

Research Issues in Child Health and Child Care

Proceedings of a workshop held in Accra, Ghana, 22–26 September 1986



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17995

IDRC-266e

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Editor: Fiona Mackenzie

Associate Editor: Kodwo Ewusi



Jointly organized by the International Development Research Centre and the Institute of Statistical, Social and Economic Research, University of Ghana

ARCHIV MACKE 1 no, 2 © International Development Research Centre 1988 Postal Address: P.O. Box 8500, Ottawa, Ont., Canada K1G 3H9

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IDRC-266e

Research Issues in Child Health and Child Care: proceedings of a workshop held in Accra, Ghana, 22-26 September 1986. Ottawa, Ont., IDRC, 1988. viii + 118 p.: ill.

/Child care/, /health/, /child mortality/, /West Africa/ - /research methods/, /organization of research/, /vital statistics/, /human nutrition/, /women's status/, /primary health care/, /health indicators/, /measurement/, /research needs/, /data collecting/, /conference reports/, /lists of participants/, references.

UDC: 613-053.2 ISBN: 0-88936-523-7

A microfiche edition is available.

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Abstract

This workshop brought together West African health scientists and social scientists to discuss methodological and conceptual issues in the study of infant and child health and mortality, and to identify new research needs. Health and social scientists from the Gambia, Ghana, Nigeria, and Sierra Leone attended the workshop. Emphasis was placed on evaluation of research design and procedures for analyzing the determinants of child health rather than on the presentation of findings. Discussions and papers focused on four central themes: conceptual frameworks more appropriate to local contexts, questions of scale and measurement, the search for indicators of child health, and directions for future interdisciplinary research. This publication is intended to serve as a record of the proceedings of the workshop and to promote further communication and interaction among researchers working in the area of infant and child mortality and health.

Résumé

Cet atelier réunissait des spécialistes de la santé et des sciences sociales de l'Afrique occidentale qui ont discuté de problèmes méthodologiques et conceptuels liés à l'étude de la santé et de la mortalité du nouveau-né et de l'enfant, et qui ont cerné de nouveaux besoins en matière de recherche. Des spécialistes des sciences de la santé et des sciences sociales de la Gambie, du Ghana, du Nigéria et de la Sierra Leone y participaient. On a mis l'accent sur l'évaluation de la conception de la recherche et sur les procédures d'analyse des déterminants de la santé des enfants, plutôt que sur la présentation des conclusions de travaux de recherche. Les discussions et les communications ont porté sur quatre grands thèmes : paramètres conceptuels mieux adaptés au contexte local, questions d'envergure, la recherche d'indicateurs de la santé des enfants et les orientations futures de la recherche interdisciplinaire. Cette publication a pour objet de faire le compte rendu des délibérations et en même temps de promouvoir la communication et les interactions entre les chercheurs dans le domaine de la mortalité et de la santé des nouveau-nés et des enfants.

Resumen

Este taller reunió a científicos del campo de la salud y las ciencias sociales para discutir cuestiones conceptuales y metodológicas en el estudio de la salud y mortalidad infantiles y para identificar nuevas necesidades investigativas. Asistieron al taller científicos de la salud y las ciencias sociales de Gambia, Ghana, Nigeria y Sierra Leona. Se hizo más énfasis en la evaluación del diseño y los procedimientos investigativos para analizar los determinantes de la salud infantil que en la presentación de los resultados. Las discusiones y documentos se centraron en cuatro temas: marcos de trabajo conceptuales más apropiados para los entornos locales, cuestiones de escala y medición, búsqueda de indicadores de salud infantil y pautas para la investigación interdisciplinaria futura. El propósito de esta publicación es el de registrar las sesiones del taller y promover una mayor comunicación e interacción entre los investigadores que trabajan en el campo de la salud y mortalidad infantiles.

