

Assistance in the use of maternal and child health (MCH) book on the behavior of pregnant women in health services

Nova Sumaini Prihatin¹, Elizar², Rosyta³, Jasmianti⁴, Nurmila⁵, Hendrika Wijaya Katrini Putri⁶,
Irnawati⁷

^{1,2,3,4,5,6,7}Prodi Kebidanan Aceh Utara, Poltekkes Kemenkes Aceh, Indonesia

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ABSTRACT

The Maternal and Child Health (MCH) Book includes health records of both mother and child from pregnancy through the child's fifth year, and functions as a communication tool among healthcare providers, pregnant women, and their families. Strengthening the use of the MCH Book among mothers aims to enhance their understanding of its function in health monitoring and as a source of health information. This study aims to examine the effectiveness of facilitated use of the Maternal and Child Health (MCH) Book on pregnant women's health service-seeking behavior during pregnancy within the working area of Banda Sakti Health Center. This study utilized a pre-experimental design with a one-group pre-test and post-test model. The research was conducted within the working area of the Banda Sakti Public Health Center. A total of 52 pregnant women were selected as participants. Data were collected using a structured questionnaire, and statistical analysis was performed using the Wilcoxon signed-rank test. The findings indicated that guided use of the Maternal and Child Health (MCH) Book significantly improved pregnant women's knowledge and health-seeking behaviors during pregnancy.

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Corresponding Author:

Nova Sumaini Prihatin,
Prodi Kebidanan Aceh Utara,
Poltekkes Kemenkes Aceh,
Jl. Medan-Banda Aceh Km 6 Bukit Rata, Lhokseumawe, 24301, indonesia
Email: novasumainiprihatin@gmail.com

INTRODUCTION

The Maternal and Child Health (MCH) program is one of the priority initiatives of the Ministry of Health, and its success serves as a key indicator in the National Long-Term Development Plan (RPJPN) 2005–2025. The high maternal mortality rate (MMR) in Indonesia has prompted the government to prioritize efforts to reduce MMR as part of the national health development agenda (Azizah et al., 2021; Kementerian Kesehatan RI, 2016).

According to the Basic Health Research (RISKESDAS) data, 31.7% of pregnant women own an MCH Book, 82% had antenatal check-ups 3 to 5 times during pregnancy, 58% consumed iron tablets, 58% received at least one tetanus toxoid (TT) immunization, 60% underwent hemoglobin laboratory tests, and 63% had urine laboratory tests. These behaviors reflect essential maternal

health practices that are critical for early risk detection and the prevention of pregnancy-related complications (RISKESDAS, 2018).

The Maternal and Child Health (MCH) Book is a health record owned by both parents and healthcare providers, used to monitor maternal health during pregnancy and to assess the growth and development of the child (Rahmi et al., 2018). The MCH Book also serves as an educational tool that provides individualized health information to parents, making it a cost-effective method of health education. The information contained within the MCH Book enables its use as a foundation for improving future maternal and child healthcare services (Fajrin & Nikmah, 2022; Suryanti et al., 2023).

Optimal utilization of the Maternal and Child Health (MCH) Book at the family level can be achieved only when healthcare providers and community health volunteers (cadres) effectively communicate its purpose and ensure that mothers and families understand its contents (Agustini & Danefi, 2021; Astari & Kirani, 2020). Efforts to increase the use of the MCH Book can be implemented through various strategies, one of which is by strengthening the role of cadres. As facilitators, cadres support mothers and families in utilizing the MCH Book and serve as essential links between the community and healthcare services. This connection enables health programs to be more effectively conveyed and implemented within the community (Risatamaya et al., 2023; Takeuchi et al., 2016).

Pregnant women's understanding of the MCH Book should extend beyond viewing it merely as a record of antenatal visits. It should also be recognized as a medium for monitoring and communication between healthcare providers and pregnant women. This understanding can serve as a strong motivation for pregnant women to utilize the MCH Book to its fullest potential (Kemenkes RI, 2020; Wardiyati & Rifiqoch, 2023).

