Home births continue to be witnessed in the informal settlements in spite of the risks involved, but it is not clear why they persist. The objectives of the study were to: establish whether there is any effect of social and cultural practices on home delivery in Kibera informal settlement; establish psychological factors that promote home delivery among mothers in Kibera informal settlement; establish whether there is any effect of a pregnant woman’s (or mother’s) level of education on home delivery; and establish the strategies that can be put in place to improve hospital delivery in order to discourage home delivery. The study was guided by the Health Belief Model and the Behavioural Model of Health Services Utilisation. A mixed survey method design was used for the study. The study targeted all women of between 18 and 49 years of age who had previously given birth at home in the Kibera informal settlements in Nairobi County. Using Snowballing sampling technique 45 women who had given birth at home were identified and participated in the actual study. Data was collected by use of questionnaires and interview schedules where all 45 women were given questionnaires to fill while five out of these were interviewed. Prior to the actual data collection, a pilot study was carried out in Kibera informal settlement among five women who had previously given birth at home. The pilot study helped to improve the reliability and validity of the instruments by ironing out any ambiguities found in the data collection tools. Data collected was both qualitative and quantitative. Quantitative data collected was analysed using both descriptive and inferential statistics, coded and entered into Statistical Package for Social Sciences (SPSS) programme for analysis. Data analysis was presented in form of frequency distribution tables, bar graphs and pie charts. A Chi-square test was conducted to find out the relationship between mothers’ level of education and influence on home delivery. Qualitative data was put under themes consistent with the research objectives. The study established that social and cultural practices, psychological factors and level of education had a significant influence towards maternal home delivery. In particular women’s beliefs, attitude and perceptions had a great impact towards their decision making on maternal home delivery or maternal hospital delivery. It was established from the findings that culture, lack of education, poverty and accessibility to hospitals were major reasons that influenced women’s decision on where to give birth to
their babies. Preference for home delivery was associated with social support emanating from strong cultural background that honoured and celebrated motherhood. However, the major reason which inclined women to prefer hospital delivery was associated with good medical advice and service in case of complications during birth. Based on the findings, the study recommends that health facilities should improve their support services for mothers delivering in their facilities to attract more support and participation from community members who would like to work together with health authorities to jointly design suitable health systems that can respond to the maternal health needs hence eradicating negative social and cultural practices in the society. In addition the government needs to work towards increasing accessibility to hospitals by formulating programs to cater for maternity fees to ensure that all women get access to health facilities. The major reason which influenced most of the women to prefer maternal home delivery was low level of education, therefore, this study recommends that education and in particular women’s education should be promoted. Chi-square test results revealed that women with higher level of education were less likely to engage in social and cultural practices and therefore, were psychologically inclined to deliver in hospital. On the other hand, results of the analysis showed that women with low level of education were more likely to engage in social and cultural practices and hence, psychologically inclined to deliver at home. Further, the government should promote campaigns to sensitize women on importance of maternal hospital delivery and hence highlight dangers related to maternal home delivery.