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Abstract of Thesis

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| Name (Baequni) | |
| Title | <p>THE IMPACT OF MATERNAL AND CHILD HEALTH HANDBOOK DURING PREGNANCY, DELIVERY AND CHILD HEALTH</p> <p>(母子健康手帳が妊娠、出産、小児の保健医療に与える影響)</p> |
| <p>Abstract of Thesis</p> <p>Maternal and Child Health Handbook (MCHHB) consists of health records of pregnancy, delivery, and child development, including immunization records and child growth charts. MCHHB has been utilized in Japan since 1947 and it is now introduced in more than 30 countries around the world to ensure the continuum of care for mothers, newborns and children.</p> <p>Through Ministerial Decree in 2004, the Ministry of Health Indonesia tried to nationalize the use of MCHHB all over the country to replace Antenatal Card (AC) as the only Home-Based Records (HBR). The Minister of Health Indonesia stated that every child should be provided with an MCHHB and every health care worker should educate parents through the MCHHB. The effectiveness of MCHHB needed to be evaluated to identify the impact on pregnancy, delivery and child health care. It was also needed to monitor the utilization of MCHHB among mothers and midwives at the district level to know how to use MCHHB effectively.</p> <p>The objective of this research was to analyze the impact of MCHHB to maternal and child health services during pregnancy, delivery and child health care.</p> <p>There were three studies that were held to reveal the specific objectives for the utilization of MCHHB from the perspectives of global, national and community viewpoints.</p> <p>a) The study of "Is Maternal and Child Health Handbook effective?: Meta-Analysis of the Effects of MCH Handbook" was aimed to collect the documents and reports in the past MCHHB study and to analyses the effect of MCHHB on maternal and child health through a systematic review. The Meta-analysis study was accomplished to make a systematic review to all of the previous researches. Among 57 documents for MCHHB, published between 1980 and October 2011, only 4 documents with 43 question items in Indonesia (1999 and 2001), Bangladesh (2003), the Philippines (2009) and Cambodia (2010) were analyzed by using odds ratios. The Meta-analysis study showed that the relationship between MCHHB and pregnancy care. Mothers who used MCHHB during pregnancy had a higher level of knowledge (OR 1.44, 95% CI: 1.22-1.70) than those who did not use MCHHB during pregnancy. The strong significant effects of MCHHB were observed in the knowledge of antenatal care visit (OR 1.86, 95% CI: 1.59-2.18), and mother should consume more food during pregnancy (OR 1.97, 95% CI: 1.37-2.83). Mothers who got MCHHB during pregnancy had safer practice by skilled birth attendants (OR 1.12, 95% CI: 0.95-1.32) and delivered in health facilities (OR 1.31, 95% CI: 1.12-1.53). MCHHB showed the effect of knowledge of child health care (OR 1.22, 95% CI: 1.05-1.41). This study utilizing meta-analyses showed MCHHB had higher association with knowledge of mothers than practice in pregnancy and child health care.</p> | |

b) The study of "The Effect of Home-Based Records (HBRs) to Maternal and Child Health Services in Indonesia" was aimed to analyze the effects of home-based records on pregnancy, delivery, and child health care in Indonesia. The HBR study utilized Indonesia Demographic Health Survey (IDHS) in 2002-2003, 2007 and 2012 to reveal the effect of home-based records in Indonesia including MCHHB and antenatal cards (AC) for children and pregnant mothers. The HBR study revealed that, compared with the control group, the mothers, who had the HBRs, had more knowledge and better practices during pregnancy, delivery, and child health care. The mother who had MCHHB or AC knew how to solve the problems of complications during pregnancy and used skilled birth attendants for delivery. This study also found that husbands were involved in discussing with mothers the delivery location, finding transportation, and identifying a blood donor.

c) The study of MCHHB at Tangerang Regency of Banten Province in Indonesia was aimed to found the factors which were related to the utilization of MCHHB by the midwives and described the utilization of MCHHB among the mothers of under-five children. The study at Tangerang Regency was a cross-sectional survey on MCHHB. The study was done to identify the impact of MCHHB to health providers and users at Tangerang Regency of Banten Province. The study was used by both quantitative and qualitative methods, and its respondents were 207 midwives and 259 mothers at the village level. This study revealed that the mothers read about 30 % of the contents of MCHHB on average and 36.2 % of the results of health examinations were filled in MCHHB by midwives. The low fulfillment of MCHHB by midwives might be related to motivation factors.

