

## ACTIVE MANAGEMENT OF THE THIRD STAGE OF LABOUR (AMTSL)

Outcome indicator

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### Indicator Phrasing

**English:** % of mothers of children aged 0-12 months who were administered a uterotonic drug immediately after the birth of their youngest child

**French:** % de mères d'enfants âgés de 0 à 12 mois qui ont reçu un médicament utérotonique immédiatement après la naissance de leur plus jeune enfant

**Portuguese:** % de mães de crianças com idades entre 0 a 12 meses que receberam uma droga uterotónica imediatamente após o nascimento do/a seu/sua filho/a mais novo/a

**Czech:** % matek dětí ve věku 0-12 měsíců, kterým byly bezprostředně po narození jejich nejmladšího dítěte podány uterotonické léky

### What is its purpose?

The indicator assesses the proportion of women who immediately after their last delivery received a uterotonic drug for the prevention of postpartum haemorrhage – the most common cause of death for women during pregnancy.

### How to Collect and Analyse the Required Data

Collect the following data by conducting individual interviews with a [representative sample](#) of mothers of children aged 0-11.99 months:

#### **RECOMMENDED SURVEY QUESTIONS (Q) AND POSSIBLE ANSWERS (A)**

**Q1:** *Immediately after you gave birth to your youngest child, before the placenta was delivered, did you receive an injection to prevent you from bleeding too much?*

**A1:** yes / no / does not remember

**Calculate the indicator's value** by dividing the number of respondents who were given an injection by the total number of interviewed respondents (exclude those who did not remember) and multiplying the result by 100.

## Disaggregate by

1) Active management of the third stage of labour (AMTSL) intervention is composed of a package of three components: 1) administration of a uterotonic, preferably oxytocin, immediately after the birth of the baby; 2) controlled cord traction to deliver the placenta; and 3) massage of the uterine fundus after the placenta is delivered. In 2012, WHO issued new recommendations (see below) specifying that the **administration of a uterotonic is the single most important intervention** while the remaining two are optional and should be used only under certain conditions. That is why the indicator focuses on uterotonic drug administration only.

2) Since mothers might not remember exactly the information your survey is asking about, consider **conducting as many interviews as possible in pairs consisting of the mother and a birth attendant/ relative who attended the delivery**. While using such an approach will take you more time, it will very likely result in more accurate data. If none of the listed options are likely to provide accurate data, **change the indicator** to “% of [specify: health facilities / birth attendants] *regularly administering uterotonic drugs immediately after the birth*” and collecting the required data from the target health facilities’ staff/ birth attendants.

3) **The most common recommendation is interviewing mothers of children aged 0-23 months**. However, this assumes that the mothers will remember for up to two years the information your survey is asking about. Since this is not very likely, IndiKit recommends using for this indicator a **shorter recall period** by interviewing mothers of children aged 0-12 months. Use it only if the data is supposed to be used purely for the purpose of your intervention (i.e. making programming decisions, measuring its results, etc.) and does not need to be comparable with the statistics of other stakeholders which use longer recall period.

## Important Comments

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