

Original Article

Mothers' Knowledge, Attitudes, and Support from Health Workers Influencing The Maternal and Child Health (MCH) Handbook Utilization for Maternal and Child Health in Palembang

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ABSTRACT

Background: The Maternal and Child Health (MCH) Handbook is an essential tool in improving the health of pregnant women and young children. Serving as both a medical record and an educational resource, it provides vital health information for mothers and children. However, the utilization and understanding of the MCH Handbook vary across regions. This study evaluates the use of the MCH Handbook in monitoring maternal and child health in Palembang City.

Methods: A quantitative cross-sectional design was employed, targeting pregnant women and mothers with children aged 0–5 years from eight health centers in Palembang City. A total of 240 respondents were selected using simple random sampling. Data collection instruments were validated for reliability through Spearman-Brown, Guilford, and Cronbach's Alpha methods. Statistical analyses explored associations between utilization and factors influencing MCH Handbook use.


Results: The findings indicate a high utilization rate of the MCH Handbook in Palembang City (84.2%), though variations exist in its frequency and quality of use. Key factors influencing utilization include mothers' knowledge ($p=0.042$, OR 2.050), attitudes ($p=0.000$, OR 6.718), and health worker support ($p=0.000$, OR 21.44). Mothers who actively use the MCH Handbook demonstrate better knowledge and attitudes toward health care during pregnancy and early childhood. Health worker support significantly enhances usage, with supported mothers being 21.44 times more likely to utilize the handbook effectively.

Conclusion: In conclusion, the MCH Handbook significantly contributes to improving maternal and child health. Strengthened socialization programs, targeted training for mothers, and ongoing health worker support are recommended to optimize its utilization and effectiveness.

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Introduction

In recent years, the maternal and child mortality rates in Indonesia have persisted as significant public health concerns. Although the maternal mortality ratio (MMR) and infant mortality rate (IMR) in Indonesia are progressing towards the RPJMN 2024 targets of 183 per 100,000 live births and 16 per 1,000 live births, respectively, these figures remain higher than those of other ASEAN countries. Contributing factors to this issue include insufficient maternal knowledge regarding reproductive health and child care, as well as limited access to accurate and comprehensible health information.

Maternal and child health is a crucial aspect of a nation's health development. Efforts to improve the quality of maternal and neonatal health have become a global priority in achieving sustainable development goals. One strategy that has been implemented in many countries is the use of the Maternal and Child Health (MCH) Handbook to improve understanding and practices of care during pregnancy and postpartum periods ([Septiani, Aisyah, Afrika, & fakultas kebidanan dan keperawatan univeritas kader bangsa Palembang](#), 2022). The MCH Handbook is designed to monitor the health of pregnant women and young children. The utilization of the MCH Handbook has become a government strategy to enhance maternal and child health in Indonesia ([R. & Muthiasari](#), 2022). The handbook serves as a practical guide containing essential information about maternal and child health, including danger signs during pregnancy, childbirth preparation,

newborn care, and the necessary immunization schedule. Through systematic recording and monitoring, the MCH Handbook functions not only as an information source but also as a tool to facilitate interactions between pregnant women, health workers, and health care systems ([Kemenkes RI](#), 2019). The utilization of the MCH Handbook has shown significant potential in increasing access to quality maternal and neonatal health services and compliance.

Empirical studies have provided evidence that the implementation of the MCH Handbook can lead to significant improvements in mothers' knowledge about their own health and the care needed for their babies ([Ainiyah, Hakimi, & Anjarwati](#), 2018). Additionally, the MCH Handbook helps in the early detection of pregnancy complications or illnesses in babies, allowing for timely medical interventions ([Harahap](#), 2020).

