

Antenatal and Post-natal Check-up Practices Among Chepang and Non-Chepang Communities of Nepal

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ABSTRACT

Health check-up during pregnancy and after pregnancy is a must because of the critical health status of the mother and baby. The study identifies the health seeking behavior of mothers of Chepang and Non-Chepang communities of Makawanpur and Chitwan district of Nepal regarding the ANC and PNC check-up. The study was cross sectional descriptive design. Total sample size was 1250 (511 Non-Chepang and 739 Chepang). The result found that Non-Chepang community was found more aware and better practice of health check-up than Chepang communities in both districts. Nepal Government should focus on Chepang or similar types of marginalized and backward communities to increase their access on health services as well as concerned authorities should be responsible to address their problem which become as barrier to change their health seeking behavior.

KEYWORDS: Antenatal, Chepang, Check-up, Non-Chepang, Postnatal

INTRODUCTION

Antenatal, delivery and postnatal care services are amongst the recommended interventions aimed at preventing maternal and new-born deaths worldwide (Titaley, Hunter, Heywood, & Dibley, 2010, p. 1). It is accepted that all women should seek antenatal care early in pregnancy. Many do, but there are still some women who do not present for care until very late in the pregnancy or even in labour itself (RaniSandhya, Ghosh, & Sharan, 2007, p. 57). Women from culturally marginal groups who did not have the educational opportunities encourage preventive health care, who do not have adequate access to health care services because of lack of transport and the distance they live from the health care facility, with few financial resources to meet the expectations or requirements of the health care services or providers for payment, with restrictive home situations where other members of the family prohibit attendance at health care services, to name only a few reasons, are less likely to seek appropriate and timely care (WHO Regional Office for Europe, 2002, p. 24).

It highlights the care of antenatal mothers as an important element in maternal health care as appropriate care which will lead to successful pregnancy outcome and healthy babies. All pregnant ladies are recommended to go for their first antenatal check-up in the first trimester to

identify and manage any medical complication as well as to screen them for any risk factors that may affect the progress and outcome of their pregnancy (Rosliza & Muhamad, 2011, p. 13).

Postnatal care (PNC) is the most neglected area in the health care delivery system despite being very important time for the provision of interventions that are vital to the health of both the mother and the new born infant. Consequently, serious complications which account for two thirds of all maternal and neonatal deaths occur during the postnatal period (Chimtembo, Maluwa, Chimwaza, Chirwa, & Pindani, 2013, p. 343).

The general purpose of this study was to identify the antenatal and post-natal check-up practices among Chepang and Non-Chepang communities of Makawanpur and Chitwan districts of Nepal.

METHODOLOGY

The study is based on descriptive study. The study was based on descriptive and cross sectional design. It was carried out in Chitwan and Makawanpur from Sep. – Oct, 2014 among the 1250 respondents. Respondents were selected from mothers having 3-5 years children from those districts. Ethical approval was taken from Nepal Health Research Council for data collection and written consent was taken from each respondent. Census method was applied to select the household of Chepang communities and random sampling was done for Non-Chepang communities in both districts. Mothers were the key respondents of this study. Primary data were collected by using the structured questionnaires. Simple frequency distribution is done to identify the health seeking behavior of mothers. Comparative study was done between the Chepang and Non-Chepang communities.

RESULTS

In total, data show that 40.9% Non-Chepang mothers was selected from Makawanpur and Chitwan districts whereas 59.1% mothers was from Chepang. On the basis of district, in total 53% respondents was participated from Chitwan followed by 47% from Makawanpur district.

Hospital check-up practices

During the study, information was collected about the health seeking behaviour of mother during the time of pregnancy. Regular health check up is important because pregnancy period is understood as the critical period also.

Table no. 1 shows that in total 91.5% reported to have visited hospital for health check-up during the pregnancy period. Among the data, 42.78% was Non-Chepang and 57.22% was Chepang. Within the ethnicity, out of 511 Non-Chepang, 489 (95.69%) and out of 739 Chepang, 654 (88.49%) said that they had visited hospital for health check-up. The data presents that health seeking behaviour was found good among the Non-Chepang communities as compared to Chepang communities.

