

WHO recommendations on
home-based records
for maternal, newborn and child health*

Web annex B. Characteristics of included studies,
key informants and related documents.

* The full guideline document is available at:
<http://apps.who.int/iris/bitstream/handle/10665/274277/9789241550352-eng.pdf>



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Acronyms and abbreviations

ANC	antenatal care
CPHR	child personal health record
cRCT	cluster randomized controlled trial
DTP1	diphtheria-tetanus-pertussis immunization 1 dose
ePHR	electronic personal health record
EPI	Expanded Programme on Immunization
HBR	home-based record
JICA	Japan International Cooperation Agency
JSI	John Snow, Inc.
MCH	maternal and child health
PCEHR	personally controlled electronic health record
RCT	randomized controlled trial
RTH	Road to Health
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund

Characteristics of included studies

Magwood O, Kpade V, Thavron K, Oliver S, Mayhew A, Pottie K. Effectiveness of home-based records on maternal, newborn and child health outcomes: a systematic review and meta-analysis. 2018b (submitted for publication).

Study	Study design	Population	Location	Description of home-based record (HBR)	Intervention/comparison	Outcomes	Type of HBR
Bjerkeli Grøvdal, Grimsmo & Nilsen (2006)	RCT	Children 6 weeks to 5 years old Intervention (n=155) Comparison (n=154)	Norway	Parent-held child health record Child health HBR including focuses on immunization, child development and health care appointments.	Intervention: Given a parent-held child health record. Comparison: Not given a parent-held child health record.	Child health outcomes: Parents' knowledge about child health matters and illness Health service outcomes: Communication between caregivers and health care providers Other: Health care utilization	Paper-based record Multi-focus No health education component
Dagvadorj et al. (2017)	cRCT	Pregnant women living in the Bulgan province of Mongolia Intervention (n=214) Comparison (n=172)	Mongolia	Maternal and child health (MCH) handbook Maternal, newborn and child health HBR including focuses on pregnancy, delivery, postpartum health, child growth and development, immunization, dental health.	Intervention: Received the MCH handbook at the beginning of the study observational period. Comparison: Received the handbook after a delay of 7 months.	Child health outcomes: Risk of developmental delay	Paper-based record Multi-focus Health education component
Elbourne et al. (1987)	RCT	Pregnant women less than 34 weeks' gestation Intervention (n=161) Comparison (n=156)	England, United Kingdom	Women-held obstetric case notes Maternal health HBR focused on antenatal and delivery care.	Intervention: Held their own obstetric case notes until 10 days after delivery. Comparison: Held a cooperation card (abbreviated version of the full record) while the medical records department held their full case notes.	Maternal health outcomes: Antenatal care (ANC) visits; smoking; baby's father's involvement Newborn health outcomes: Immediate and continued breastfeeding Health service outcomes: Patient satisfaction; patient control; communication between women and health care providers Other: Likelihood of depression; use of analgesia; duration of labour; savings of clerical resources	Paper-based record Single-focus No health education component

Study	Study design	Population	Location	Description of home-based record (HBR)	Intervention/comparison	Outcomes	Type of HBR
Homer, Davis & Everitt (1999)	RCT	Pregnant women attending the hospital clinic for their first ANC visit Intervention (n=74) Comparison (n=76)	Australia	Women-held antenatal record Maternal health HBR focused on antenatal and delivery care.	Intervention: Retained their entire antenatal record through pregnancy. Comparison: Held a small, abbreviated card. The complete antenatal record was held by the hospital (standard practice).	Health service outcomes: Feeling of control and women's satisfaction during pregnancy	Paper-based record Single-focus No health education component
Lakhani et al. (1984)	RCT	Mothers discharged from obstetric wards Intervention (n=157) Comparison (n=142)	England, United Kingdom	Child health booklet Child health HBR including focuses on child growth and development, health care appointments, immunization, illness management.	Intervention: Given home-based child health booklet. Comparison: Not given the health booklet.	Child health outcomes: Health education (knowledge of child health) Health service outcomes: Communication between caregivers and health care providers; continuity of care Other: Communication between professionals	Health booklet Paper-based record Multi-focus No health education component
Lovell et al. (1987)	RCT	Pregnant women Intervention (n=115) Comparison (n=120)	London, United Kingdom	Women-held maternity case notes Maternal health HBR focused on antenatal and delivery care.	Intervention: Women were given their maternity case notes to keep with them until delivery. Comparison: Women carrying cooperation cards (standard care) and whose maternity case notes remained at the hospital.	Maternal health outcomes: ANC visits; smoking; consumption of alcohol; maternal complications and mortality; involvement of the babies' fathers Newborn health outcomes: Immediate and continued exclusive breastfeeding; involvement of the babies' fathers Health service outcomes: Satisfaction of care given, sense of control and self-confidence; communication between women and health care providers Other: Mode of delivery	Paper-based record Single-focus No health education component