The MCH Handbook has become part of health policy in many countries, yet challenges remain in its effective and sustainable implementation. Factors such as ownership of the handbook, access to the handbook, mothers' understanding of the information presented, and support from health workers are key to the success of this program ([Darwanty et al.](#), 2023 ; [Sugiarti & Kurniawati](#), 2020). Based on the 2023 report from the Health and Nutrition Section of the South Sumatra Provincial Health Office, the ownership of the MCH Handbook in South Sumatra reaches 93.3%, but the ownership in Palembang City is among the lowest compared to other administrative regions, at 26% ([Dinkes](#)

[Sumsel](#), 2023) . The Riskesdas South Sumatra report indicates that of the 29.37% of mothers with young children who have the MCH Handbook, 19.77% can show ownership of the book, while 9.6% cannot ([Riskesdas Sumatera Selatan](#), 2020).

Although many previous studies have shown the utilization of the MCH Handbook from the aspect of increasing mothers' knowledge and compliance with regular antenatal care visits, the level of utilization of the MCH Handbook still varies across regions ([Osaki et al.](#), 2019). Previous studies have shown that factors such as mothers' education, access to health services, and support from medical staff significantly influence the utilization of the MCH Handbook ([Dharmawan, Pradana, & Winarni](#), 2021). The utilization of the MCH Handbook is also significant in increasing mothers' knowledge and positive attitudes ([Wignarajah, Bhuiyan, & Gugathan](#), 2021). However, the lack of socialization regarding the importance of the MCH Handbook hinders its optimal utilization ([Permana, J., Hamid, A. and Nugroho](#), 2018).

A study by [Zamiatun, S., & Sariyati](#), (2020) at assessing the usage of the Maternal and Child Health (MCH) Handbook among pregnant and breastfeeding mothers revealed that 75% of the participants routinely read the handbook, with 60% finding the information highly beneficial for managing their pregnancy and childcare. However, the research also highlighted several obstacles to the effective use of the MCH Handbook, including low literacy rates and restricted access to the handbook in rural regions. Although the implementation of the MCH Handbook has been ongoing for

quite some time, variations in its utilization are still evident. Some mothers utilize the book optimally, while others may not fully understand its benefits and importance. A Comparative Study by ([Permana, J., Hamid, A. and Nugroho](#), 2018; [Osaki et al.](#), (2019), indicates that mothers in urban areas tend to use the Maternal and Child Health (MCH) Handbook more frequently than those in rural areas. Factors such as access to information, education level, and family support play a significant role in the utilization of the MCH Handbook. Therefore, this study aims to evaluate the utilization of the MCH Handbook in monitoring maternal and child health in Palembang City and identify the factors influencing its utilization.

Methods

This study is descriptive-analytic research with a cross-sectional approach conducted from December 2023 to March 2024. The study population consists of all pregnant women and mothers with young children visiting health centers in Palembang City. The sample selection was done using a multistage cluster sampling technique. Initially, 8 out of 42 health centers were selected, and from each of these health centers, the sample size was determined based on the number of visits by pregnant women and mothers with young children in the past month, using systematic sampling. This resulted in a total sample size of 240 respondents. Sample collection was carried out during posyandu (integrated health service post) visits, health center visits, and door-to-door visits, with inclusion criteria being pregnant women and mothers with children aged 0-5 years who own the MCH Handbook and reside in the selected health center areas. Exclusion criteria included respondents whose addresses could not be found and those who did not consent to participate in the study.

Data were collected using four instruments: respondent characteristics,

knowledge (50 true/false questions), attitudes (10 Likert scale questions), health worker support (10 questions), and MCH Handbook utilization (10 questions). The validity and reliability of the questionnaires were tested using the Spearman-Brown formula, yielding a split-half value of 76% or 0.76 (high reliability) for the knowledge, health worker support, and MCH Handbook utilization questionnaires, while the validity test for the attitude questionnaire used Cronbach's Alpha with a

value of 0.962 (>0.6), indicating acceptable reliability. Univariate analysis was conducted to determine the distribution of respondent characteristics, and bivariate analysis using the chi-square test ($p < 0.05$; H_0 rejected) was used to assess the strength of relationships between variables. Data processing and analysis were performed using SPSS 25 software. This study received ethical approval from the Ethics Committee of Poltekkes Kemenkes Palembang, number 005/KEPK/Adm2/1/2024.

