











bleeding were the second most common, perineal tear as the third ranking, and then retained placenta [14, 30]. In a previous study, complications during home delivery and postpartum period occurred in 24.32% of the complications, where prolonged labour was the most common [14]. Other complications were postpartum hemorrhage, perineal tear, uterine prolapsed, convulsion etc [14]. In Papua New Guinea, a high rate of obstetric complications was found amongst apparently normal pregnancies delivering at home and that study correlated to our study [31].

Among the study subjects, 20.8% respondents had history of institutional delivery in the past and 79.2% respondent had no such history. About the reason of institutional delivery it was found that, 48.41% came to avoid delivery related complications, 26.98% came for better delivery

13.2% was by nurses and 10.0% by trained birth attendant

7% institutional delivery but 56.6% had no barrier. Of them, 33.34% respondents had religious restriction, 30.43% had economic problem, 20.29% had decision making problem and 15.94% had distance barrier for institutional delivery.

[21, 27]. Study by Wanjira *et al.* among 409 participants showed that 12.5% had never delivered in a health facility, 72.5% were not [27]. The most frequently mentioned reasons for never delivering in a health facility (56.9%), fear of episiotomy (25.5%) while 17.9% felt it was risky to deliver at home and were therefore willing to deliver in a health facility [27].

Health information is a knowledge acquired whether through formal or informal education. Just like education, access to health information enable women to break away

institutional delivery is safeguarding the health of their children and themselves [32].

**CONCLUSION**

This study investigated the factors for institutional delivery. The evidence of income and access to health information

delivery. Socio-economic factors like- husband's occupation, family types, religious believe, place of residence etc are

**DISCUSSION**

It was only two centers study with relatively short duration. Most of the respondents were from urban areas, especially in the rural area of Bangladesh.

**RECOMMENDATION**

Institutional delivery is very much essential to prevent obstructing institutional delivery. Proper antenatal care should be taken to prevent complication. Female education must be encouraged to improve the status of the women and to improve their knowledge level regarding maternal health services. Health education should provide to every pregnant woman to raise awareness about the danger signs of pregnancy and its consequences.

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