ABSTRACT

Introduction

Maternal health literacy is an essential skill that empowers the mother to attain competence in the maternal role regarding her health and the health of her children. When civilizations shifted from the agriculture era to the new technological era through the demographic transition, women's roles in society also changed from simple childbearing mothers to complex socioeconomical women. Without an adequate level of maternal health literacy access, filtering, and utilization of health-related information will be difficult. Furthermore, the productivity of available health resources, services, and programme oriented to improving maternal health will be affected by the low maternal health literacy. Healthcare leaders must stay current with new technology and scientific advances economic solutions to manage public health projects to improve maternal health literacy.

Objective

To assess maternal health literacy and its associated factors and identify administrative opportunities concerning the improvement of maternal health literacy of antenatal mothers at Gothatuwa MOH area.

Methodology

This cross-sectional study was done among 500 antenatal mothers registered in the Gothatuwa MOH area. The research instrument was an interviewer-administered questionnaire that consisted of an adapted version of the "20-item maternal health literacy scale." The maternal health literacy level was divided as' limited 'and' adequate 'with the expert panel's opinion.

Results

Limited maternal health literacy was as high among the study population (67% (n=335). In the bivariate analysis, Age 27 years or below (OR=3.235, 95% CI=2.213-4.729, P=0.001), Number of children less than 2 (OR=2.221, 95% CI=1.508-3.269, P=0.001), Monthly income Rs25,000 or less (OR=3.519, 95% CI=1.758-7.047, P=0.001), Unemployment status (OR=2.149, 95% CI=1.480- 3.119, P=0.001), Educated below or up to O/L (OR=3.135, 95% CI=2.149-4.575, P=0.001), and haven't participate in health clubs at school (OR=5.535, 95% CI=2.866-10.689, P=0.001), Inability to speak in Sinhala (OR = 2.300, 95% CI = 1.523-3.475, P = 0.001), Inability to speak more than one language (OR=2.645, 95% CI=1.747-4.005, P=0.001), Inability to read and write Sinhala (OR=1.730, 95% CI=1.198-1.354, P=0.001), were statistically significantly associated with limited maternal health literacy.

Conclusion

This study revealed that the majority of the study population had limited maternal health literacy. Limited maternal health literacy was statistically significantly associated with individual-level factors such as age, education-related factors, antenatal characteristics, and information channel preference. Furthermore, it was also statistically significantly associated

with intermediate level factors such as family dynamics, employment status, engaging in social activities.

Recommendations

Systematic health promotional programmes should be implemented to improve maternal health literacy among antenatal mothers in the urban sector. Encouraging utilizing health education materials in their preferred language as an information source, conducting training the care givers and their communication abilities in the second language needs to be addressed at all levels, space-optimization solutions and partnership programmes for infrastructure development recommended.

Keywords: Health literacy, Health education, Communication, Maternal health, Healthcare administration