annually before annual report compiled</p>	<p>The initial or refresher training can be used to providers the child survival personal with the needed knowledge et and skills</p>

Expected Outcome	Indicator	Definition	Method of Data Collection	Data Source	Frequency & Timing of Data Collection	Comments, Challenges, etc.
1.4. At least 3 countries show an increase in the number of new contraceptive users among the newborn and child health (NCH) women clients attributable to demand generate thought the HSTP educational messages	Number of new contraceptive users	Number of women 15-45 years old who are first-time contraceptive users among women NCH clients	Record review	Health records; Health registers	Annually	Ensure through the supervision that the related information is systematically collected for each child bearing new FP client
1.5. In at least 3 countries there is an increase in the proportions of women using without interruption her contraceptive of choice at 24 months.	Proportions of child bearing women who used a birth spacing method for at least 24	Number of women FP services users who stayed in the program at least for 24 months	Records review	Health records; Health registers; FP files and cards	Annually	The quality of records determine here too the validity of this indicator
1.6. In at least 3 countries at least 30% of lower level providers (CHWs) within NCH facilities have adequate capacity and skills to promote HTSP	Proportion of lower level providers (CHWs) well trained in promotion of HTSP within their community	Lower level providers who are able to properly can advocate, do counseling IEC/BCC and provide basic FP services.	Records review	Health records at facilities	Annually	The supervision activities should help update or reinforce the LL providers competence