Table 1: Hospital check up

Category	Makawanpur			Chitwan			Grand Total			
	Non-Chepang	Chepang	Total	Non-Chepang	Chepang	Total	Non-Chepang	Chepang	Total	%
Checked	292	261	553	197	393	590	489	654	1143	91.5
Not Checked	9	8	17	1	71	72	10	79	89	7.1
Not Stated	12	6	18	-	-	-	12	6	18	1.4
Total	313	275	588	198	464	662	511	739	1250	100
%	53.2	46.8	47	30	70	53	40.9	59.1	100	

District wise, data shows that out of 313 Non-che pang, 292 (93.29%) followed by out of 275 Che pang, 261 (94.90%) visited health post for health check-up in Makawanpur district. Similarly, out of 198 Non-che pang, 197 (99.49%) followed by out of 464 Che pang, 393 (84.69%) visited health post for health check-up in Chitwan district. As shown in the data, higher number of Non-Che pang of Chitwan as compare to Makawanpur district was found more aware on visiting the health post. Whereas, Che pangs were found more aware in Makawanpur district as compare to Chitwan.

Checking times

As the medical rules set in Nepal, minimum 4 ANC check-up is mandatory for the safe delivery. So respondents were asked about their practices of visiting the health post for ANC check-up. Table no. 2 shows that out of total 1143 respondents, 63.5% had visited less than 4 times followed by only 36.5% who had visited four and more than four times during the pregnancy period for ANC check-up. Ethnicity wise, 42.1% Non-Che pang followed by 79.5% Che pang had visited less than 4 times. Whereas, 57.9% Non-Che pang followed by only 20.5% Che pang had visited four and more than four times for ANC check-up.

Table 2: Checking times

District	Ethnicity		< four times	≥ four times	Total
Makawanpur	Non-Che pang	#	153	139	292
		%	52.4	47.6	100
	Che pang	#	256	5	261
		%	98.1	1.9	100
	Total	#	409	144	553
		%	74.0	26.0	100
Chitwan	Non-Che pang	#	53	144	197
		%	26.9	73.1	100
	Che pang	#	264	129	393
		%	67.2	32.8	100
	Total	#	317	273	590
		%	53.7	46.3	100
Total	Non-Che pang	#	206	283	489
		%	42.1	57.9	100
	Che pang	#	520	134	654

		%	79.5	20.5	100
	Total	#	726	417	1143
		%	63.5	36.5	100

District wise, out of 292 Non-Chepang, 52.4% visited less than four times and 47.6% visited four and more than four times whereas out of 261 Chepang, 98.1% visited less than four times and only 1.9% visited four and more than four times for ANC check-up in Makawanpur district. Similarly, 26.9% Non-Chepang followed by 67.2% Chepang visited less than four times whereas 73.1% Non-Chepang followed by 32.8% Chepang visited at least four or more than four times for ANC check-up in Chitwan district. The data shows that in both districts, frequency of ANC visit is low among the Chepang communities than the Non-Chepang communities. In general, situation of Chitwan district is better than Makawanpur district.

Use of Iron tablet during pregnancy

Medical doctors recommend Iron tablets for pregnant women to maintain the level of Iron in body.

The data shows that in total, 82.9% had taken Iron tablet during the pregnancy period. Out of 511 Non-Chepang, 91% and out of 739 Chepang, 77.3% had taken Iron tablet. The data shows that, comparatively, Chepang had done less health seeking practices in comparison of Non-Chepang communities.