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Problems with the conceptual framework in relation to the estimation of mortality levels revolve around the appropriate model life table to be selected as this affects the estimated infant mortality rate. For example, in the case of Sierra Leone, the infant mortality rate obtained from the 1974 census results ranged from 206 to 241 depending on whether the South, North, or West family of model life tables was used. The study also failed to explain regional differences in mortality levels in terms of differences in social, economic, and environmental variables that were similar for most of the communities because they were largely rural.

Suggestions for future research include action-program oriented surveys to assess their impact on infant and child mortality, and micro-approaches to enable a more realistic conceptual framework to be formulated.

Culture and Health: Lessons from Data Collection on Child Health in Chana

S.R. Ubomba-Jaswa

Many intervention programs and projects, which aim to reduce high levels of infant and child morbidity and mortality, are implemented without adequately considering people's beliefs and attitudes toward health issues. Thus, it is not surprising that health services may be underutilized, health and nutrition instructions may be ignored, and immunization programs shied away from.

With the aim of identifying more clearly the relationship between cultural values and child health practices, research was conducted in the urban district of Nsawam (population 31,900 in 1984) and the rural area of Dobro (population 679 in 1984) in Ghana during the first half of 1986. The specific objectives of the research were:

- to establish mothers' level of knowledge and use of health services;
- to ascertain maternal attitudes and beliefs on preventive health measures;
- to identify child eating patterns;
- to identify patterns of child disease; and
- to gauge maternal perceptions on childhood mortality.

The research was based on a household sample survey in which mothers aged 15-45 years who had had at least one live birth in the past 10 years were interviewed. A questionnaire comprising both structured and unstructured questions was used to collect basic data. In addition, in-depth interviews were conducted with health workers in government-run child-welfare centres, in well-baby clinics, and nutrition-demonstration classes. Markets were visited to find out how mothers combine work and child care. Observations of child-care practice were recorded as the questionnaires were administered.

Issues that arose from the research included:

- Choice of fieldworker. The sex and age of the fieldworker, whether recruited from the community under research or from outside, and whether from the field of health or social work or from another field were considered critical variables in the selection process.
- Necessity of prior knowledge of a group's culture in constructing a questionnaire to obtain the answers sought from the questions asked. The local classification of disease is particularly significant here. For example, respondents in the survey area did not consider diarrhea in a child under 1 year to be an illness; it was viewed as part of the teething process.
- Reflection of cultural values in responses to the questionnaire. In this context, responses to general questions must be probed to identify more precisely the role of cultural factors. For example, in addition to questions on the duration of breastfeeding and whether it is full or partial, questions such as why mothers breastfeed, how they measure an infant's satisfaction, and how they ensure adequate nutrition for themselves, should be pursued.
- The benefit of combining different data collection methods. During the survey, in addition to questions on weaning practices, observations were made and data collected on household cooking and eating patterns, for example. In this way, a more complete picture of childhood nutrition could be obtained.
- The relationship between low acceptance and high drop-out rates from immunization to the ineffectiveness of measles vaccine.

Infant Mortality and Second-year Death Rates in The Gambia, 1973 and 1983, and a Vaccination Compliance Survey

M. Yamuah

In the 1970s, the Gambia had one of the highest infant mortality rates in Africa, 217/1000 in 1973. It had dropped to 160/1000 according to the 1983 census, but remained very high. During this same period, the 2nd-year death rate dropped from 68 to 41/1000. Infant and child mortality remains an area of central concern to public health officials and the focus of attention of the Primary Health Care (PHC) program.

In this context, the present research aimed to discuss mortality differentials to identify the determinants of mortality; to illustrate some problems that hinder rapid health improvement in the Gambia; and to discuss the methodology of a Vaccination Compliance Survey as a basis for future research.

On the basis of indirect estimates from census data and longitudinal studies conducted in the Gambia, educational, regional, and religious differentials are discussed. The arguments support the view that mothers' education plays an important role in child health as it brings awareness about health hazards and preventive medicine. In 1983 in the Gambia, only 14% of females over age 10 years were literate; evidence suggests that the high degree of illiteracy explains in part the high infant and 2nd-year mortality rates.