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Judul Jurnal Ilmiah (Artikel) : Feasibility of preconception screening for Thalassaemia in Indonesia:

Exploring the opinion of Javanese mothers

Penulis Jurnal Ilmiah : Costrie G. Widayanti, **Annastasia Ediati**, Moedrik Tamam, Sultana

MH Faradz, Erik A. Sistermans, & Anne Marie C. Plass

Jumlah Penulis : 6 orang

Status Pengusul : Penulis ke-dua

Identitas Jurnal Ilmiah : a. Nama Jurnal : Ethnicity & Health

b. ISSN : 1355-7858, 1465-3419

c. Volume, nomor, bulan, tahun : 16(4-5), 2011 d. Penerbit : Taylor & Francis

e. DOI artikel : 10.1080/13557858.2011.564607

f. Alamat web jurnal

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g. Terindeks di Scopus/Scimagojr/SJR: 0,854 (2017) dan Q1

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Semarang, 8 November 2018

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NIDK. 8818240017

Reviewer 2 Prof. Dr. Tina Afiatin, M.Si., Psikolog

NIP. 196402111989032003

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Method (Design, Participants and Procedure, Measures, Data Analysis), Results, Discussion, Limitation of study, Key messages, Acknowledgement, dan References.

2. Ruang lingkup dan kedalaman pembahasan:

Ruang lingkup pembahasan artikel sesuai dengan ruang lingkup jurnal, yakni mengenai persepsi ibu yang memiliki anak dengan Thalasemia. Pembahasan mendalam dengan mengacu pada *Theory of Planned Behavior* yang dikembangkan Ajzen. Disamping itu, artikel ini juga mengulas hasil-hasil penelitian sebelumnya, baik di bagian pendahuluan maupun pembahasan (diskusi), serta keterbatasan penelitian ini.

3. Kecukupan dan kemutakhiran data/informasi dan metodologi:

Artikel ini mengutip 31 referensi yang relevan dengan tulisan mengenai thalassemia dan 87% diantaranya (27 referensi) merupakan referensi yang mutakhir. Metode penelitian yang digunakan untuk mengungkap persepsi ibu yang memiliki anak dengan thalassemia dipandang cukup memadai, yakni menggunakan pendekatan kuantitatif yang menggunakan skala pengukuran psikologi yang sesuai dengan kaidah psikometri.

4. **Kelengkapan unsur dan kualitas terbitan**: Jurnal ini tergolong Jurnal Internasional Bereputasi (Editorial board lebih dari 4 negara, contributor lebih dari 2 negara, ISSN 1355-7858 (print) / 1465-3419 (online), terindeks di Scopus, SJR 0,854 (2017)/Q1, Impact factor 1,766 (2017).

Jakarta, 29 Oktober 2018 Reviewer 1,

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NIDK. 8818240017

Unit kerja: Fakultas Psikologi

Universitas Kristen Krida Wacana, Jakarta

Bidang Ilmu: Psikologi Klinis

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d. Kelengkapan unsur dan kualitas penerbit (30%)	12,00					12
Total = (100%)	40,00					36
Nilai Pengusul = (40%	x 36)/5 = 14,4	/5 = 2,88				2,88

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2. Ruang lingkup dan kedalaman pembahasan:

- Tidak ada penjelasan tentang justifikasi pentingnya meneliti variabel attitude toward carrier testing for thalassaemia, social norms concerning carrier testing for Thalassemia, perceived behavioral control over carrier testing for thalassaemia, dan attitude towards receiving information about thalassaemia.

3. Kecukupan dan kemutakhiran data/informasi dan metodologi

- Tidak ada penjelasan prosedur uji coba alat ukur dan penjelasan rinci tentang kualitas alat ukur (validitas dan reliabilitas).
- Data penelitian bersifat *non probability sample* sehingga tidak dapat digeneralisasi untuk populasi di Indonesia.