MCHHB may play a significant role as a monitoring tool for antenatal care, delivery, nutrition and immunization, when health workers will explain mothers how to use and how to read MCHHB. The challenging issues which three studies demonstrated were how to utilize MCHHB more effectively from the perspective of health workers and mothers, while there were many positive findings. MCHHB promoted male involvement in decision of delivery and emergency case. MCHHB ensured to promote appropriate nutritional education for pregnant mothers and infants. MCHHB was utilized as an immunization record book and an educational tool for motivating mothers and health workers to immunize children in appropriate time. The Sustainable Development Goals (SDGs) on September 2015 stated that Maternal Mortality Ratio (MMR), Neonatal Mortality Rates (NMR) and Under-five Mortality Rates (U5MR) were still important targets of SDGs. In the Era of SDGs, MCHHB will have a continuous role to promote the continuum of care during pregnancy, delivery and child health and to reduce MMR, NMR and U5MR in many developing countries.

MCHHB is not a direct device to reduce maternal and child deaths. However, this dissertation demonstrated that MCHHB can strengthen the communication between health providers and mothers with children. Medical doctors, nurses, midwives and cadres (village health volunteers) make important contributions in helping mothers with MCHHB. MCHHB is not an educational material for pregnancy, delivery and child health, but also a communication tool to enhance relationship among mothers, husbands, communities and health care providers.

Keywords: Maternal and Child Health Handbook, Home-Based Records, Sustainable Development Goals, Indonesia Demographic and Health Survey, Meta-Analysis

論文審査の結果の要旨及び担当者

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論文審査の結果の要旨

乳幼児死亡率と妊産婦死亡率の減少は、最も重要なグローバルな保健医療課題の一つである。母子健康手帳では、妊娠中の健診、出産時の医療、新生児ケア、小児の成長や予防接種の記録などを冊子に記録し、その結果を保護者が家庭で保管できる。世界に先駆けて、第二次世界大戦直後の1948年に日本で開発された。その後、日本国内ではほぼ100%に近い普及率を達成した。1980年以降、タイやインドネシアなどをはじめとするアジア諸国で、各国の文化や社会背景に即した母子健康手帳が開発され、2015年現在では、世界30か国以上に広がっている。

本論文では、母子健康手帳が妊娠、出産、小児保健に与えたインパクトを、グローバル社会、国全体、地域社会という三つの異なるアプローチ研究から明らかにしようとする試みである。すでに実施された母子健康手帳に関する学術論文や報告書を収集しMeta-Analysisを行い、インドネシアの人口健康調査データによりインドネシア国内の母子健康手帳や周産期カードといった家庭で所持する記録媒体（HBR）の現状を分析し、最後にインドネシア・バンテン州におけるフィールド調査により母親と助産師の母子健康手帳の利用状況を分析した。

Meta-Analysisでは、「母子健康手帳は本当に効果があるのか？」という疑問から出発し、フィリピン、カンボジア、バングラデシュ、インドネシアの4か国の調査研究をメタ分析することにより、母子健康手帳が母親の知識の向上と周産期の適切な行動に関連していることを明らかにした。人口健康調査では、インドネシア国内全体において、HBRが知識向上と行動変容を生じていた。インドネシアのバンテン州タンゲラン郡では、実際に母子健康手帳を使用する母親（259名）と助産師（207名）を対象に利活用調査を行い、書き込み率や読み込み状況を明らかにし、助産師に対する研修の不足や活用に関する指導の乏しさを明らかにした。

母親が妊娠中に母子健康手帳を持つことにより、妊娠、出産、子どもの健康に関する知識の向上とともに、安全な出産を追求するための行動変容につながっていた。その結果として、妊娠出産による自分の身体の変化を理解し、母親自身のエンパワメントにつながっていた。また、母子健康手帳が家庭に持ち込まれることにより、男性の出産に関する関与が高まる効果も明らかとなった。まだまだ、利活用の点では改善の余地はあるものの、母子健康手帳が母親だけでなく、男性や保健医療従事者に与えたインパクトを明らかにした意義は大きい。

本論文は、母子健康手帳という実践的な保健医療サービスのインパクトを科学的根拠の視点から分析したものであり、グローバルヘルス、母子保健学においてオリジナリティの高い知見を有している。また、国際協力分野において注目を集めている母子健康手帳の効果と限界を科学的客観的に提供することはアカデミズムの立場からの貢献と考えることもできよう。

以上のことから、本論文は、博士（人間科学）の学位授与にふさわしいものと判定する。