Study	Study design	Population	Location	Description of home-based record (HBR)	Intervention/comparison	Outcomes	Type of HBR
Moore et al. (2000)	Randomized controlled 2-phase trial	Children with severe and obvious disabilities referred from the local Education Department Intervention (n=67) Comparison (n=32)	Leicestershire, United Kingdom	Child health record supplement for children with disability (used in conjunction with existing Child Health Record/Red Book) Child health HBR including focuses on child disability and illness management, health care appointments, and information about relevant organizations (although child health record as a whole has multiple foci).	Intervention: Given child health record for children with disability as a supplement to the Leicestershire child health record. Comparison: Not given a child health record supplement. Used existing general child health record.	Health service outcomes: Usability, value, perception of health care received; communication between the family and health care providers	Paper-based record Single-focus No health education component
Mori et al. (2015)	cRCT	Pregnant women living in the Bulgan province of Mongolia Intervention (n=253) Comparison (n=248)	Mongolia	Maternal and child health (MCH) handbook Maternal, newborn and child health HBR including focuses on pregnancy, delivery, postpartum health, child growth and development, immunization, dental health.	Intervention: Received the MCH handbook at the beginning of the study observational period. Comparison: Received the MCH handbook after a delay of 7 months.	Maternal health outcomes: ANC visits; health seeking behaviours; maternal physical and mental health Newborn health outcomes: Neonatal health and healthy behaviours (not specified) Health service outcomes: Communication between women/caregivers and health care providers	Paper-based record Multi-focus Health education component

Study	Study design	Population	Location	Description of home-based record (HBR)	Intervention/comparison	Outcomes	Type of HBR
Osaki et al. (2018)	cRCT	All eligible pregnant women registered at randomly selected health centres in Garut district of West Java, Indonesia. Intervention respondents at analysis (n=183) Comparison respondents at analysis (n=271)	Java, Indonesia	Maternal and child health (MCH) handbook Maternal, newborn and child health HBR including focuses on pregnancy, delivery, postpartum health, child growth and development, immunization, dental health.	Intervention: (1) Received the MCH handbook at the beginning of the study observational period; (2) competency-based orientation and job-aids for health care workers and volunteers; and (3) monthly health staff meetings to monitor the usage of the MCH handbook. Comparison: Not given an MCH handbook. At baseline, the district had a very low coverage of MCH handbook (10 000 handbooks for 48 590 pregnancies in the district in 2006) and no systematic orientation for volunteers and health care workers.	Maternal health outcomes: ANC visits; maternal immunization; professional delivery care; maternal complications in pregnancy, intrapartum and postpartum; care-seeking; family's active handbook use Newborn health outcomes: Exclusive breastfeeding for 6 months, complementary feeding after 6 months; neonatal complications; newborn care-seeking; knowledge of newborn health Child health outcomes: Childhood illness; home care for childhood illness; anthropometric measurement including underweight and stunting; child health care-seeking; knowledge of child health Other: Child vitamin A intake; anthropometric measurement of mother; health staff and volunteers' active handbook use	Paper-based record Multi-focus Health education component
Stille et al. (2001)	Controlled trial	Infants born at any hospital in Hartford who presented for their first well-child visit at one of three sites under 28 days of age, and who were with their mother or other primary caregiver Intervention (n=156) Comparison (n=159)	United States of America (USA)	Graphic immunization card Child health HBR focused on immunization primary series completion. Interactive HBR with spaces for stickers for each immunization and information about vaccination schedule.	Intervention: Received (standard) routine information about immunizations. Also given (1) graphic immunization card; (2) explanation of the card by the provider in the provider's own words and answering of any caregiver questions. Comparison: Received routine information about immunizations.	Child health outcomes: Immunization status (vaccination initiation and series completion)	Paper-based record Single-focus Health education component