4. Kelengkapan unsur dan kualitas terbitan:

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Universitas Gadjah Mada, Yogyakarta

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Feasibility of preconception screening for thalassaemia in Indonesia: Exploring the opinion of Javanese mothers

Widayanti, Costrie Ganes^{a, b}; Ediati, Annastasia^{b, c}; Tamam, Moedrik^d; Faradz, Sultana M. H. ^c; Sistermans, Erik A. ^e; Plass, Anne Marie C. ^{e, f} ⋈ Save all to author list

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Background. Thalassaemia has become a major public health issue in Indonesia. It has been estimated that up to 10% of the population carries a gene associated with beta-thalassaemia. Currently, there is no formal recommendation for thalassaemia screening. This study aimed to explore awareness of thalassaemia, and to explore attitudes regarding carrier testing among Javanese mothers. Methods. A

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Lakeman, P., Plass, A.M.C., Henneman, L.

quantitative questionnaire, designed using constructs of the Theory of Planned Behaviour, was applied cross-sectionally. Results. Out of 191 mothers who were invited, 180 agreed to participate (RR = 94%), of whom 74 had a child affected with thalassaemia. Both attitudes towards receiving information about thalassaemia, and attitudes towards carrier testing were very positive. Awareness of thalassaemia was poor. Mothers, both those with and without an affected child, had barely heard of thalassaemia, nor of carrier testing. However, all mothers, including those with an affected child expressed high levels of interest in carrier testing. Respondents did not perceive that they had any control over carrier testing, and feared stigmatization and being discriminated against if their carrier status was identified. Attitudes towards carrier testing explained 23% of future reproductive intentions, in addition to perceived stigmatization, education level and 'mother's age' (R2=0.44; p=0.001). Conclusion. Responding mothers expressed high levels of interest in receiving information on both thalassaemia and carrier testing. The less educated and the more deprived they were, the keener they were to receive this information. Overall, awareness of thalassaemia was low. Even mothers with affected children seemed unaware of the inheritance pattern and the recurrent risk of having an affected child in a subsequent pregnancy, showing the need for genetic counselling in Indonesia. It is therefore recommended not only to raise awareness about thalassaemia, but to improve the education of healthcare professionals as well. © 2011 Taylor & Francis.