Table 3: Use of Iron tablet during pregnancy

District	Ethnicity		Yes	No	Not Stated	Total
Makawanpur	Non-Chepang	#	268	9	36	313
		%	85.6	2.9	11.5	100
	Chepang	#	143	12	120	275
		%	52.0	4.4	43.6	100
	Total	#	411	21	156	588
		%	69.9	3.6	26.5	100
Chitwan	Non-Chepang	#	197	1	-	198
		%	99.5	0.5	-	100
	Chepang	#	428	35	1	464
		%	92.2	7.5	0.2	100
	Total	#	625	36	1	662
		%	94.4	5.4	0.2	100
Total	Non-Chepang	#	465	10	36	511
		%	91.0	2.0	7.0	100
	Chepang	#	571	47	121	739
		%	77.3	6.4	16.4	100
	Total	#	1036	57	157	1250
		%	82.9	4.6	12.6	100

District wise, 85.6% Non-Chepang followed by 52% Chepang had taken Iron table in Makawanpur district whereas 99.5% Non-Chepang followed by 92.2% Chepang had taken Iron tablet in Chitwan district. Health seeking practices were found better in Chitwan district in both communities than the Makawanpur district.

Birthing Centre

Nepal Government has promoted the institutional based delivery through the governmental and non-governmental agencies. Birthing place is one of the important factors to determine the risk of live and death of mother and baby.

The data of table no. 4 shows that 55.9% had given birth of last baby in home followed by 12.7% in health post, 26.8% in hospital and 4.6% had not stated. In total, home-based delivery is high. Ethnicity wise, 26.2% Non-Chepang as compared to 76.5% Chepang who had given birth of last baby in home. Only 11.4% and 7.6% Chepang had visited health post and hospital respectively for delivery whereas 14.7% and 54.6% Non-Chepang had visited health post and hospital respectively for delivery. The practice of home based delivery is found high among the Chepang communities which creates the high risk in mortality of mother and baby.

Table 4: Birthing Place

District	Ethnicity		Home	Health Post	Hospital	Not Stated	Total
Makawanpur	Non-Chepang	#	104	73	113	23	313
		%	33.2	23.3	36.1	7.3	100
	Chepang	#	118	77	47	33	275
		%	42.9	28.0	17.1	12.0	100
	Total	#	222	150	160	56	588
		%	37.8	25.5	27.2	9.5	100
Chitwan	Non-Chepang	#	30	2	166	-	198
		%	15.2	1.0	83.8	-	100
	Chepang	#	447	7	9	1	464
		%	96.3	1.5	1.9	0.2	100
	Total	#	477	9	175	1	662
		%	72.1	1.4	26.4	0.2	100
Total	Non-Chepang	#	134	75	279	23	511
		%	26.2	14.7	54.6	4.5	100
	Chepang	#	565	84	56	34	739
		%	76.5	11.4	7.6	4.6	100
	Total	#	699	159	335	57	1250
		%	55.9	12.7	26.8	4.6	100

District wise, 33.2% Non-Chepang followed by 42.9% Chepang had delivered in home and only 36.1% Non-Chepang, 17.1% Chepang visited hospital for safe delivery in Makawanpur district. Similarly, 15.2% Non-Chepang followed by 96.3% Chepang gave birth to baby in home and 83.8% Non-Chepang followed by only 1.9% Chepang visited hospital for safe delivery in Chitwan. From the analysis of data, it is found that institutional based delivery practices is very low among the Chepang in general in both the districts. District wise, Non-Chepang of Chitwan were found more aware about the safe delivery that had better practice to visit the hospital for delivery than the Makawanpur district whereas Chepangs of Makawanpur district were found more conscious to visit the hospital for delivery than the Chitwan district. So, it can be said that location is not important to determine the institutional based delivery practices.

Post Delivery Checking Status

In general, respondents were asked about their practices to visit the health post or hospital for post-delivery health check-up. The data presents that in total, 69.4% had done post-delivery health check-up whereas yet more than 30% mothers had not visited health post for their post-

delivery check-up. In total, 89.6% Non-Chepang followed by 55.3% had reported that they had visited health post for post-delivery check-up. The findings inform that still around 45% Chepang are not aware about the importance of post-delivery health check-up.

