Low birth weight children require proper care and monitoring by a trained health worker to survive, so make sure your newborn is weighed at the local health centre after birth. Low birth weight children require the following treatments:

- Always keep the newborn warm with continuous skin-to-skin contact, day and night.
- Avoid bathing the newborn until at least two days after birth.
- Ensure you breastfeed your baby exclusively and more frequently. If you have difficulty breastfeeding, you can express milk and give it to the baby using a spoon or cup.

There are many risks to low birth weight babies in the first days and weeks, but health professionals can teach parents appropriate postnatal care (so-called ‘kangaroo care’) to reduce these risks. With professional monitoring, serious problems can be quickly detected and treated. In an emergency, the baby may be transferred into a special care unit until it is developed enough or healthy enough to return home.

So that the infant spends less energy and does not use valuable calories, it must be kept warm continuously, day and night, by skin-to-skin contact. In order to gain weight, the infant should be breastfed exclusively and more frequently than normal. Sometimes, low birth weight babies have difficulty sucking. In this case, the mother should express her milk and feed the baby with a spoon or cup.

7.1% of births in DRC are <2,500g (DHS 2014).

Ideas

The biggest challenge in the care of low birth weight newborns is identifying them at birth. Not all newborns are weighed at birth. The mother cannot know herself what constitutes ‘low birth weight’; this is the job of a trained health worker.

If the baby is delivered at the local health centre, the health worker will be able to identify LBW children but there are cases when they forget to weigh newborns. If the baby is delivered at home, they cannot know if the child is LBW. It is therefore necessary to bring the newborn to the local health centre after birth to check their state of health and their weight. The family must watch over the baby’s state of health and see that first aid is given and that the baby is weighed.

Few DRC health workers have been trained in recommended “kangaroo mother care” of low birth weight babies.

Skin-to-skin contact can be provided by fathers as well as mothers, freeing mothers up for periods of time to help with the care of other children, or to rest.

76% of births in DRC have their weight recorded (DHS 2014). The proportion of babies born in a health facility or in the presence of a skilled attendant is high in DRC (80%).