Study	Study design	Population	Location	Description of home-based record (HBR)	Intervention/comparison	Outcomes	Type of HBR
Usman et al. (2009)	RCT	Children visiting the selected Expanded Programme on Immunization (EPI) centres for diphtheria-tetanus-pertussis immunization 1 dose (DTP1)	Urban Pakistan	<p>Immunization card (redesigned)</p> <p>Child health HBR focused on immunization.</p> <p>A new and simpler immunization card, the most important function of which was to remind mothers of each immunization visit. Once folded, next immunization date was printed on cover in large font, all other information inside. Given in plastic jacket with hanging string.</p>	<p>Intervention: Given redesigned immunization card and/or centre-based education session. The centre-based education was a 2- to 3-minute conversation with mother to convey the importance of completing the immunization schedule and to explain the potential adverse impact of incomplete immunization on child's health.</p> <p>Comparison: Given the existing old immunization card (smaller card when folded, so information can be crowded; entries handwritten by staff rather than printed).</p>	<p>Child health outcomes: Immunization status (vaccination initiation and series completion)</p>	<p>Paper-based record</p> <p>Single-focus</p> <p>Health education component</p>

Study	Study design	Population	Location	Description of home-based record (HBR)	Intervention/comparison	Outcomes	Type of HBR
Usman et al. (2011)	RCT	Children visiting the selected EPI centres for DTP1 Redesigned card (n=378) Education (n=376) Redesigned card + Education (n=374) Standard care only (n=378)	Rural Pakistan	Immunization card (redesigned) Child health HBR focused on immunization. A new and simpler immunization card, the most important function of which was to remind mothers of each immunization visit. Once folded, next immunization date was printed on cover in large font, all other information inside. Given in plastic jacket with hanging string.	Intervention: Given redesigned immunization card and/or centre-based education session. The centre-based education was a 2- to 3-minute conversation with mother to convey the importance of completing the immunization schedule and to explain the potential adverse impact of incomplete immunization on child's health. Comparison: Given the existing old immunization card (smaller card when folded so information can be crowded; entries handwritten by staff rather than printed).	Child health outcomes: Immunization status (vaccination initiation and series completion)	Paper-based record Single-focus Health education component
Yanagisawa et al. (2015)	Controlled trial	Women who had given birth 1 year before the survey Intervention (n=320) Comparison (n=320)	Rural Cambodia	Maternal and child health (MCH) handbook Maternal, newborn and child health HBR including focuses on pregnancy, delivery, postpartum health, child growth and development, immunization, dental health.	Intervention: Received the Cambodian version of the MCH handbook based on the Japanese and Indonesian versions. Comparison: Received the standard Cambodian Child Health Card (child growth card) and Mother Health Record. Also received the tetanus immunization card and the vitamin A intake record.	Maternal health outcomes: ANC visits; childbirth with a skilled birth attendant or in a health facility; maternal knowledge of danger signs during pregnancy and delivery Newborn health outcomes: Immediate and continued exclusive breastfeeding Child health outcomes: Child immunization (vaccination initiation and series completion) Other: Prevention of anaemia, intestinal parasites, mother-to-child HIV transmission	Paper-based record Multi-focus Health education component

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Characteristics of included studies

Magwood O, Kpade V, Afza R, Oraka C, McWhirter J, Oliver S, et al. Understanding women's, caregivers', and providers' experiences with home-based records: a WHO systematic review of qualitative studies. 2018a (submitted for publication).

Study	Study design	Population (qualitative component)	Location	Description of home-based record (HBR)	Outcomes	Type of HBR
Byczkowski, Munafo & Britto (2014)	Mixed-methods 1. Cross-sectional telephone survey including two open-ended questions (n=350) 2. Semi-structured interviews to ascertain reasons for not using the portal (n=15)	Parents of children with chronic conditions (diabetes, juvenile idiopathic arthritis and cystic fibrosis)	USA	Web-based child health portal A secure web-based child health HBR through which parents can access laboratory results, medication information and their child's visit history	Perceptions of the usability and value of the web-based portal Concerns about using a web-based portal to access their child's health record	eRecord Single-focus No health education component
Clendon & Dignam (2010)	Descriptive retrospective Oral history of participants' experience with the HBR (n=35)	Caregivers and nurses 34 women; 1 man Aged 30–82 years	New Zealand	Child health and development record books ("Plunket book") Child health HBR focusing on child growth immunization, development, care-seeking and illness management	Societal role and impact of the child health and development record book in New Zealand since its introduction in 1920s	Paper-based record Multi-focus Health education component
Grippe & Fracolli (2008)	Mixed methods Semi-open interview form with open-ended questions (n=89)	Family caregivers responsible for children aged 0–59 months Selected from peripheral regions with high population growth, large populations of children, and worse life conditions, income and education	Brazil	Child health booklet Booklet that presents topics related to children's development, including pregnancy, healthy child care practices and child development	Effectiveness Relatives' perception Acceptance of the booklet Family's understanding of underlying concepts of the booklet	Paper-based record Multi-focus Health education component

