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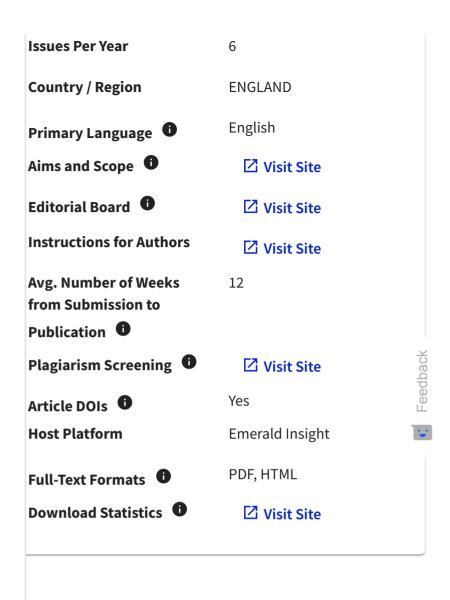
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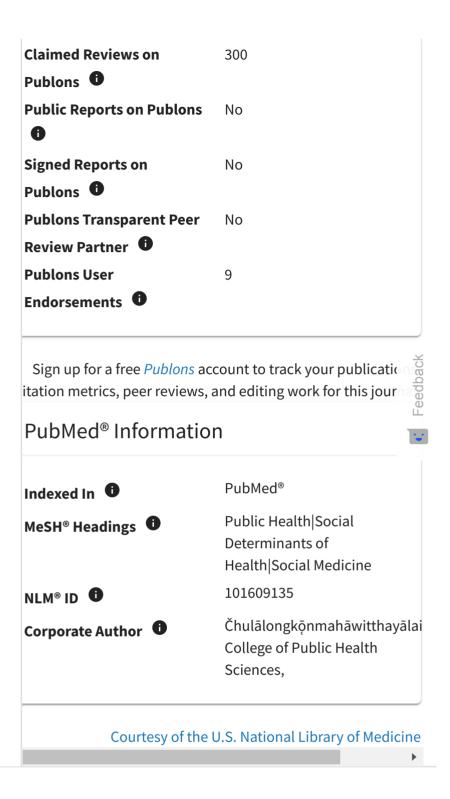
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INFLUENCE OF HUSBAND SUPPORT ON COMPLICATION DURING PREGNANCY AND CHILDBIRTH IN INDONESIA

By: Agushybana, F (Agushybana, Farid)^[1]
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Abstract

Background: High complication during pregnancy and childbirth and mortality is still an important problem in Indonesia. The maternal health is also one of the husband's responsibilities as a partner support in the family which could influence women's access to maternal health services and etheir health outcomes. At present, it is unclear whether involving men in maternal health can improve maternal outcomes. The objective of this study was to investigate the associations between socio-demographic factors, husband support and last pregnancy problems among married women (aged 15-49 years) in Indonesia

Method: The data were obtained from the 2012 Indonesia Demographic and Health Survey (IDHS). Descriptive analysis and Multilevel logistic regression were implemented to assess differences in women who had partner support during their pregnancy and those who did not, and their pregnancy outcomes, controlling by region as the random effect parameter.

Results: There were 5,052 respondents. The majority of age at childbirth was 20-34 years old accounted for 70%. The educational level of both husband and wife were mostly in the secondary education (55.3% and 55.6%, respectively). A 53.0% of women were employed while almost all men had an occupation. It was found that husband accompanied women during antenatal care visit (74.4%) and during delivery (59.8%). This study yielded the 64.8% of the sample presented the maternal morbidity during pregnancy and at delivery. A multilevel model showed that there were significant positive effects of maternal age at delivery, maternal education, maternal occupation, husband support during pregnancy and at delivery toward maternal morbidity, after controlling the region.

Conclusion: Our results found that complication during pregnancy and childbirth was statistically significantly associated with husband support and maternal characteristic. This suggested that government policy regarding women's should emphasize the importance of women's education, and also indicated a potential role of spouse relationship in maternal health interventions.

Keywords

Author Keywords: Maternal health; Women education; Husband support; Indonesia

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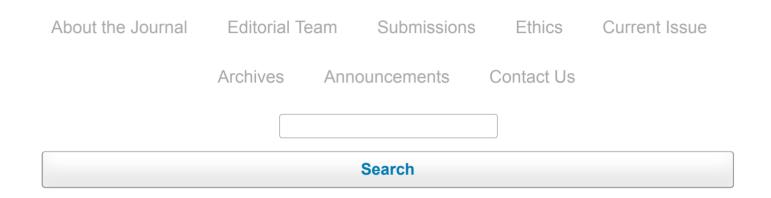
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SHORT REPORT

Reaching out with a helping hand: a case study of a private corporate social responsibility (CSR) initiative for providing equitable health care for Myanmar migrants in Kuala Lumpur, Malaysia

Murallitharan Munisamy, Tharini Thanapalan, Prathurng Hongsranagon, Sathirakorn Pongpanich 297-303





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Short Report 297

REACHING OUT WITH A HELPING HAND: A CASE STUDY OF A PRIVATE CORPORATE SOCIAL RESPONSIBILITY (CSR) INITIATIVE FOR PROVIDING EQUITABLE HEALTH CARE FOR MYANMAR MIGRANTS IN KUALA LUMPUR, MALAYSIA

Murallitharan Munisamy^{1,*}, Tharini Thanapalan², Prathurng Hongsranagon¹, Sathirakorn Pongpanich¹