Results

Table 1 shows that most respondents are in the age group of 20-35 years (productive age), with the youngest being 17 years old and the oldest 58 years old. Most respondents are housewives without employment, with the majority having completed high school education.

Table 1. Respondent Characteristics (n=240)

Variable	n	%
Community Health Center		
Tujuh Ulu	36	15
Basuki Rahmat	24	10
Kenten	20	8,3
Multiwahana	31	12,9
Pembina	31	12,9
Sekip	35	14,6
Sosial	29	12,1
Talang Ratu	34	14,2
Age (mean ; SD ; min-max)		
	(30,95 ; 6,6 ; 17-58)	
<20 years	10	4,2
20 – 35 years	171	71,2
>35 years	59	24,6
Employment		
Employed	87	36,3
Unemployed	153	63,7
Education		
Low (Completed Elementary-Middle School)	53	22,1
Medium (Completed High School)	130	54,2
High (Completed Diploma/Bachelor's Degree)	57	23,7
Respondent Status		
Mothers with toddlers	145	60,4
Pregnant women	95	39,6
Book Ownership		
Owns	227	94,6
Doesn't own	13	5,4
Book Presence		
Always carried	223	92,9
	17	17,1

Not carried		
Book Utilization		
Effective	202	84,2
Ineffective	38	15,8
Knowledge Level		
Good (skor \geq mean)	149	62,1
Poor (skor $<$ mean)	91	37,9
Attitude		
Positive (skor \geq 3,76)	210	87,5
Negative (skor 0-3,75)	30	12,5
Staff Support		
Good (skor \geq mean)	212	88,3
Poor (skor $<$ mean)	28	11,7

Table 1 also shows that most respondents are mothers with young children who have the MCH Handbook and always bring it when visiting health facilities (posyandu or health centers). Based on interviews with respondents, ownership of the book is usually obtained during antenatal care (ANC) visits to health facilities and when mothers bring their babies for basic immunization. Most respondents have effectively utilized the MCH Handbook, including its use for recording pregnancy, child growth such as height, weight, motor skills, immunizations given, etc. Most respondents also have good knowledge and positive attitudes about the contents of the MCH Handbook and have received good support from health workers and health cadres.

Table 2 illustrates the analysis of the relationship between risk factors (age, education, employment, book ownership, book presence, knowledge, mothers' attitude, and health worker support) and the utilization of the MCH Handbook. It was observed that mothers younger than 20 or older than 35 years old utilized the MCH Handbook more effectively than those in the productive age range (25-35 years). Similarly, mothers with lower education levels used the MCH Handbook more effectively compared to those with middle and higher education levels, and working mothers utilized the MCH Handbook more effectively than unemployed mothers. The same results were found for mothers who own and consistently bring the book to health facility visits, suggesting that variables such as age, education, employment, ownership, and book presence do not significantly impact the effectiveness of MCH Handbook utilization.

Table 2. Relationship Between Risk Factors and Utilization of the MCH Handbook for Pregnant Women and Mothers with Young Children in Palembang City

Risk Factor	Utilization of KIA Book				p-value	OR
	Ineffective		Effective			
	n	%	n	%		
Age						
<20 />35 years	10	14,5	59	85,5	0,868	
25-35 years	28	16,4	143	83,6		
Education						
Low	4	7,5	49	92,5	0,102	
Medium	26	20	204	80		
High	8	14	49	86		
Employment						
Employed	13	14,9	74	85,1	0,776	
Unemployed	25	16,3	128	83,7		
Ownership						
Owns	35	15,4	192	84,6	0,462	
Doesn't own	3	23,1	10	76,9		
Presence						
Carried	33	14,8	190	85,2	0,112	
Not carried	5	29,4	12	70,6		
Knowledge						
Good	18	12,1	131	87,9	0,042*	2.050 (1,019-4125)
Poor	20	22	71	78		
Attitude						
Positive	24	11,4	186	88,6	0,000*	6,781 (2,946-15,61)
Negative	14	46,7	16	53,3		
Support from Staff						
Supportive	19	9	193	91	0,000*	21,44 (8,524-53,95)
Not Supportive	19	67,9	9	32,1		