Study	Study design	Population (qualitative component)	Location	Description of home-based record (HBR)	Outcomes	Type of HBR
Hagiwara et al. (2013)	<p>Mixed methods</p> <p>1. Knowledge, attitudes and practice survey done pre- and post-intervention (intervention n=260/270 and control n=70/70)</p> <p>2. Focus-group discussions (n=42 women (35 users; 25 providers)</p>	Women (users and non-users of handbook) and health professionals	The occupied Palestinian territory, including east Jerusalem, oPt	<p>Maternal and child health (MCH) handbook</p> <p>Maternal, newborn and child health HBR including focuses on pregnancy, delivery, postpartum health, child growth and development, immunization, dental health</p>	<p>Subjective impact and satisfaction</p> <p>Constraints of handbook use</p> <p>Communication between women/caregivers and health care providers</p>	<p>Paper based record</p> <p>Multi-focus</p> <p>Health education component</p>
Hamilton & Wyver (2012)	<p>Mixed methods</p> <p>1. Online survey with open-ended and Likert scale questions (n=120)</p> <p>2. Semi-structured in-depth interviews (n=6)</p>	Mothers with at least one child 0–4 years old who received a New South Wales child personal health record (CPHR) when the child was born	Australia	<p>CPHR/Blue Book</p> <p>Child health HBR focusing on immunization, growth, development, care-seeking and illness management</p>	<p>Parental engagement with CPHR</p> <p>Parental knowledge</p> <p>Experiences of first-time parents vs parents with more than one child</p> <p>Role of CPHR in sharing information with health care providers</p>	<p>Paper-based record</p> <p>Multi-focus</p> <p>Health education component</p>
Harrison et al. (1998)	<p>Descriptive prospective</p> <p>1. Interviews with health personnel (n=35) and mothers (n=150) using open-ended questions</p> <p>2. Examination of Road-to-Health (RTH) cards for accuracy and completeness (n=150 cards)</p>	<p>Health personnel at child health clinics, mothers/ caregivers</p> <p>From 17 child health clinics</p>	South Africa	<p>RTH card</p> <p>Revised version of the RTH card focusing on immunization, child growth and development</p>	<p>Opinions of health personnel and parents on the RTH card</p> <p>Accuracy and completeness of data recorded on the present RTH card</p> <p>What information would staff and parents like to record?</p>	<p>Paper-based record</p> <p>Multi-focus</p> <p>Health education component</p>
Hully & Hyne (1993)	<p>Qualitative</p> <p>Semi-structured questionnaire with open-ended questions (n=18)</p>	Parents of children from the paediatric oncology unit	United Kingdom	<p>Parent-held records for children</p> <p>Child health HBR focusing on child illness and illness management</p>	<p>User perspectives of efficiency of the parent/ child-held record</p>	<p>Paper-based record</p> <p>Single-focus</p> <p>No health education component</p>

Study	Study design	Population (qualitative component)	Location	Description of home-based record (HBR)	Outcomes	Type of HBR
Hunter et al. (2008)	Qualitative Semi-structured and face-to-face interviews (n=12)	Residential care workers (professionals involved in the care of children in residential care)	United Kingdom	British Association for Adoption and Fostering health record A child health HBR adapted from the standard Child Personal Health Record/ Red Book for children in residential care, focusing on immunizations and care-seeking, including appointments	Explore why shared documentation was not used routinely Perceptions of residential care workers	Paper-based record Multi-focus No health education component
Kelly, Hoonakker & Dean (2016)	Mixed methods Open-ended questions that were included in the survey questionnaire (n=90)	Parents of children during a child's hospital stay	USA	Electronic health record Child health HBR as an inpatient portal application on a tablet that provides information about a child's hospital stay	Parent use of portal application Perceptions of the portal application	eRecord Single-focus Health education component
King et al. (2017)	Mixed methods 1. Collection of portal log-in information 2. Survey with caregivers (pre n=15; post n=11) 3. Interview or focus group discussion (pre n=11 caregivers and providers; post n=10 caregivers and providers)	Caregivers and health care providers at a children's rehabilitation hospital	Canada	Connect2care – online portal An electronic child HBR for children at a large rehabilitation hospital focusing on access to records and e-messaging staff	Use of portal Utility of portal Impact of portal	Web-based record Single-focus No health education component
Kitayama et al. (2014)	Qualitative study Focus groups discussions: two groups were led in English and two in Spanish (n=29)	Parents in an underserved, largely ethnic minority community All women	USA	Online Personal Health Record Online child HBR focusing on immunization	Desired characteristics of the online immunization record	Web-based record Single-focus No health education component

