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**Sub-Theme: Factors affecting access to healthcare and efforts/challenges in securing PHC**

Kenyan women’s preferences for place of delivery: A comparative Discrete Choice Experiment between *Embakasi North* sub-County and *Naivasha sub-County*, Kenya.

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**Background:** Many sub-Saharan Africa countries over the years have introduced policies aimed at removing barriers to access health service utilization including removal of user-fees. The Kenyan Government in 2013 via presidential decree initiated such a policy with an aim of increasing access to facility based delivery in an attempt to reverse Kenya’s high maternal mortality ratio. Despite the new policy women continue to choose to deliver their babies at home and women are also bypassing smaller primary health facilities and having their babies at tertiary facilities. Health system factors related to place of delivery are well studied however women’s preferences that drive the demand for certain health facilities over others are not well understood. This study aims to fill this research gap by using a discrete choice experiment to establish the relative importance of attributes that drive women’s preferences for a place of delivery to improve the understanding of patterns of maternal health service utilization.

**Objectives:** The study aims to examine women’s preferences for place of delivery and establish the relative importance of attributes of the health facilities that drive women to choose facilities where they deliver their babies. The study will compare attributes of women ina peri-urban context in *Embakasi* North sub-County with those in a predominantly rural context in *Naivasha sub-County* in Kenya.

**Methods:** The study intends to utilize mixed methods framework incorporating both a qualitative study and a quantitative methodology known as Discrete Choice Experiment (DCE) to determine the most important health facility attributes preferred by women when choosing their place of delivery. Household characteristics data for women will also be collected via a cross-sectional survey.

**Conclusion**: This study hopes to establish the relative importance of health facility attributes valued by women particularly in the two settings in Kenya and use the information to inform policy making both at the devolved county units and National Ministry of Health. This information should be used for resource reallocation to promote health equity and efficient service delivery within health facilities in both urban and rural areas.