**A Qualitative Study on Factors Influencing the Utilization of Health Facilities for Childbirth in a Disadvantaged Community of Lalitpur, Nepal**

Karmacharya M1

1 Jagiellonian University, Ul. Grzegorzecka 20, 31-531 Krakow, Poland.

Date: 2013

**Background**

In Nepal, institutional delivery assisted by skilled birth attendants (SBA) is still low (35%). Two third of deliveries take place at home, particularly in rural community. The main aim of the study is to assess factors influencing the utilization of health facilities for childbirth in a disadvantaged community of *Lalitpu*r, Nepal.

**Methods**

The qualitative study was conducted in *Nallu* village in Nepal in 2012. In-depth interviews were conducted with 28 purposely selected participants. Participants included (i) 20 mothers who have given birth less than one year prior to interview, among those: 50% of mothers used health facility and another 50% did not used health facilities for delivery, and half of them were primiparous and another half multiparous, and (ii) 8 key stakeholders from grass root to policy level. In addition, two focus group discussions with mothers-in-law and husbands, and female community health volunteers were conducted by using semi-structured questionnaire. Analysis of the data was carried out with three delay model of conceptual framework approach.

**Results**

Cultural trend of home delivery and easily available local Maternal and Child Health Worker (MCHW) played a key role in decision about home delivery. Illiteracy, lack of awareness, and women’s low status contributed to low utilization of health facilities for childbirth. Mothers-in-law are crucial family members to make decisions for their daughters-in-law whereas, mothers lacked power. Financial difficulties, particularly high transport, distance to health facilities and shortage of regular transport service were major barriers for use of skilled services in the health facilities. Perceived quality of care, such as satisfaction towards the service, attitude of service providers, privacy, and confidentiality were important issues in increasing utilization of health facilities. Similarly, accessibility and availability of the eligible health facilities with provision of free delivery services were highlighted essential issues to increase institutional delivery assisted by SBA.

**Conclusions**

There is a need to establish new birthing centres in rural areas focusing on DAG-4 villages in order to increase accessibility and utilization of health facilities. Comprehensive health promotion needs to be targeted to culturally rooted social factors for mothers, mothers-in-law and husbands. Updated information on availability of 24-hour birthing centres or health facilities needs to be disseminated from district to grass root level community along with quality monitoring.

**Keywords:** childbirth; disadvantaged community; institutional delivery; Nepal; qualitative studies skilled birth attendant.