¹ College of Public Health Sciences, Chulalongkorn University, Bangkok 10330, Thailand
² Klinik Kesihatan Ibu dan Anak Cheras Makmur, Cheras, Kuala Lumpur, Malaysia

ABSTRACT:

Background: Following the turmoil in Myanmar decades ago, a large number of its citizens fled to neighbouring countries including Thailand, Malaysia and Singapore. In Malaysia, these 'illegal' migrants work in low-paying, often high-risk informal jobs and live in segregated, 'squatter' areas. They also have limited access to the welfare-based public healthcare system, having to pay high prices as 'non-citizens' or even higher prices for private healthcare services. This has resulted in poor health outcomes for Myanmar migrants, with high rates of communicable diseases, maternal and child morbidity and mortality. This study aimed to describe a Corporate Social Responsibility (CSR) initiative of a private hospital in Kuala Lumpur to provide equitable health care via a free, mobile primary care clinic for Myanmar migrants in Dengkil, Kuala Lumpur.

Methods: This paper is a descriptive-explanatory case study which constructs the processes involved in the planning and implementation of this CSR initiative as well as feedback from recipients of the initiative. Individual in-depth interviews were conducted with the hospital management to detail the thought processes involved in planning and implementation. Feedback from a sampled group of migrants was obtained via indepth interviews on the benefits of this initiative to them.

Results: The CSR initiative was formulated as a free mobile primary care clinic conducted on-site at the settlement of the Myanmar migrants in Dengkil, Kuala Lumpur using volunteer doctors, trainee nurses from the hospital nursing college and logistic support from the hospital. The CSR initiative was designed and implemented as a 'win-win' situation in which both the hospital and migrant community gain social and economic benefits that have enabled this initiative to become a sustainable one, running over the past 4 years. **Conclusion:** This case study highlights a new approach to health equity via participation of a private healthcare provider to engage in providing primary health care services to a migrant community. The success of this initiative and its sustainability is due to the fact that it is profitable to the hospital. Ensuring that the private healthcare sector can obtain tangible benefits from CSR activities will play a key role in ensuring they continue to engage in such initiatives over the long-term. This case provides an important example which could be emulated by other private healthcare providers to aid in shouldering the collective burden of healthcare provision to all people.

Keywords: Migrant health, Health equity, Refugee health, Myanmar, Health access

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INTRODUCTION

Myanmar, one of the youngest members of ASEAN, is an important country in Southeast Asia. Its long history and rich culture along with strategic location and abundance of national resources could

have enabled it to achieve a middle-income nation status alongside its other prosperous ASEAN

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Original Research Article 289

GREEN TOBACCO SICKNESS AND PROTECTIVE BEHAVIORSAMONG THAI TRADITIONAL TOBACCO FARMERS IN NORTHERN THAILAND

Thanusin Saleeon¹, Wattasit Siriwong^{1, 2, *}, Héctor Luis Maldonado-Pérez³, Mark Gregory Robson^{2, 3}

ABSTRACT:

Background: Thai traditional tobacco is mainly produced in Nan Province in the northern region of Thailand. Thai traditional tobacco (*Nicotiana Tabacum* L) is a non-Virginia type. Health consequences of traditional tobacco exposure include vomiting, nausea, headache, and dizziness that result from acute nicotine poisoning caused by dermal absorption of nicotine from mature tobacco plants, which is defined as Green Tobacco Sickness (GTS). Farmers' use of protective equipment may be important to protect them from such negative health effects.

Methods: This study aimed to characterize the association between GTS and use of personal protective equipment (PPE) among Thai traditional tobacco farmers in Nan province. A cross-sectional study was conducted with 473 Thai traditional tobacco farmers in Praputthabath sub-district and Phatow sub-district in Nan province. The farmers were randomly selected and subsequently interviewed using standardized questionnaires. Chi-square and Fisher's exact tests were employed to examine relationships between the dependent and independent variables.

Results: GTS was statistically significantly associated with farmers' uses of personal protective equipment (PPE) such as plastic aprons and masks and farmers' good practice of changing wet clothes after work that the direction of association mean the farmers who wore a plastic apron or mask had risk of GTS lower than who did not use it and changing wet clothes was risk of GTS lower than in who did not change. However, GTS risk was not related to use of gloves. It is worth noting that almost all of the farmers used rubber latex gloves. This might paradoxically increase nicotine absorption due to the hot climate promoting sweating on the farmers' hands. A number of famers always tried to use some form of self-protection to protect themselves from nicotine exposure while working, even though some of the PPE they chose may not be effective enough to protect them from GTS. For example, some farmers believed that wearing rubber latex gloves or plastic gloves would be helpful when in fact these gloves could not offer them protection from exposure to nicotine.

Conclusions: Based on the study finding of strong difference association between good practices of wearing mask, plastic apron, changing wet clothes after work and GTS, it is recommended that such practice should be promoted among Thai traditional tobacco farmers.

Keywords: Green tobacco sickness, Personal protective equipment, Thai traditional tobacco farmers, Thailand

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INTRODUCTION

Tobacco farming is associated with the hazard of green tobacco sickness (GTS). This is caused by

* Correspondence to: Wattasit Siriwong E-mail: wattasit.s@chula.ac.th nicotine which penetrates through the skin of the hands of workers who cultivate and harvest tobacco [1-3]. Green tobacco sickness (GTS) is an occupational illness reported by tobacco workers worldwide [4-7]. Earlier studies have pointed out that dermal absorption of nicotine from plant

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