Note: * Chi-square test significant if p-value < 0.05

Table 2 shows that the statistical chi-square test results indicate a significant relationship between mothers' knowledge and the utilization of the MCH Handbook, with a p-value of 0.042. The OR value of 2.050 means that mothers with good knowledge are 2.050 times more likely to use the MCH Handbook than those with poor knowledge. Mothers with poor knowledge tend to exhibit negative behavior, while those with good knowledge show positive behavior in using the MCH Handbook for pregnancy care, recognizing pregnancy complications, signs of labor, postpartum care, newborn and child care, immunizations, sick child care, and contraceptive use. Therefore, continuous education about the MCH Handbook is necessary for pregnant women and mothers with young children to foster awareness and interest in using and applying its contents more effectively.

Discussion

The research results show that the majority of mothers who utilize the MCH Handbook are young mothers aged 30 to 35 years (71.2%). This is because young mothers often rely more on the MCH Handbook for basic information about pregnancy, childbirth, and childcare ([Kumalasari, Maksuk, Amin, Juliansyah, & Jaya, 2023](#)). A study by [Pamulat Sari et al., \(2019\)](#) found that young mothers are more likely to read the MCH Handbook regularly if they receive adequate socialization from health workers. However, lower literacy levels among some young mothers can hinder effective utilization. On the other hand, middle-aged mothers may face higher health risks during pregnancy and childbirth, making the use of the MCH Handbook crucial for identifying danger signs and obtaining timely medical care ([Sistiarani et al., 2018](#) ; [Zamiatun, S., & Sariyati, 2020](#)). [Ambarita et al., \(2022\)](#) found that middle-aged mothers tend to be more meticulous in recording and monitoring their health and their babies' conditions, although some in this group may feel more confident in their knowledge and use the MCH Handbook less frequently.

Mothers working in formal sectors such as offices, education, or government may have better access to health information but less time to use the MCH Handbook. Research by [Sistiarani et al., \(2018\)](#), showed that these mothers understand the importance of maternal and child health but may struggle to find time to read and apply the MCH Handbook guidelines due to time constraints.

Mothers' education significantly influences their ability to use the MCH Handbook as a health guide. Mothers with higher education levels typically have better literacy skills, enabling them to understand the information in the MCH Handbook more

easily. Research by [Sistiarani et al., 2018](#) : showed that mothers with middle to high education levels are more capable of understanding and interpreting the health information in the MCH Handbook ([Sistiarani et al., 2018](#)). Consistent with previous studies, [Nugroho et al.](#) found that mothers with higher education are more aware of the benefits of routine health monitoring and use the MCH Handbook as a guide ([Permana, J., Hamid, A. and Nugroho, 2018](#) ; [Ira et al., 2018](#)). Although lower education levels are often associated with difficulties in understanding and utilizing health information, the author suggests that factors such as reliance on limited information sources, the accessible format of the book, support from health workers, awareness of knowledge limitations, and trust in official information sources can encourage lower-educated mothers to use the MCH Handbook more. Understanding these dynamics is crucial for designing effective education and intervention programs to support maternal and child health.

Ownership of the MCH Handbook is strongly associated with its utilization. When mothers own the MCH Handbook, they have direct access to essential health information, can monitor their own and their children's health more effectively, and communicate more efficiently with health workers. To improve MCH Handbook utilization, it is essential to ensure equitable distribution, practical education programs, and support from health workers. Ensuring that all mothers own and understand how to use the MCH Handbook can significantly improve maternal and child health in Indonesia. Consistently bringing the MCH Handbook to every health visit is crucial for its practical use. By consistently bringing the MCH Handbook, mothers can ensure that health information is well recorded,

communication with health workers is more effective, and adherence to health recommendations increases. This ultimately contributes to the overall improvement of maternal and child health ([Kumalasari et al., 2022](#) ; [Ridawati & Kumalasari, 2023](#)).