Study	Study design	Population (qualitative component)	Location	Description of home-based record (HBR)	Outcomes	Type of HBR
Lee et al. (2016)	<p>Qualitative study</p> <p>Semi-structured interviews at the time of patient discharge (n=40)</p> <p>Phase 1: Passport Program (n=10) and usual-care families (n=10)</p> <p>Phase 2: Passport Program (n=10) and usual-care families (n=10)</p>	<p>Spanish-speaking families with hospitalized children (phase 1)</p> <p>English-speaking minority families with hospitalized children (phase 2)</p>	USA	<p>Patient Passport Programme</p> <p>Child health HBR focusing on care-seeking and illness management for hospitalized children</p>	<p>Impact of the programme on patient-provider communication</p> <p>Health care experience of families</p> <p>Satisfaction of families</p>	<p>Paper-based record</p> <p>Single-focus</p> <p>No health education component</p>
O'Connor et al. (2016)	<p>Qualitative case study</p> <p>1. Interviews with staff (n=11)</p> <p>2. Focus group discussions with parents (n=12) and health visitors (n=10)</p> <p>3. Review of documentation for 32 projects</p>	Parents and health visitors with experience of the eRedBook	United Kingdom	<p>Personal Child Health Record (eRedBook)</p> <p>Digital version of the standard United Kingdom child HBR focusing on immunization, growth, development, care-seeking and illness management</p>	<p>Barriers to health visitors engaging and recruiting parents to the eRedBook</p>	<p>Web-based record</p> <p>Multi-focus</p> <p>No health education component</p>
Phipps (2001)	<p>Qualitative study</p> <p>Face-to-face interview based on semi-structured questionnaires (n=21)</p>	English-speaking pregnant women in their second or third trimester who attended an ANC clinic at least twice	Australia	<p>Women-held ANC card</p> <p>Women carrying their medical records throughout pregnancy</p>	<p>Feeling of patient control</p> <p>Feeling able to participate fully in decision-making</p> <p>Communication between women and health care providers</p> <p>Perceived quality of care</p> <p>Unintended consequences</p> <p>Negative consequences</p>	<p>Paper-based record</p> <p>Single-focus</p> <p>No health education component</p>
Quinlivan, Lyons & Peterson (2014)	<p>Mixed methods</p> <p>Surveys collecting both quantitative and qualitative data (n=474)</p>	Obstetric patients	Australia	<p>Women's personally controlled electronic health record (PCEHR) system</p> <p>A series of secure systems that consolidates information from multiple sources (government websites) into a single record</p>	<p>Antenatal patients' preferred medical record system</p> <p>Perceived benefits of PCEHR</p> <p>Perceived concerns about PCEHR (compared with existing hospital-based records or patient-held paper records)</p>	<p>Web-based record</p> <p>Single-focus</p> <p>No health education component</p>