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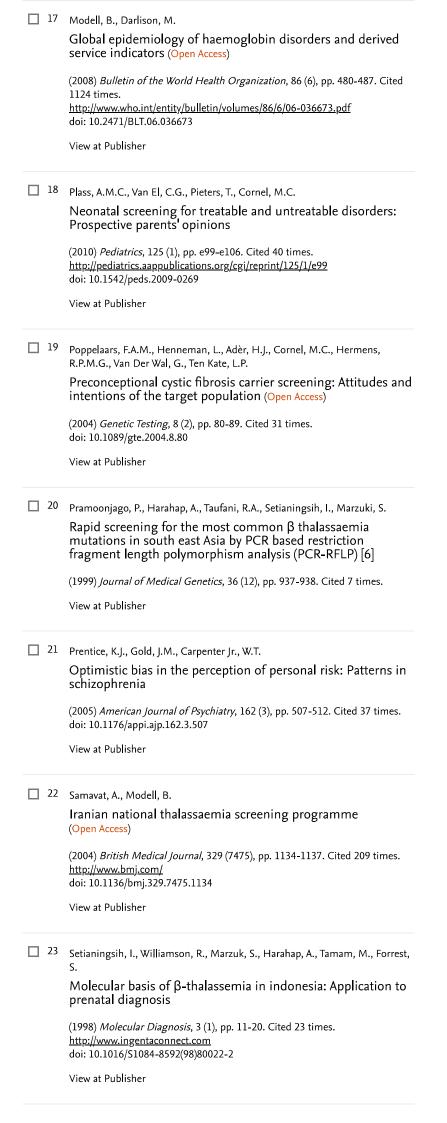
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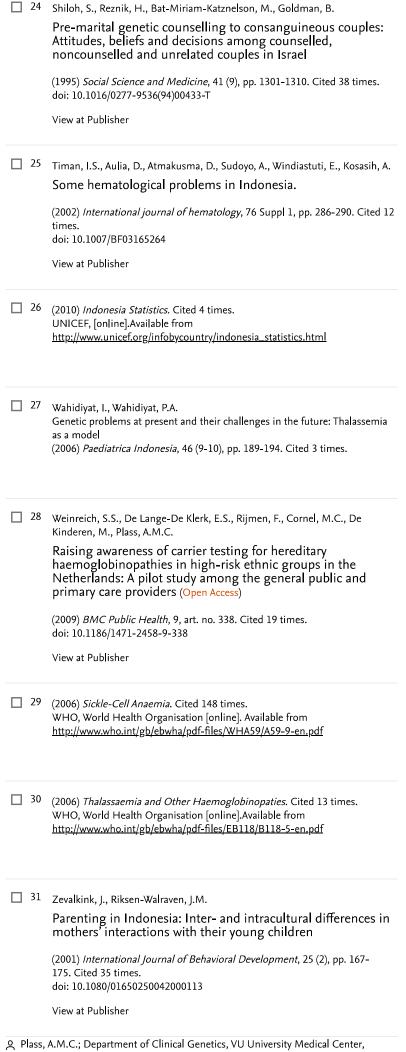
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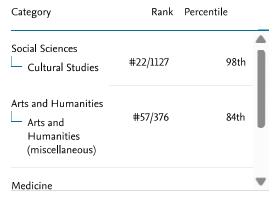
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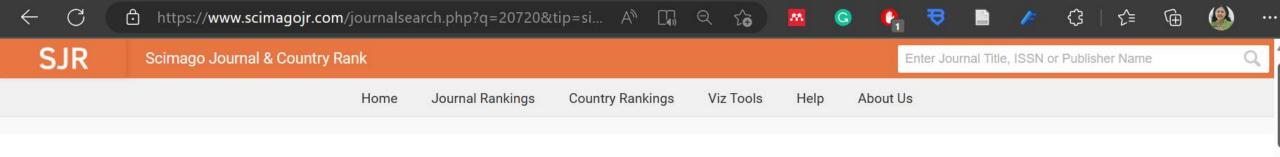
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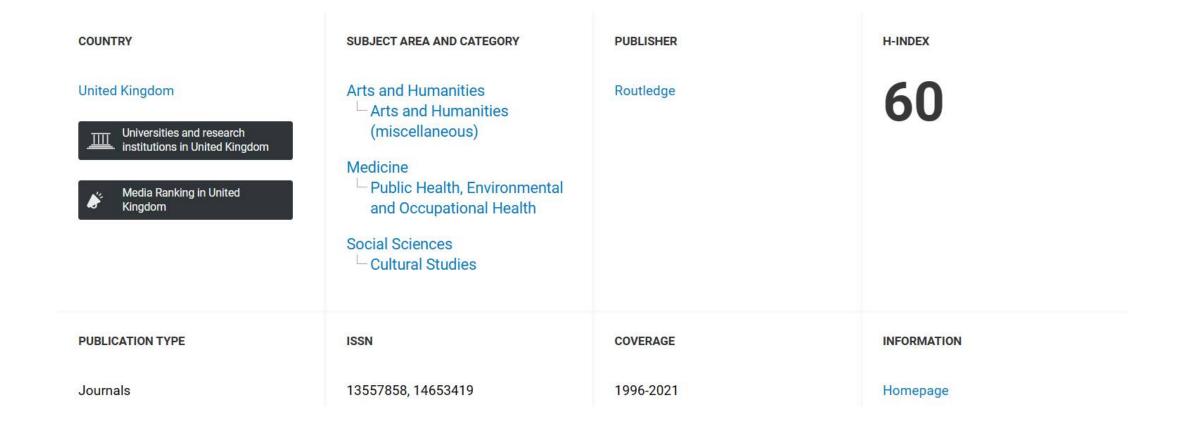
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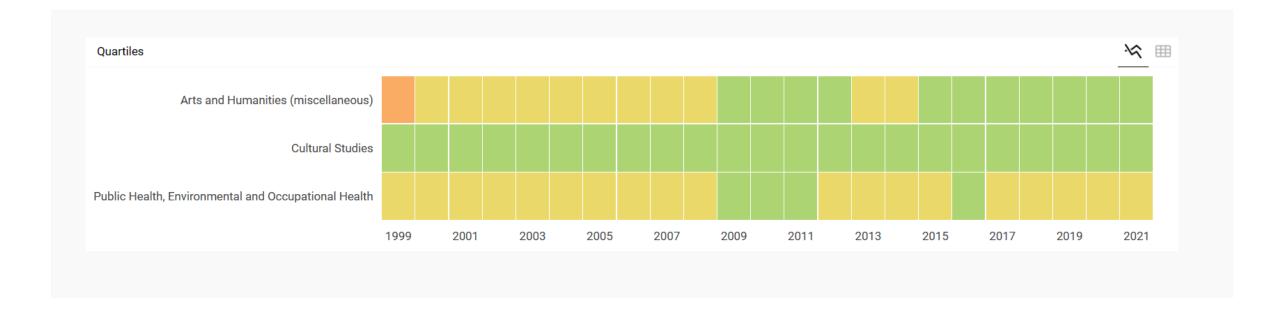
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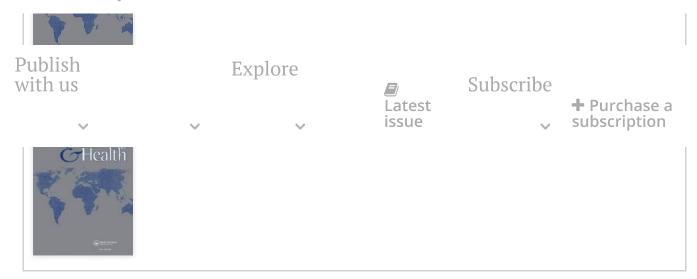
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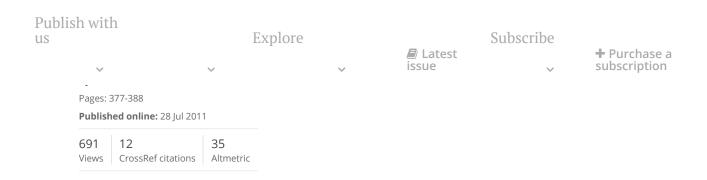
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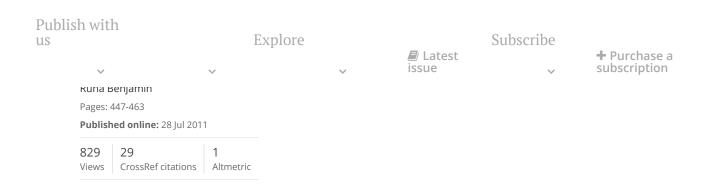
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Feasibility of preconception screening for thalassaemia in Indonesia: exploring the opinion of Javanese mothers