The MCH Book also contains essential information needed by mothers and families, which must be delivered by healthcare providers through communication, information, and education (CIE) efforts. These efforts aim to improve the knowledge and health behaviors of pregnant women and their families, enabling them to maintain, monitor, and enhance maternal and fetal health. Moreover, this empowers mothers and families to recognize early warning signs and danger symptoms during pregnancy, allowing for timely interventions. Such measures can help reduce the incidence of high-risk pregnancies and maternal mortality. Several studies have emphasized that effective and efficient communication, information, education (CIE), and documentation tools are crucial to supporting maternal and child healthcare services (Arinta, 2021; Wardiyati & Rifiqoch, 2023).

The study conducted by Yulastini showed that the majority of respondents had a low level of knowledge, with 18 respondents (40%) falling into this category. However, most of the respondents demonstrated a positive attitude, with 26 respondents (57.8%). The study concluded that the majority of pregnant women were within the productive age range, had a senior high school educational background, and were mostly unemployed or housewives. Furthermore, although their knowledge was limited, most pregnant women showed a positive attitude and behavior toward the utilization of the MCH Book (Yulastini et al., 2022).

Based on data obtained from Banda Sakti Public Health Center in 2023, there were 1,333 visits by pregnant women. The number of deliveries was 1,116, the number of postpartum mothers was 1,116, and the number of neonates was 1,116. According to a preliminary study conducted at Banda Sakti Public Health Center, out of 10 pregnant women, 5 stated that they brought the MCH (Maternal and Child Health) handbook during antenatal check-ups and child immunizations. Three mothers said the book is specifically for pregnant women, and two others said the MCH handbook is a book for both pregnant women and children, containing information on maternal and child health.

Based on this background, the researcher is interested in examining the effectiveness of assistance in the use of the MCH Book on the health-seeking behavior of pregnant women during pregnancy in the working area of the Banda Sakti Health Center.

RESEARCH METHOD

This study employed a pre-experimental design. The specific research design used was a one-group pre-test and post-test design, without the inclusion of a comparison (control) group. In this design, an initial measurement (pre-test) is conducted to allow the researcher to assess any changes that occur following the intervention (program). In this study, the researcher intentionally and systematically administered a treatment—namely, the implementation of guided assistance in the use of the MCH Book—to the research subjects. The impact of this intervention was then evaluated through a second measurement (post-test) (Mertha Jaya, 2020).

This research was conducted in the working area of the Banda Sakti Public Health Center. The location was selected based on a preliminary study and interviews with several pregnant women, which revealed that the use of the Maternal and Child Health (MCH) Book with guided assistance was still suboptimal. The study was scheduled to be carried out from June to October 2024. A total of 52 participants were included in the study, in accordance with the established inclusion criteria.

The research instrument used in this study was a structured questionnaire, developed based on relevant theories. It consisted of a series of statements that respondents were required to answer, including 10 questions related to the implementation of MCH Book assistance and 22 questions assessing the behavior of pregnant women. The questionnaire was tested for validity and reliability prior to use. The data in this study comprised both primary and secondary data, collected through the questionnaire and subsequently analyzed using the Wilcoxon signed-rank test.

RESULTS AND DISCUSSIONS

Research Results

Univariate Analysis

Table 1. Frequency distribution of respondents' characteristics based on age, education, occupation, gestational age, and gravida among pregnant women

Characteristics		f	%
Age	< 20 years	5	9.6
	20-35 years	42	80.8
	> 35 years	5	9.6
Education	SMA/SMK	44	84.6
	D3/S1	8	15.4
Occupation	Employed	19	36.5
	Unemployed	33	63.5
Gestational Age	1-12 week	10	19.2
	13-24 week	29	55.8
	25-40 week	13	25.0
Gravida	Primigravida	12	23.1
	Multigravida	30	57.7
	Grande Multigravida	10	19.2

Based on the table above, the data show that the majority of pregnant women were aged between 20–35 years (80.8%). In terms of educational background, most of the respondents had completed senior high school or vocational high school (84.6%). Regarding occupation, the majority of pregnant women were not working/housewives (63.5%). For gestational age, most of

the women were in their second trimester (13–24 weeks), accounting for 55.8%. In terms of gravidity, the majority were multigravida, experiencing their second or third pregnancy (57.7%).

