

# POSTNATAL CARE PRACTICES IN MAGAR AND GURUNG COMMUNITIES: A CASE STUDY OF KASKI DISTRICT

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## Abstract

*This paper focuses on postnatal care awareness and practices of Magar and Gurung communities at Pumdi Bhumdi VDC in Kaski district. Both indigenous groups are suffering from different kinds of postnatal problems. The findings reveal that awareness and practices related to postnatal care were not satisfactory. Majority of the Magar and Gurung mothers were not aware of postnatal checkup. Gurung mothers seemed to be more aware than Magar mothers on immunization schedule. Most of the Magar mothers were found using razor or blade and knife or sickles which are medically unsterilized for cutting umbilical cord whereas one half of the Gurung mothers were using sterilized blade.*

## Key words

Awareness; practices; immunization; postnatal care; umbilical cord

## Introduction

Man has the special character in the world. That's why he/she is responsible to play the vital role since his/her birth till death. Human life consists of various periods. Among these, postnatal care is the most significant stage. Postnatal period begins with the birth or after the completion of 280 days in the mothers' womb (Tui Tui, 2006). Postnatal period is defined as the first six week after birth which is critical to the health and survival of a mother and her new born. The most valuable time for

both is during the hours and days after birth. Lack of care in this time period may result in death or disability as missed opportunity to promote health behavior, affecting women, new born and children (WHO, 2012).

Postnatal is an important component of primary health care. It refers to the promotion, curative and rehabilitative health care for mother and children. It includes the maternal health, child health and care of new born child. The specific objectives of PHC are (a) reduction of maternal, prenatal,

infant and childhood mortality and morbidity (b) promotion of reproductive health, (c) promotion of the physical and psychological development of the child and adolescent within the family (Park, 2005).

Postnatal period is the most important period of mother and newborn baby. Postnatal care means care of the mother and baby after delivery. The aim of postnatal care is to prevent complication of the postnatal period to check adequacy of feeding to provide adequate nutrition to the mother and baby to encourage family planning practice (Dutta, 1994).

Postnatal care is one of the critical stages of maternal and child health in the postpartum period when women may develop serious complication after delivery that might threaten their life. Evidence has shown that a large proportion of maternal deaths occur during this period, with postpartum hemorrhage being an important cause. Therefore, it is highly recommended that women should receive at least three postnatal check up, the first being within 24 hrs of delivery, second visit on the third day following delivery and the third being on the seventh day after delivery (DOHS, 2009)

In a survey of the postnatal checked up, Shrestha (2012) found that forty five percent of women with a live birth received a postnatal check up within two days of delivery. Nearly 33 percent women received postnatal care within four hours of delivery, 7 percent received care within 21-23 hours and four percent were seen 1-2 days following delivery. Percentage of mother who received postnatal care at the health facility among expected pregnancies has increased from 50 percent in 2010/11 to 51 percent in 2011/12 (Shrestha, 2012).

One study carried out in Nepal regarding maternal mortality and morbidity has revealed that a large proportion of maternal deaths are due to postnatal complication. The objectives of providing postnatal services are to prevent

from pregnancy related complications and emergency obstetric care. They are related to save the mothers and her newborn child in time. Physical examination of mothers and newborns helps to reduce complications, treatment and referral (Chitrakar, 2010). This paper study mainly focuses on awareness and practice of postnatal care in Magar and Gurung communities.

## Method

The research design for this study was based on descriptive, quantitative and comparative types of survey method. It was preliminary dependent on the primary data and information had been collected with the help of interview schedule. The sample size of the study was 150 households out of total of 300 which is 50 percent of total Magar and Gurung households of ward no.7 and 8 of Pumdi Bhumdi VDC, Kaski district. Simple random sampling technique was used to select the respondents. In order to analyze the data, the researcher used table, bar graph and simple percentage. The field survey was conducted during 2013.

## Results and discussion

The results have been presented and discussed under the following headings:

### *Awareness of postnatal check up*

All mothers and family members must know about postnatal checkups awareness. Postnatal checkups include three postnatal checkups; First checkup within 24 hours of delivery, second check up on the third day and 3rd check up on seventh day after delivery.

Table 1 shows that nearly 17 percent Magar and 32 percent Gurung mothers were aware of postnatal check up but 83 percent Magar and 68 percent Gurung mothers did not have any awareness on postnatal check up. In Nepalese society, most of the women have lack of awareness on postnatal check up. Among them, most of the Magar and Gurung mother

**Table 1: Awareness on postnatal check up**

S.N.	Awareness status	Magar mother		Gurung mother	
		Number	Percent	Number	Percent
1	Aware	13	17.34	24	32
2	Unaware	62	82.66	51	68
Total		75	100	75	100

**Table 2: Awareness about schedule of immunization**

S.N.	Awareness status	Magar mother		Gurung mother	
		Number	Percent	Number	Percent
1	Aware	40	53.33	59	78.76
2	Unaware	35	46.67	16	21.33
Total		75	100	75	100

**Table 3: Umbilical cord cutting instrument**

S.N.	Cord cutting instrument	Magar mother		Gurung mother	
		Number	Percent	Number	Percent
1	Old razor/blade	30	40	13	17.33
2	Knife/sickle	36	48	20	26.67
3	Sterilized blade	9	12	42	56
Total		75	100	75	100

lacked education and awareness of postnatal care. In comparison, women from Gurung caste are more conscious and educated than Magar women. Therefore, Magar respondent's awareness status was low than Gurung respondents.