Analytical test results using a cross-sectional approach reveal a significant relationship between the level of knowledge and the utilization of the MCH Handbook. This is attributed to the high knowledge level of mothers in this study may be attributed to most mothers having completed high school or higher education, consistent with the theory that education level influences knowledge. Educated individuals are more likely to reconsider their actions, and education helps increase knowledge, leading to behavior changes. Mothers with higher education are more knowledgeable about the benefits of the MCH Handbook and are more likely to seek out its content, making its use more optimal ([Permana et al., 2018](#); [Septiani et al., 2022](#)).

Mothers with higher education levels generally have better baseline knowledge and understanding of health-related topics. This education helps them grasp the importance and benefits of using the MCH Handbook effectively. Educated mothers are more likely to access various sources of health information, such as books, internet resources, and healthcare seminars. This access enhances their understanding of how to use the MCH Handbook properly. Education improves cognitive skills, enabling mothers to better comprehend and interpret the information provided in the MCH Handbook. This leads to more effective application of the guidelines and recommendations.

This study's results align with research by [Sugiarti & Kurniawati, \(2020\)](#) and [Alfiana et al., \(2021\)](#) which found that mothers' knowledge levels in using the MCH Handbook were generally sufficient or good, due to the benefits they had experienced. However, contrary to [Sistiarani et al., \(2018\)](#), research, some mothers with sufficient knowledge did not fully utilize the MCH Handbook for educational and communication purposes. This indicates that sufficient knowledge does not always increase the likelihood of using the MCH Handbook, as many mothers are reluctant to read the educational messages or use it optimally to communicate with health workers and cadres, affecting their health maintenance behavior during pregnancy, childbirth, and postpartum.

The chi-square test results for mothers' attitudes show a p-value of 0.000, indicating a significant relationship between attitudes and the use of the MCH Handbook. The OR value of 6.781 suggests that mothers with a positive attitude are 6.781 times more likely to use the MCH Handbook than those with a negative attitude. This study is consistent with research by [Maghfirawati & Paramitha, \(2024\)](#), but not with [Rahmi et al., \(2018\)](#), who found that many mothers did not use the MCH Handbook effectively due to a lack of awareness or perceived necessity. Researchers assume that the difference in study results, where a positive relationship was found, may be due to more intensive and effective education and socialization programs regarding the importance of the MCH Handbook. These programs can enhance mothers' positive attitudes towards the MCH Handbook. Conversely, in other locations, the lack of adequate socialization programs might be the reason why mothers do not feel the need or are

unaware of the importance of using the MCH Handbook

Attitudes arise from learned ideas influencing consistent responses. Positive or negative attitudes can be shaped by personal experiences, such as recognizing danger signs during pregnancy from the MCH Handbook or providing first aid to a sick child based on its guidelines. Experiences like these form strong impressions and drive positive attitudes toward the MCH Handbook ([Ainiyah et al., 2018](#)). Research by [Hanum & Safitri, \(2019\)](#), indicates that personal experiences with recognizing danger signs during pregnancy foster positive attitudes toward the MCH Handbook. Attitudes can also be influenced by significant others, such as parents, friends, neighbors, and health cadres, and cultural backgrounds. Continuous education and support from health workers and families help form positive attitudes, enhancing the Handbook's use in maternal and child health care.

The chi-square test results for health worker support show a p-value of 0.000 and an OR value of 21.44, indicating a significant relationship between health worker support and the MCH Handbook's use. Health workers play a crucial role in encouraging its use by providing clear information and checking the Handbook during visits. Some respondents noted that health workers only offered brief explanations or suggestions to read the Handbook at home. Lack of support from health workers can stem from inadequate counseling skills. Health workers with good counseling skills are more trusted and effective in conveying information ([Dharmawan et al., 2021](#)).

