

• 系統編號	RN9406-0544		
• 計畫中文名稱	產後家訪或電話諮詢對母嬰健康的成效評估		
• 計畫英文名稱	The Effects of Postpartum Home Visitation and Telephone Consultation on Maternal Child Health---The Second and Third year project		
• 主管機關	行政院國家科學委員會	• 計畫編號	NSC92-2314-B038-048
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• 中文關鍵字	產後照護; 護士家訪; 電話諮詢		
• 英文關鍵字	Postpartum care; Nurse home visitation program; Telephone consultation		
• 中文摘要	<p>懷孕生產對婦女而言是一大挑戰，產後階段更是女人生命成長過程及其角色轉變的關鍵時刻。但隨著我國全民健保的施行，產婦的住院天數銳減，醫療院所提供的照護勢必無法滿足個案的需求，因此社區內的產後照顧措施更形重要。本三年之研究計畫旨在透過實驗設計，藉護理人員家訪或電話諮詢服務，來提昇婦幼的健康，並作為基層保健醫療實證護理的佐證。採隨機對照設計（ Randomized Controlled Trial），以前後測縱貫式資料收集法（Longitudinal follow-up）比較不同社區支持方案的成效。每組個案在生產住院期間即接受問卷前測及生化、體脂之基準點測驗。本研究欲探討的社區支持方案介入性措施包括：護理人員家訪（實驗組 I）與電話護理諮詢指導（實驗組 II），以比較其與現有的產後照護模式（控制組）在婦幼健康狀況的差異情形。各實驗組個案將在出院 1 週內及產後第 1、3、6 個月分別接受護理人員之家庭訪視或電話訪問。為了解社區支持方案之成效，每組個案將再由公正第三者於產後第 1、6 個月分別進行問卷之後測及各生化值、體脂之測量。本文為進行第二年之結果報告。第一階段 9 名個案已追蹤至產後 18 個月，第二階段研究共收案三組各有 30 位個案，已完成產後 6 個月的追蹤。研究結果顯示，隨著時間的成長與經過介入後，發現三組個案在各項父母照護自我效能均有顯著提升，健康促進生活方式中的壓力與調適方面，產後 6 個月顯著優於產後 1 個月（$t=3.35$, $p<.01$），但在飲食與營養方面（$t=-3.29$, $p<.01$）與低脂飲食習慣（$t=-4.40$, $p<.000$）卻有下降情形，感受之社會支持亦較為降低（$t=-3.27$, $p<.01$）。三組分別於不同時間點，以單因子變異數分析檢定個案於產後關注、健康促進生活型態、社會支持、低脂飲食習慣、父母照護自我效能及產後憂鬱得分等之組間差異，結果發現在生產住院期間與產後 6 個月，三組間於上述變項均無顯著差異，但在產後 1 個月時，產後關注中的育嬰關注事項（$F=3.99$, $p<.05$）與健康促進生活型態的飲食與營養方面（$F=4.73$, $p<.05$）家訪組得分顯著高於電訪組。</p>		
• 英文摘要	The length of hospital stay for postpartum mothers and their newborn infants has been decreased since the implementation of NHI in Taiwan. A standard of		

care addressing the postpartum needs with a shortened hospital stay, however, has not been established. The purpose of this project is to explore the impact of nurse home visitation and telephone consultation programs on maternal child health, and to provide a research-demonstrated model on evidence-based nursing. The first 2 years of this three-year project is to utilize both descriptive correlational design and cohort. A total of 9 subjects were recruited from postpartum units in two hospitals in Taipei with separate data collection sections. These women were followed to develop standard care plans addressing the postpartum needs of mothers, newborns, and families. Another 122 subjects recruited from hospital chart reviews in their 1st, 3rd, 6th, 12th, 18th and 24th months postpartum were invited to validate set of instruments. This group has been followed to 18 month postpartum. Then, a total of 90 subjects were invited to participate at the second phase of this study to compare the effects of community support interventions: nurse home visitation and telephone consultation programs from birth to the children's second birthdays. Data only followed to 6 months postpartum were presented at this report. Results indicated that each domain of parent care self-efficacy and part of health promotion lifestyle were increased with time, and the home visitation and telephone consultation can have an impact on these matters. However, compare to one month postpartum, women at 6 month were less confine with healthy diet and low-fat habit; further, they also perceived less social support. Results revealed that "doing the month" ritual can play an important role on health promoting lifestyle. No significant finding was found on the effect of community postpartum care among 3 groups. However, one month postpartum, women in home visit group did show more infant concern and better nutrition behaviors than telephone consultation group. Results of the correlation analysis demonstrated the necessary of scientific measures in effects of community postpartum care.