**Awareness about schedule of immunization**

Prevention is better than cure. This slogan clarifies that every women or mother should prevent her child from being injured or disease. Immunization prevents from different diseases like tuberculosis, diphtheria, pertussis, tetanus and polio, etc. Mother should know about immunization schedule.

Table 2 presents that nearly 53 percent Magar mothers and 79 percent Gurung mothers were aware of the schedule of immunization whereas 47 percent Magar mothers and 21 percent Gurung mothers did not have awareness about immunization schedule. Therefore, Gurung mothers seemed to

be more aware and conscious than Magar mothers on immunization schedule.

**Umbilical cord cutting instrument**

During delivery, delivery kit is necessary for safe delivery and umbilical cord should be cut and tie immediately after the child birth. To cut umbilical cord, sterilized and clean instrument and clean thread should be used to prevent from infection.

Table 3 demonstrates that Magar mothers out of 75 respondents, 40 percent respondents had used old razor/blade to cut umbilical Cord, 48 percent respondents had used knife or sickle and 12 percent respondents had used sterilized blade to cut umbilical cord. Similarly, Gurung mothers out of 75 respondents, nearly 17 percent respondents had used old razor/ blade, 67 percent had used knife/sickle and 56 percent had used sterilized blade to cut umbilical cord.

On the basis of available information collected

from respondent's shows that al-most all Magar mothers were found to have using razor or blade and knife or sickle because they did not aware of the infection or side effects of it and lack of availability of using delivery kits are the main reasons. Only few Magar women had used sterilized blade. But in the case of Gurung community, most of the Gurung mothers had used sterilized blade during delivery due to strong economic condition and education.

**Colostrums/breast feeding practice after birth**

Breast feeding should be initiated soon after delivery ideally within thirty to sixty minutes after giving child birth. The yellow thick milk called colostrums should be fed to the baby. It is baby's first immunization. It protects the baby from illness. Colostrums of mother are nutritious food for children especially during infancy period. Colostrums consist of antibodies and other substest, which protect the body against diseases. It carries immunity against disease and high nutritive value to the infant. Due to these various reasons, breast feeding is necessary for the baby immediately after birth.

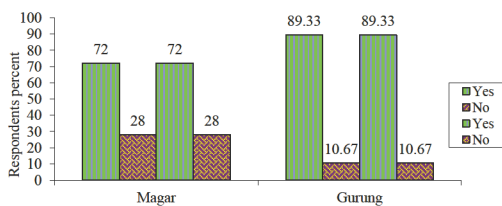


Fig. 1: Colostrums/breast feeding practice after birth

Figure 1 shows that majority of the respondents had fed the colostrums to their babies. 72 percent Magar and 89.33 percent Gurung mothers had fed the colostrums to their babies. Only a few mothers of both communities had not fed colostrums. Colostrums have great value far baby's overall growth and development. Therefore, every mother must not forget to feed colostrums to the babies. Hence, it is suggested that health education for mother and others should be

provided.

Most of the mothers of both communities were found feeding colostrums to their infants because they knew the advantages of colostrums and it could be found early from the mothers after recent delivery.

**Practice of child immunization**

Immunization helps to develop immunity power against various diseases. It is compulsory to immunize baby with various vaccines within one year. Vaccines like BCG, DPT, Polio Hepatitis 'B' Measles are the most common used vaccine in Nepal. So, all these vaccines are necessary for babies within one year in different time interval.

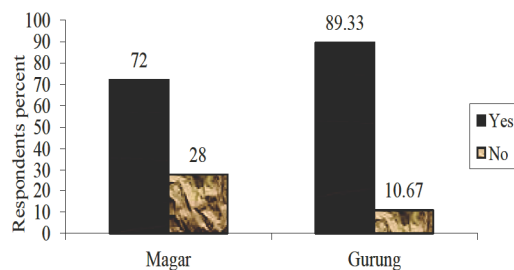


Fig. 2: Practice of child immunization

Figure 2 shows the practice of immunization among Magar and Gurung respondents. Seventy two percent Magar and nearly 89 percent Gurung respondents immunized their children whereas 28 percent Magar and 11 percent Gurung respondents did not vaccinate to their children.

The figure concludes that majority of respondents had vaccinated to their babies due to facilities of VHW (village health worker) home to home but few respondents did not provide vaccination to the babies because they did not care about schedule and always busy in works.

**Practice of postnatal check up/service**

The care given to mother and baby since delivery to forty five days is called postnatal care service. After delivery both mother and infant

**Table 4: Practice of postnatal check up/service**

S.N.	Check up	Magar mother		Gurung mother	
		Number	Percent	Number	Percent
1	Aware	13	17.33	23	30.67
2	Unaware	62	82.67	52	69.33
Total		75	100	75	100

need to be checked by health professional to maintain health. On this postnatal care service, mothers receive vitamin 'A' capsule, advice for food, hygiene, immunization and also about family planning.

Table 4 shows that the practice of postnatal service that nearly 83 percent Magar respondents and 69 percent Gurung respondents did not receive any kind of postnatal care service after delivery while 17 percent Magar mothers and 31 percent Gurung mothers received postnatal care check up service after delivery.

### Conclusion

On the basis of above findings, it can be concluded that awareness and practice of postnatal care in Magar and Gurung communities were very weak and poor. All aspects of postnatal care, awareness and practice seemed poor because of their low and weak socio-economic and education status. They had not received proper care as needed during postnatal period. Magar women were backward in awareness and practice of postnatal care. Both communities need to be awareness about postnatal care and its facilities and availability of quality health

service in order to improve postnatal care in proper and qualitative way. Special education package about postnatal care is needed for both Magar and Gurung mothers.

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