Study	Study design	Population (qualitative component)	Location	Description of home-based record (HBR)	Outcomes	Type of HBR
Sharp et al. (2014)	<p>Mixed methods</p> <p>Semi-structured interviews with open-ended question asking for further information</p> <p>Childhood cancer survivors (n=4)</p> <p>Caregivers (n=11)</p> <p>Survivor-caregiver dyads (n=5)</p>	Childhood cancer survivors (< 14 years old) and their caregivers	USA	<p>Electronic personal health record (ePHR) (paediatric)</p> <p>Electronic health records that the cancer survivor controls or personally manages available on a secure electronic form accessible through the internet</p>	<p>Knowledge about ePHRs</p> <p>Interest in and attitude towards ePHRs</p>	<p>Web-based record</p> <p>Single-focus</p> <p>No health education component</p>
Yanagisawa et al. (2015)	<p>Mixed methods</p> <p>Guided individual interviews with multiparous women (n=20)</p> <p>Midwives and nurses (n=8)</p> <p>Village health volunteers and traditional birth attendants (n=10)</p> <p>In Khmer, later translated to English</p>	Multiparous women, various health care workers involved in maternity care	Cambodia	<p>Maternal and child health (MCH) handbook</p> <p>Maternal, newborn and child health HBR including focuses on pregnancy, delivery, postpartum health, child growth and development, immunization, dental health</p>	<p>Cultural appropriateness of MCH handbook</p> <p>Potential obstacles to implementation</p> <p>Potential side-effects of implementation</p>	<p>Paper based record</p> <p>Multi-focus</p> <p>Health education component</p>

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Characteristics of key informants

Broaddus E, Mahadevan S, Vogel J. Framework analysis of the facilitators and barriers to the appropriate use of home-based records. 2018.¹

ID	Expertise	Gender	Agency	Level	Country familiarity	Type of familiarity with home-based records (HBR) ²
R1	MCH Programme Expert and Advisor	F	Japan International Cooperation Agency (JICA)	International	Afghanistan, Angola, Burundi, Cambodia, Cameroon, China, Gabon, Ghana, India, Indonesia, Kenya, Lao People's Democratic Republic, Micronesia (Federated States of), Myanmar, occupied Palestinian territory, including east Jerusalem, oPt, Philippines, Rwanda, Senegal, Tajikistan, Thailand, Timor-Leste, Uganda, Viet Nam	Multi-focus
R2	MCH Programme Expert	M	United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA)	International	Jordan, Lebanon, occupied Palestinian territory, including east Jerusalem, oPt, Syrian Arab Republic	Multi-focus
R3	MCH Programme Expert	M	Ministry of Health/ National Assembly	Country	Madagascar	Multi-focus
R4	Midwifery Specialist	F	United Nations Population Fund (UNFPA)	Country	Bangladesh, India, Rwanda, Sierra Leone, Somalia	Single-focus
R5	MCH Programme Expert and Director	F	John Snow, Inc. (JSI)	Country	Nepal	Single-focus
R6	MCH Programme Expert and Advisor	F	JICA	International	Ghana, Jordan, Lebanon, occupied Palestinian territory, including east Jerusalem, oPt, Syrian Arab Republic	Multi-focus
R7	Midwifery Specialist and Programme Analyst	F	UNFPA	Country	Pakistan	Multi-focus
R8 ³	Midwifery Specialist and Provincial Reproductive, Maternal, Newborn and Child Health Programme Coordinator	F + M	UNFPA/Ministry of Health	Country	Zambia	Multi-focus
R9	Midwifery Specialist	F	UNFPA	Country	Ethiopia	Multi-focus
R10	Senior Immunization Technical Officer	F	JSI	International	Benin, Cameroon, Democratic Republic of the Congo, Ghana, India, Kenya, Madagascar, Nepal, Nigeria, United Republic of Tanzania, Zimbabwe	Multi-focus
R11	MCH Programme Expert	F	JSI	International	Ethiopia, Ghana, Liberia, Madagascar	Multi-focus
R12	Immunization Programme and Maternal, Newborn and Child Health Expert	F	JSI	International	Bangladesh, Ethiopia, Madagascar	Multi-focus

¹ Final report and references available from the WHO Department of Maternal, Newborn, Child and Adolescent Health. Please contact: mncah@who.int

² Indicates most recent experience with HBR. Most respondents had experienced different types of records over time and/or in different countries, and they spoke drawing on this experience.

³ This was a paired interview with a specialist and her deputy.

