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"PRIMARY HEALTH CARE: A PATH
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SYSTEMS AND COMMUNITY BASED
RESPONSES TO COVID-19

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TUFH 2020 Abstracts

Title	Addressing health inequity related to maternal health care in post-conflict areas of South East Myanmar
Type	Oral Presentation <i>Working with Underserved Populations towards Community Empowerment</i>
Presenting Author	Khaing Thandar Hnin
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Abstract N^o	TUFH86
Content	<p>Background: After decades of civil conflict, healthcare access in Myanmar is often determined more by ethnicity, wealth and geographic location than by need for care, but inequities in the distribution of maternal healthcare in conflict-affected eastern Myanmar are not well understood. Method: A multi-stage cluster sample survey on maternal healthcare access was conducted in 2019 in all townships of Kayin and Kayah States, stratified ethno-geographically into urban, rural, and hard-to-reach areas under ethnic armed forces' control. Households were categorized into wealth quintiles using the Poverty Probability Index. Results: Among 2687 households, home births accounted for most deliveries in hard-to-reach areas (85-90%), and among women in the poorest wealth quintile (87–90%). In contrast, home birth was relatively uncommon in urban areas (16-30%), and among women in the wealthiest quintile (11-14%). Women in hard-to-reach areas or from the poorest households were also much more likely to rely on traditional birth attendants during delivery (33-67%) than women in urban areas or from the wealthiest households (0-6%). Access to postnatal care within 48 hours of delivery demonstrated similarly stark inequities by area and wealth. Conclusion: Large inequities in maternal healthcare coverage exist in relation to ethno-geographic area and household socioeconomic status. Additional effort is required to improve access to essential maternal health services in hard-to-reach areas controlled by ethnic armed forces, and to narrow the wealth coverage gap within all areas of Kayin and Kayah States..</p>