

ABSTRACT

The continuum of care is an important approach to be prioritized for improving maternal health. The current maternal mortality of Myanmar is still high and needs to be lowered to meet the SDG targets. Most of the RMNCH programmes apply the CoC as the alternative approach to improving maternal and child morbidity and mortality. The current low rate of CoC demands the development of an alternative method in MCH services provision. The WHO recommends working with individuals, families, and communities to ensure the continuum of care throughout pregnancy, childbirth, and postpartum periods. Hence, the current study aims to develop the health education intervention for main caregivers of pregnant women by exploring the information gaps and needs in the existing maternal health situation. Then, the effect of the developed intervention package was tested using a community-based quasi-experimental study with sequential explanatory mixed method design conducted in Taik Kyi and Kyauktan Townships, Yangon Region. The multimethod approach was used, including three focus group discussions with seven main caregivers, seven pregnant women and nine midwives as formative study; quantitative survey among 100 pairs of pregnant women and caregivers from the intervention and control groups, respectively; and in-depth interview with ten main caregivers from the intervention group. The contents of the developed intervention package included health education about timing and frequency of antenatal and postnatal care; safe delivery; skilled birth attendants; danger signs; proper nutrition; ways of living; and drugs necessary for pregnancy to puerperium. A one-time health education session and pamphlet distribution were provided for the intervention group's main caregivers in the intervention. The final analysis was done among 193 pairs with 3.5% loss to follow up rate at the end-line data collection period. Content analysis for qualitative methods and multivariable binary logistic regression analysis for the effect of intervention were applied. In both intervention and control groups, most main caregivers were husbands and then mothers of pregnant women. The awareness on CoC for maternal health among main caregivers from the intervention group was 9.97 times higher than those from the control group (AOR=9.97, 95% CI: 5.12, 19.43, $p<0.001$) and the completion of CoC for maternal health among women from the intervention group was 2.8 times higher than those from the controls (AOR= 2.17 95% CI 1.08, 4.37, iv

$p<0.05$). After the intervention, the perception of main caregivers revealed their perceived importance of maternal health care, caregiver's roles to support for completion of CoC, and the

acceptance of the health education intervention. This study proved the effect of health education intervention for main caregivers of pregnant women to improve CoC completion. The results of this study provided the baseline information to conduct further interventions at the family level for improving the continuum of care among pregnant women in the future.