Costrie Ganes Widayanti, Annastasia Ediati, Moedrik Tamam, Sultana M.H. Faradz, Erik A. Sistermans & Anne Marie C. Plass

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'All her children are born that way': gendered experiences of stigma in families affected by sickle cell disorder in rural Kenya

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Objectives. To explore early experiences of sickle cell disorder (SCD) in families with a young affected child, and the way these experiences influence relations within families. To consider ways in which stigma could be counteracted in health and research programmes in sub Saharan Africa.

Design. A qualitative study was conducted in a rural area of coastal Kenya including in-depth interviews with 13 families affected by SCD and 12 staff of a local biomedical research progamme. Purposive selection aimed to maximize diversity in socioeconomic and educational status, religion, severity of illness burden and religion amongst families and draw on relevant experience for staffs. Interviews were recorded, transcribed and analysed using the constant comparative method for family interviews and a thematic framework approach for staff data.

Results. Low initial recognition of SCD and its cause were associated with lay practices of surveillance within affected families, contributing to stigmatisation that occurred independently of genetic knowledge. Blame was often placed on mothers, including a risk of blame for misaligned paternity. Mothers are often particularly affected by SCD through the loss of independent livelihoods and their limited options in coping with this chronic condition.

Conclusions. Mothers of children with SCD were particularly vulnerable to stigmatisation within families, with underlying structural influences that suggest these findings may apply to other similar settings in Africa, and have relevance for other genetic conditions. The potential, nature and form of stigmatisation point to the role of effective communication and SCD management in addressing for blame and discriminative effects of having a child with SCD. The findings highlight the importance of broader social programmes targeting underlying gender and economic inequalities.