Table 2. Knowledge and behavior of pregnant women on mch book use: pretest and posttest of the intervention

Variable	Pretest		Posttest	
	f	%	f	%
Knowledge				
Good	8	15,4	47	90,4
Poor	44	84,6	5	9,6
Behavior				
Positive	8	15,4	49	94,2
Negative	44	84,6	3	5,8

Based on the table above, it is shown that in the knowledge variable, during the pretest, the majority of mothers had poor knowledge (84.6%), while in the posttest, the majority demonstrated good knowledge (90.4%). For the behavior variable, during the pretest, most mothers showed negative behavior regarding the use of the MCH Book (84.6%), whereas in the posttest, the majority exhibited positive behavior (94.2%).

Table 3. The Effectiveness of assistance in the use of the MCH book on the knowledge of pregnant women

		N	Mean Rank	Sum of Ranks	Sig.
Knowledge Pretest- Posttest	Negative ranks	0	.00	.00	0,000
	Positive ranks	52	26.00	1326.00	
	Ties	0			
	total	52			

Based on the table above, it is shown that in the negative ranks data, there were 0 respondents, indicating that there was no decrease in the mothers' knowledge scores. In the positive ranks data, there were 52 respondents, indicating an increase in knowledge scores after the assistance was provided, with an average rank of 26. The results of the data analysis showed a p-value of 0.000, thus it can be concluded that the assistance in the use of the MCH Book was effective in improving the knowledge of pregnant women.

Table 4. The Effectiveness of assistance in the use of the MCH book on the behavior of pregnant women

		N	Mean Rank	Sum of Ranks	Sig.
Behavior Pretest- Posttest	Negative ranks	0	.00	.00	0,000
	Positive ranks	52	26.50	1378.00	
	Ties	0			
	total	52			

Based on the table above, it is shown that in the negative ranks data, there were 0 respondents, indicating that there was no decrease in the behavior scores of the mothers. In the positive ranks data, there were 52 respondents, indicating an improvement in behavior scores after the assistance was provided, with an average rank of 26.5. The results of the data analysis showed a p-value of 0.000, thus it can be concluded that the assistance in the use of the MCH Book was effective in improving the behavior of pregnant women.

Discussions

The Effectiveness of assistance in the use of the MCH book on the knowledge of pregnant women

The results of the study showed that in the negative ranks data, there were 0 respondents, indicating no decrease in the knowledge scores of the mothers. In the positive ranks data, there were 52 respondents, indicating an increase in knowledge scores after the assistance was provided,

with an average rank of 26. The data analysis using the Wilcoxon test produced a p-value of 0.000, thus it can be concluded that the assistance in the use of the MCH Book was effective in improving the knowledge of pregnant women.

The MCH Book is a health record owned by both parents and healthcare providers, used to monitor maternal health during pregnancy and to assess the growth and development of the child. It also serves as a tool for delivering individualized health education to parents at a relatively low cost. The information contained in the MCH Book allows it to function as a foundation for improving future maternal and child healthcare services (Sugiharti et al., 2023; Wijhati, 2022).

Pregnant women's understanding of the MCH Book is not limited to it being merely a record of antenatal check-ups, but also as a medium for monitoring and communication between healthcare providers and pregnant women (Susanti, 2020)(DALIMUNTHE, 2020). This role strengthens the motivation of pregnant women to utilize the MCH Book to its fullest potential (Ayu, 2019).

The study conducted by Wardiyati and Isnaeni showed a relationship between the utilization of the MCH Book and the level of knowledge, with a P-value of 0.000, which is less than 0.05. This indicates that the higher the utilization of the MCH Book, the higher the level of maternal knowledge. However, the relationship between the use of the MCH Book and the level of anxiety, tested using Kendall's Tau, resulted in a P-value of 0.101, which is greater than 0.05. This suggests that despite the use of the MCH Book, maternal anxiety remains relatively high, likely due to low reading interest and lack of understanding of the book's content. It is therefore recommended that midwives enhance the utilization of the MCH Book by motivating pregnant women to increase their interest in reading and by providing follow-up discussions to ensure comprehension during each antenatal care (ANC) visit (Wardiyati & Rifiqoch, 2023).

The study conducted by Astari and Tita showed that less than half (27.4%) of pregnant women had low knowledge about the MCH Book, and less than half (41.7%) did not utilize the MCH Book. The study also found a correlation between the level of maternal knowledge and the utilization of the Maternal and Child Health (MCH) Book (Astari & Kirani, 2020).