Characteristics of documents

Broaddus E, Mahadevan S, Vogel J. Framework analysis of the facilitators and barriers to the appropriate use of home-based records. 2018.¹

Author and date	Title	Document type	Source	Country focus	Type of HBR
Aboagye (2016)	Progress of development of MCH record book in Ghana	Poster presentation	Ghana Health Service, JICA	Ghana	Multi-focus
Aiga (2013)	Self-monitoring child nutrition status through MCH handbook	Technical brief	JICA	Viet Nam	Multi-focus
Anya (2017)	Home based records context in the African region	Presentation	Workshop organized by WHO, UNICEF, Bill & Melinda Gates Foundation, in Kampala, Uganda – 21–24 February 2017		Single- and multi-focus
BASICS II Project for United States Agency for International Development (USAID) (2004)	Improving family health using an integrated community-based approach	Technical report	JSI	Madagascar	Multi-focus
Bill & Melinda Gates Foundation, United Nations Children's Fund (UNICEF) & Claro Partners (2016)	Home-based records revitalization workshop report	Presentation	Bill & Melinda Gates Foundation, Claro Partners, UNICEF	Afghanistan, India, Nepal, Pakistan	Single- and multi-focus
Gazi (2003)	Assessment of retention, perceived usefulness, and use of family health card in the Bangladesh Health and Population Sector Programme	Working paper	International Centre for Diarrhoeal Disease Research, Bangladesh, Centre for Health and Population Research, Dhaka	Bangladesh	Multi-focus
Hagiwara (2017)	Development of new combined maternal and child health record book in Ghana: background, achievement and way forwards	Project outline/ proposal	JICA	Ghana	Multi-focus
Hagiwara (2017)	MCH handbook for refugees	Presentation	JICA	Jordan, Lebanon, Syrian Arab Republic, West Bank and Gaza Strip	Multi-focus
Hagiwara (2017)	What is maternal and child health (MCH) handbook? Introduction of MCH handbook to Ghana	Report	JICA	Ghana	Multi-focus

¹ Final report and references available from the WHO Department of Maternal, Newborn, Child and Adolescent Health. Please contact: mncah@who.int

Author and date	Title	Document type	Source	Country focus	Type of HBR
JSI (2016)	Country experiences with home-based records	Presentation	JSI, Bill & Melinda Gates Foundation	24 different countries in Africa and Asia	Single- and multi-focus
JSI (2017)	Home-based record redesigns that worked: lessons from Madagascar & Ethiopia	Case study	JSI	Ethiopia, Madagascar	Multi-focus
Kanda (2017)	Child health handbook put in app for refugees in Jordan	Newspaper article	<i>The Asahi Shimbun</i> , Japanese National Newspaper	Jordan	Multi-focus
Ministry of Health Cameroon (2017)	Home based records revitalisation workshop: preparation work questionnaire Cameroon	Presentation	Workshop organized by WHO, UNICEF, Bill & Melinda Gates Foundation, in Kampala, Uganda – 21–24 February 2017	Cameroon	Multi-focus
Ministry of Health Ethiopia (2017)	Home based record revitalization workshop: presentation by Ethiopian Team	Presentation	Workshop organized by WHO, UNICEF, Bill & Melinda Gates Foundation, in Kampala, Uganda – 21–24 February 2017	Ethiopia	Single-focus
Ministry of Health Liberia (2017)	Home based records revitalisation workshop: preparation work questionnaire Liberia	Presentation	Workshop organized by WHO, UNICEF, Bill & Melinda Gates Foundation, in Kampala, Uganda – 21–24 February 2017	Liberia	Single-focus
Ministry of Health Madagascar (2008)	Enquete sur la couverture vaccinale (Survey on vaccine coverage), Madagascar	Survey report	MCH Department, Madagascar Ministry of Health	Madagascar	Single-focus
Omar & Sugishita (2016)	Kenya: what mothers have MCH booklet?	Technical brief	JICA	Kenya	Multi-focus
Rane (2016)	Redesigning the immunization card for an Indian context	Blog post	Indian Institute of Technology Bombay	India	Single-focus

carnet de santé

MATERNAL AND CHILD HEALTH BOOK

cartillas nacionales de salud

family health book

carte de vaccination

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child health and development passport

CARTÃO DE SAÚDE INFANTILE

road to health booklet

CHILD HEALTH RECORD

CHILD HEALTH PROFILE BOOK

For further information, please contact:

World Health Organization
20 Avenue Appia, 1211 Geneva 27
Switzerland

Department of Maternal, Newborn, Child and Adolescent Health (MCA)
E-mail: mncah@who.int
Website: www.who.int/maternal_child_adolescent/en/

Department of Immunization, Vaccines and Biologicals (IVB)
E-mail: vaccines@who.int
Website: www.who.int/immunization/documents

Department of Reproductive Health and Research (RHR)
E-mail: reproductivehealth@who.int
Website: www.who.int/reproductivehealth