Keywords: sickle cell disorder; Africa; stigmatisation; gender; health policy

Background

Internationally, many social and ethical issues have been debated around genetic testing, both for the 'new' post-genomic era of genetics (Collins 1999, Hoedemaekers et al. 2006, Parker et al. 2009) that began with the initiation of the Human Genome

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'I can die today, I can die tomorrow': lay perceptions of sickle cell disease in Kumasi, Ghana at a point of transition

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Objective. To describe the lay meanings of sickle cell disease (SCD) in the Ashanti region of Ghana.

Design. Depth interviews with 31 fathers of people with SCD; a focus group with health professionals associated with the newborn sickle cell screening programme, and a focus group with mothers of children with SCD.

Results. Whilst there are discourses that associate sickle cell with early or recurrent death, with supernatural undermining of family well-being, and with economic challenges in purchasing medical care, other discourses that value children and other family practices that resist stigma are also in evidence.

Conclusion. Lay perspectives on SCD are constructed in the contexts of enduring culture (the high value placed on children); changing culture (medicine and research as available alternative discourses to supernatural ones); altered material circumstances (newborn screening producing cohorts of children with SCD); changing political situations (insurance-based treatment); enhanced family resources (the experience of a cohort of young people with SCD). Above all the praxis of successfully caring for a child with SCD, and the political experience of sharing that praxis, stands in opposition to discourses of death and helps parents resist stigma and despair.

Keywords: sickle cell disease; chronic illness; genetics; lay perspectives; culture; newborn screening; stigma; Ghana

Introduction

In this paper we consider sickle cell disease (SCD) in Ghana as an instance in understanding lay perspectives on chronic illness. Although there is a long history of considering lay perspectives, much of this focuses on North America and Europe. Moreover, any focus on lay perspectives in the developing world runs the risk of emphasising exotic notions of difference, constructing so-called 'primitive' lay views in opposition to 'advanced' medical knowledge of SCD. We begin with an overview of sickle cell in Ghana, a major chronic illness in West Africa, and the potential of newborn screening as a public health intervention. We then situate the issue of lay

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Feasibility of preconception screening for thalassaemia in Indonesia: exploring the opinion of Javanese mothers

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Background. Thalassaemia has become a major public health issue in Indonesia. It has been estimated that up to 10% of the population carries a gene associated with beta-thalassaemia. Currently, there is no formal recommendation for thalassaemia screening. This study aimed to explore awareness of thalassaemia, and to explore attitudes regarding carrier testing among Javanese mothers.

Methods. A quantitative questionnaire, designed using constructs of the Theory of Planned Behaviour, was applied cross-sectionally.

Results. Out of 191 mothers who were invited, 180 agreed to participate (RR = 94%), of whom 74 had a child affected with thalassaemia. Both attitudes towards receiving information about thalassaemia, and attitudes towards carrier testing were very positive. Awareness of thalassaemia was poor. Mothers, both those with and without an affected child, had barely heard of thalassaemia, nor of carrier testing. However, all mothers, including those with an affected child expressed high levels of interest in carrier testing. Respondents did not perceive that they had any control over carrier testing, and feared stigmatization and being discriminated against if their carrier status was identified. Attitudes towards carrier testing explained 23% of future reproductive intentions, in addition to perceived stigmatization, education level and 'mother's age' ($R^2 = 0.44$; p = 0.001).

Conclusion. Responding mothers expressed high levels of interest in receiving information on both thalassaemia and carrier testing. The less educated and the more deprived they were, the keener they were to receive this information. Overall, awareness of thalassaemia was low. Even mothers with affected children seemed unaware of the inheritance pattern and the recurrent risk of having an affected child in a subsequent pregnancy, showing the need for genetic counselling in Indonesia. It is therefore recommended not only to raise awareness about thalassaemia, but to improve the education of healthcare professionals as well.

Keywords: thalassaemia; carrier screening; Javanese mothers; genetic awareness; Theory of Planned Behaviour (TpB); awareness; Indonesia

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