

FACTOR ASSOCIATING TIME TO START ANTENATAL CARE IN MAHASARAKHAM PROVINCE, THAILAND**PRAPANT SOONTORNPAGASIT 5437354 APDM/M****M.P.H.M.****THESIS ADVISORY COMMITTEE: AROONSRI MONGKOLCHATI,
Ph.D. (PUBLIC HEALTH), JIRAPORN CHOMPIKUL, Ph.D. (BIostatISTICS)****ABSTRACT**

This cross-sectional descriptive study aimed to determine the factors that affect postpartum women time to start Antenatal Care (ANC) in Mahasarakham province in Thailand. The Sample was 537 postpartum women participants who had had babies delivered in all hospitals of Mahasarakham Province selected, using stratified sampling with proportional to size. Data were collected using structured questionnaires and from maternal and child health handbooks filled by the coordinators. Descriptive statistics were used to describe the basic information, chi-square test and a multiple logistic regression were performed with significant level set at $p\text{-value}=0.05$.

This study found that 99.6 % of the postpartum women took at least one (1) ANC visit before delivery. Forty nine point six percent (49.6%) started ANC late and 18.6% were teenage pregnancies. Awareness of the right time to start ANC was only 6.6%. Teenage pregnancy and Universal Coverage (UC) righted health insurance were statistically significant predictors for late ANC. Teenage pregnancy were 2.39 times (AOR 2.39, 95% CI 1.31-4.34, $p\text{-value}=0.004$) more likely to start ANC later than adults. UC-righted postpartum women were 1.66 times (AOR 1.66, 95% CI 1.11-2.49, $p\text{-value}=0.013$) higher to start ANC late than non-UC-righted health insurance.

Since teenage pregnancy is one of the most serious problems, all stakeholders should integrate all strategies. The right time to start ANC should be publicized and made clear for everyone to understand.

KEY WORDS: TIME TO START ANTENATAL CARE / LATE ANC

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