The significant relationship exists can be explained by several factors: 1) Clear Communication of Information: Health workers who effectively communicate the benefits and usage of the MCH Handbook

can significantly influence mothers to use it. Detailed and clear explanations during visits ensure that mothers understand the importance and practical applications of the Handbook. 2) Building Trust and Rapport: Health workers with good counseling skills can build trust and rapport with mothers. When mothers trust health workers, they are more likely to follow their recommendations, including using the MCH Handbook regularly. 3) Monitoring and Accountability: By checking the MCH Handbook during visits, health workers create a sense of accountability. Mothers are more likely to use the Handbook if they know it will be reviewed by health professionals, reinforcing its importance. 4) Perceived Value of the Handbook: Continuous reinforcement by health workers regarding the value and importance of the Handbook can shape mothers' perceptions positively. When mothers perceive the Handbook as valuable and essential, they are more likely to use it diligently. 5) Supportive Role: Health workers who provide continuous support and encouragement help mothers feel supported in their health care journey. This support can motivate mothers to utilize the MCH Handbook as a resource for managing their health and their child's health. 6) Counselling Skills Impact: The ability of health workers to effectively counsel mothers is crucial. Health workers with good counselling skills can explain complex information in an understandable way, address any concerns or questions, and provide practical advice, making the Handbook more accessible and useful for mothers ([Maghfirawati & Paramitha, 2024](#); [Sari et al., 2018](#)). In summary, the significant relationship between health worker support and the use of the MCH Handbook underscores the importance of effective communication, trust-building, and continuous support from health

professionals. These factors collectively enhance mothers' understanding, perception, and utilization of the MCH Handbook (Kumalasari et al., 2022 ; Amin et al., 2022).

Despite the lack of optimal support, many respondents use the MCH Handbook effectively, driven by their motivation to maintain their health and their children's growth. Quick access to health information through social media also aids health workers in educating the community, who find information through media easier to understand. The MCH Handbook's use is also promoted on platforms like YouTube. The study highlights that family empowerment significantly increases the disciplined use of the MCH Handbook. Support from family and community, along with continuous education from health workers, encourages consistent use of the MCH Handbook in daily health care.

Conclusion

The Maternal and Child Health (MCH) Handbook is a vital tool in efforts to improve the health of pregnant women and children. This study shows that the utilization rate of the MCH Handbook in Palembang City is quite high (84.2%), although there are variations in the frequency and quality of its use. Factors such as mothers' knowledge, positive attitudes towards the MCH Handbook, and support from health workers significantly influence the utilization of the MCH Handbook. Mothers with better knowledge, positive attitudes, and strong support from health workers are more likely to use the MCH Handbook effectively, with those supported by health workers being 21.44 times more likely to utilize the MCH Handbook compared to those without such support. To enhance the utilization of the MCH Handbook, it is necessary to increase intensive and comprehensive socialization and education programs on the importance of the MCH Handbook for pregnant and breastfeeding mothers, as well as intensive training for health workers to improve their counseling and

education skills. Additionally, strengthening support from family and community is crucial to boost mothers' motivation in consistently using the MCH Handbook. Utilizing social media and digital platforms such as YouTube can also be effective in promoting the use of the MCH Handbook. Continuous monitoring and evaluation of the MCH Handbook usage programs are required to ensure effectiveness and to make improvements based on evaluation results. By implementing these recommendations, it is hoped that the utilization of the MCH Handbook can be more optimal, thus maximizing its contribution to improving maternal and child health in Palembang City and other regions.

Authors Contributions

This study is an independent research project where all stages, from proposal development, data collection, tabulation, processing, and data analysis to article writing, were conducted without involving other author. The author enlisted the assistance of students as enumerators during the primary data collection phase.

Conflicts of Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this article

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