Table 5: Post Delivery Checking Status

District	Ethnicity		Yes	No	Not Stated	Total
Makawanpur	Non-Chepang	#	266	46	1	313
		%	85.0	14.7	0.3	100
	Chepang	#	229	45	1	275
		%	83.3	16.4	0.4	100
	Total	#	495	91	2	588
		%	84.2	15.5	0.3	100
Chitwan	Non-Chepang	#	192	6	-	198
		%	97.0	3.0	-	100
	Chepang	#	180	284	-	464
		%	38.8	61.2	-	100
	Total	#	372	290	-	662
		%	56.2	43.8	-	100
Total	Non-Chepang	#	458	52	1	511
		%	89.6	10.2	0.2	100
	Chepang	#	409	329	1	739
		%	55.3	44.5	0.1	100
	Total	#	867	381	2	1250
		%	69.4	30.5	0.2	100

District wise data shows that 84.2% followed 56.2% had done post-delivery check-up in Makawanpur and Chitwan district respectively. Among the ethnicity, 85% Non-Chepang followed by 83.3% Chepang in Makawanpur district and 97% Non-Chepang followed by 38.8% Chepang in Chitwan district had visited health post for post-delivery check-up. Data presents that in total, post-delivery health check-up practices was found better in Makawanpur district than Chitwan. Similarly, more than 80% Chepang and Non-Chepang had practiced post-delivery check-up in Makawanpur whereas very low number of people reported post-delivery check-up practices among the Chepang in comparison of Non-Chepang in Chitwan district. So, mothers of Chepang need orientation about the importance of post-delivery health check-up in Chitwan district.

ANC and PNC Checking Place

Awareness and access are the two major determinants of checking place for ANC or PNC. Table no. 6 shows that 26.1% respondent visited health post followed by 46.9% visited hospital for check-up. Among them, 21.2% Non-Chepang followed by 31.5% Chepang visited health post and 60.9% Non-Chepang followed by 31.3% Chepang visited hospital for health related treatment.

Table 6: ANC and PNC Checking Place

District	Ethnicity		Health Post	Hospital	Not Stated	Total
Makawanpur	Non-Chepang	#	81	125	60	266
		%	30.5	47.0	22.6	100
	Chepang	#	64	122	43	229

	Total	%	27.9	53.3	18.8	100
		#	145	247	103	495
Chitwan	Non-Chepang	#	16	154	22	192
		%	8.3	80.2	11.5	100
	Chepang	#	65	6	109	180
		%	36.1	3.3	60.6	100
	Total	#	81	160	131	372
		%	21.8	43.0	35.2	100
Total	Non-Chepang	#	97	279	82	458
		%	21.2	60.9	17.9	100
	Chepang	#	129	128	152	409
		%	31.5	31.3	37.2	100
	Total	#	226	407	234	867
		%	26.1	46.9	27.0	100

The above table shows that 29.3% followed by 49.9% visited health post and hospital respectively for health check-up in Makawanpur district. Similarly, 21.8% followed by 43% visited health post and hospital respectively for health check-up in Chitwan district. There was a significant difference found between the two districts regarding the visiting health post and hospital for check-up. Similarly, within the district, 30.5% Non-Chepang followed by 27.9% Chepang visited health post and 47% Non-Chepang followed by 53.3% Chepang visited hospital in Makawanpur district and 8.3% Non-Chepang followed by 36.1% Chepang visited health post and 80.2% Non-Chepang followed by 3.3% Chepang visited hospital in Chitwan district. In Chitwan, more than 60% Chepang did not state their checking places.

DISCUSSIONS

The study has focused on the six different issues: hospital check-up, checking times, use of Iron tablet during pregnancy, birthing place, post-delivery check up and ANC and PNC checking place to explore the health seeking behavior of mother during the ANC and PNC periods. The study identified that in total 91.5% reported that they had visited hospital for health check-up during the pregnancy period. The UNICEF report shows that in total 19% children birth is done with the help of skilled birth attendant (KBA). 54% under five-year' children died within the one year. 5% children are suffering from malnutrition and 13% are severe malnutrition in Nepal. (UNICEF, 2011, pp. 14-17).