The study conducted by Yulastini showed that the majority of respondents had a low level of knowledge, with 18 respondents (40%) falling into this category, while the majority displayed a positive attitude, with 26 respondents (57.8%). The study concluded that most pregnant women were within the productive age range, had a senior high school educational background, and were predominantly unemployed or worked as housewives. Furthermore, although their knowledge was still limited, most pregnant women demonstrated positive attitudes and behaviors toward the utilization of the Maternal and Child Health (MCH) Book (Yulastini et al., 2022).

Based on the results of this study, assistance in the use of the MCH Book is highly necessary for pregnant women, especially for those experiencing pregnancy for the first time. Limited knowledge about the MCH Book leads to a lack of motivation among mothers to seek antenatal care to understand their pregnancy condition, and reduces their willingness to read the important health information provided in the MCH Book.

The Effectiveness of assistance in the use of the MCH book on the behavior of pregnant women

The research results showed that there were 52 respondents in the positive ranks category, indicating an improvement in maternal behavior scores after receiving assistance in using the MCH Book, with an average score of 26.5. The statistical analysis produced a p-value of 0.000, suggesting that the assistance in using the MCH Book was effective in improving the behavior of pregnant women.

The utilization of the MCH Book at the family level can only be achieved if healthcare providers and community health volunteers (cadres) are able to clearly explain and ensure that mothers and families understand its content (Pandori et al., 2018; Veronika et al., 2022). Efforts to improve the use of the MCH Book can be made through various strategies, one of which is by enhancing the role of cadres. Cadres can act as facilitators for mothers and families in utilizing the

MCH Book and serve as a vital link between the community and healthcare providers, ensuring that all health programs can be effectively communicated and implemented at the community level (Ambarita et al., 2022; Kemenkes RI, 2020).

The study conducted by Ainiyah found a significant relationship between the utilization of the MCH Book and the knowledge level of mothers, with a p-value of 0.01. Additionally, a significant relationship was also found between the use of the MCH Book and the behavior of pregnant women, with a p-value of 0.01 (Ainiyah, 2017).

The study by Munna et al. showed a significant relationship between the level of knowledge and the behavior of third-trimester pregnant women in utilizing the MCH Book ($p = 0.007$). The study concluded that the higher the level of knowledge of pregnant women, the more capable they are of detecting abnormalities in their pregnancy at an early stage (Munna et al., 2020).

The study conducted by Yulastini showed that the majority of respondents had a low level of knowledge, with 18 respondents (40%) falling into this category. However, most of the respondents demonstrated a positive attitude, with 26 respondents (57.8%). The study concluded that the majority of pregnant women were within the productive age range, had a senior high school educational background, and were mostly unemployed or housewives. Furthermore, although their knowledge was limited, most pregnant women showed a positive attitude and behavior toward the utilization of the MCH Book (Yulastini et al., 2022).

The study conducted by Suryanti et al. showed that there was no significant relationship between maternal characteristics and the knowledge or behavior of pregnant women. The p-values for knowledge were as follows: age ($0.4 > 0.05$), education ($0.06 > 0.05$), and parity ($0.6 > 0.05$). Similarly, the p-values for behavior were: age ($0.4 > 0.05$), education ($0.1 > 0.05$), and parity ($0.8 > 0.05$). The study concluded that there was no correlation between maternal characteristics and knowledge or behavior in the utilization of the MCH Book during antenatal care (Suryanti et al., 2023).

The results of this study indicate that assistance in the use of the MCH Book positively influences the improvement of maternal knowledge. This increase in knowledge subsequently impacts the behavioral changes of pregnant women regarding the use of the MCH Book.

CONCLUSION

The increased utilization of the MCH Book can be achieved through various strategies, one of which is by strengthening the role of community health volunteers (cadres). Cadres can serve as facilitators for mothers and families in making effective use of the MCH Book, and act as a bridge between the community and healthcare providers, thereby ensuring that all health programs can be effectively communicated and implemented within the community. The provision of assistance through the MCH (Maternal and Child Health) handbook to pregnant women influences behavioral changes in pregnant women in seeking antenatal care. It also helps mothers better understand the danger signs during pregnancy and when they should visit health services. Assistance for pregnant women can be provided through various media—not only the MCH handbook, but also through booklets or digital media that make it easier for pregnant women to access the information at any time.

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