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Effect of kangaroo mother care initiated in community settings on financial risk protection of low-income households: a randomized controlled trial

Summary

Kangaroo Mother Care provides positive health outcomes and financial risk protection.

Interventions which can reduce avoidable mortality exist, however, coverage and quality for such interventions remain modest in many low-and-middle-income countries (LMICs). Families have high healthcare out-of-pocket expenditures (OOPE), and some face impoverishment.

We aimed to assess the effect of Kangaroo Mother Care, an intervention known to reduce neonatal and early infant mortality among low birthweight infants, on financial risk protection using a large randomized controlled trial conducted between 2017 and 2018 in Haryana, India.

We used generalized linear models of the Gaussian family with an identity link to estimate the mean difference in healthcare OOPE, and Cox regression to estimate the hazard ratios for CHE and impoverishment, between the trial arms.

Adding financial outcomes

Overall, in the eight-week observation period, the mean healthcare OOPE per infant was lower (20.0 US\$) in the Kangaroo Mother Care initiated in community setting (ciKMC) arm compared with the control arm (25.6 US\$). Among infants who sought care it was 8.5 US\$ lower in the ciKMC arm compared to the control arm.

The risk of impoverishment due to healthcare seeking was 44% lower in ciKMC arm. Risk of catastrophic healthcare expenditure at different cut-offs was 9% to 21% lower in the ciKMC arm.

BERGEN CENTRE FOR ETHICS AND PRIORITY SETTING IN HEALTH

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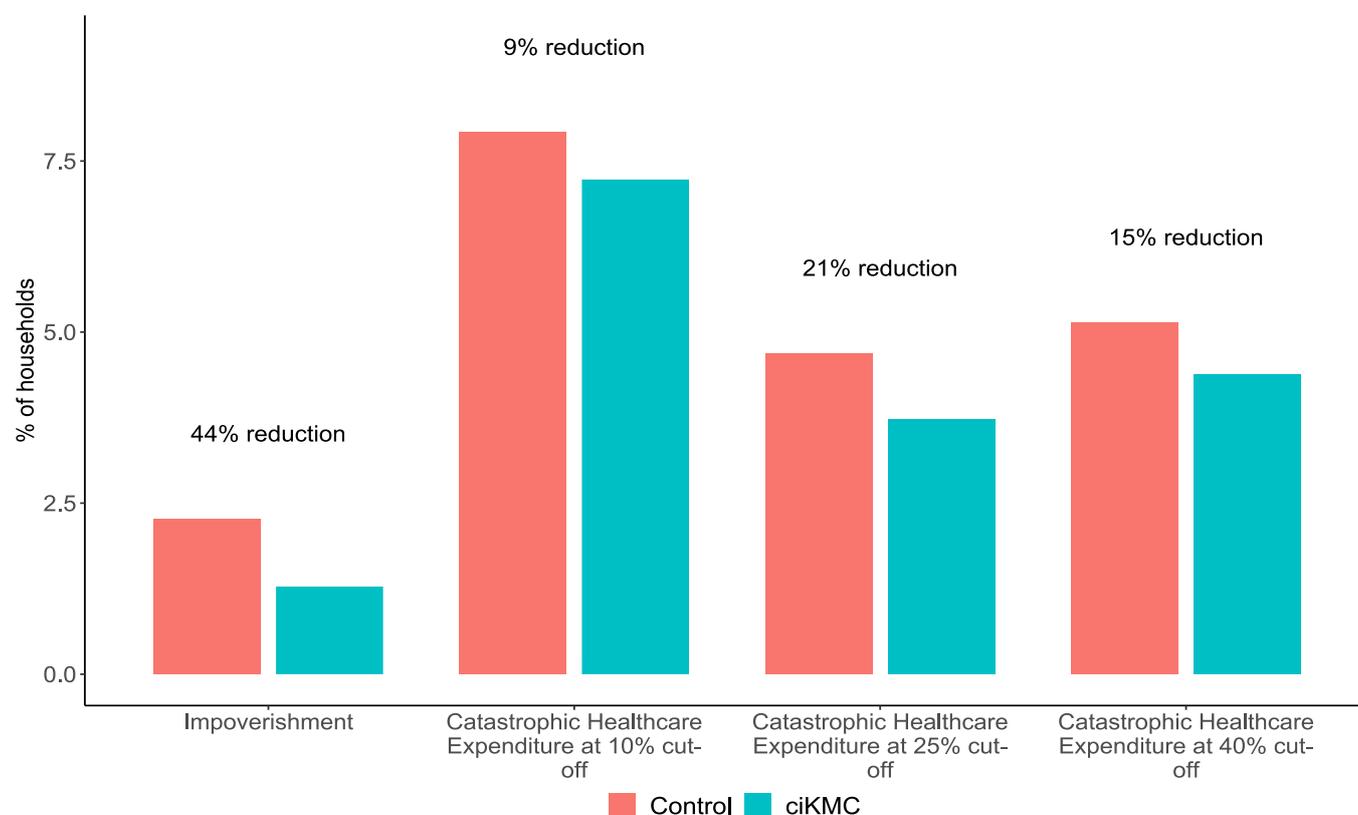
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Key findings



Analysis adjusted for clustering within households. ciKMC, Kangaroo Mother Care initiated in community setting

Catastrophic HCE at various cut-offs and poverty impact of ciKMC in the first 180 days of life in both arms

The ciKMC can substantially reduce the cost of care seeking and the risk of impoverishment for households. Our findings show that supporting mothers to provide KMC

to low birthweight infants at home, in addition to reducing early infant mortality, may provide financial risk protection.

Policy implications / recommendations

- We show that ciKMC can substantially reduce the cost of care seeking and the risk of impoverishment for households.
- Our findings support the inclusion and scale-up of kangaroo mother care in communities with high burden of low birth weight.
- Inclusion of non-health outcomes in randomised trials should be considered, as this evidence is important for priority setting and benefit package design.

Collaborating partners