It is well accepted issue that pregnancy period is the critical period for women so they need close care of family and regular check-up from medical person. The study has found that in total, 63.5% had visited at least 1 time during the pregnancy period for ANC check-up. Comparatively some better result was found by Nepal Health Sector Program in ANC visit. Pregnant female receiving Antenatal Care (ANC) - 77% women had received at least one ANC check-up and 57% having has visit first ANC visit first four month pregnancy. Total 86% get receiving care ANC from government institution and other from non-governmental provider. (HHSP II, 2012, p. 169).

The study has also discussed on the issue of the use of Iron tablet during pregnancy period. The data shows that in total, 82.9% had taken Iron tablet during the pregnancy period. As

the study conducted on feeding practices during the pregnancy by Save the Children found that the women are rely heavily on staples and legumes and eat animal source foods only infrequently with less than 20 per cent of women consume green leafy vegetables and less than 20 per cent consume vitamin A rich fruits and vegetables. Less than one-third of women report an increase in food consumption during pregnancy (SUA AHARA, 2013, pp. 8-9).

As the health policy of Nepal government that government has promoted the institutional based delivery. Ama program is designed to promote the institutional based delivery. It provides free delivery care in referred hospital. The study found that still 55.9% had given birth of last baby in home. Only 11.4% and 7.6% Chepang had visited health post and hospital respectively for delivery whereas 14.7% and 54.6% Non-Chepang had visited health post and hospital respectively for delivery in Chitwan and Makawanpur districts. The situation of institutional based delivery is critical in study areas. The report of Nepal Health Sector Program shows the more critical result than the present study in place of delivery. Place of delivery- 61% delivered in their home and 35% delivered in their counterparts. Among them 26% delivered in government facility, 16% was in government hospital. (Nepal Health Sector Program, 2012, p. 169). According to the house hold survey report of Ama programme (including 4ANC)- over two-thirds (69%) of the mother used government hospital taken free delivery care, 55% taken primary health care (PHCCs) (Nepal Health Sector Program, 2012, pp. i-xiv).

As the importance of ANC check-up, PNC check-up is also equally importance to insure the health status of mother and baby. The data of present study found that in total, 69.4% had done post-delivery health check-up. As the finding discussed with the previous study found that Postnatal Care (PNC)- PNC received after delivery was 75% women delivered in a facility received at least one postnatal check-up, 13% had had at least three postnatal check-ups (Nepal Health Sector Program, 2012, p. 190). Infant check-ups: 78% of infants were check-up before discharge. There were no significant differences by urban/rural residence, ecological zone, educational level or caste/ethnicity (Nepal Health Sector Program, 2012, p. 208). According to the report of Save the Children, mental, new-born and child health program scale up use of household to hospital continuum of maternal and new-born case as 73% of women (64% was in 2012) used skilled birth attendants for delivery and on an average 72% (target was %) received the recommended three visit in seven day after delivery for new born care in Bajura, Baitadi and Udayapur (SUA AHARA, 2013).

The present study found that 26.1% respondents visited health post followed by 46.9% visited hospital for ANC and PNC check-up in Makawanpur and Chitwan district of Nepal. As the finding discussed with the report of Nepal Health Sector Program found that place of the care (outpatients)- seeing outpatients care 60% had utilized non-government facilities and 40% had used a government facility. Most had attended a private hospital/clinic 47%, governmental hospital attended 12%, Health Post (HPs) 13% and Sub-Health Post (SHPs) service took 11% (Nepal Health Sector Program, 2012, p. 240).

CONCLUSIONS

The article discussed on the practices of mothers' health seeking behaviours of Chepang and Non-Chepang communities of Makawanpur and Chitwan districts from descriptive analysis. Chepang of Makawanpur district were found more aware in health check-up practices than Chepang of Chitwan district. In general, situation of Chitwan district is better than Makawanpur district regarding the ANC check-up. Institutional based delivery practices was found better among Non-Chepang communities than Chepang communities in both districts. So, the minorities and backward communities need the intensive awareness program to change their health seeking behaviour. Awareness, education and poverty are the major factors to increase the frequency of health check-up. The study had not explored the causative factors of not practicing the institutional based delivery from in-depth study so further research is necessary to identify these causative factors and better way to promote the health program.

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