



**ORIGINAL RESEARCH PAPER**

**Obstetrics & Gynaecology**

**“A STUDY ON BELIEFS AND PRACTICES ADOPTED BY THE POSTNATAL MOTHERS REGARDING POSTNATAL CARE AND TO PROMOTE AWARENESS ON HEALTHY PRACTICES FOR CARE OF THE MOTHERS AND HER BABY IN SELECTED URBAN AREAS OF HALDWANI, UTTARAKHAND”.**

**KEY WORDS:** Beliefs, practices, postnatal mothers, postnatal care, healthy practices.

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**ABSTRACT**

**INTRODUCTION:** Postnatal period is an important period following the childbirth till 6 weeks during which the body tissues particularly the genitals and pelvic organs return back to pre-pregnant stage. It is the special phase in the life of women and her newborn baby.

**RESEARCH STATEMENT:** “A study on beliefs and practices adopted by the postnatal mothers regarding postnatal care and to promote awareness on healthy practices for care of the mothers and her baby in selected urban areas of Haldwani, Uttarakhand”.

**OBJECTIVES**

- To identify the beliefs and practices of the postnatal mothers regarding the postnatal care of mothers and baby.
- To assess the relevance of postnatal practices to health.
- To promote awareness of mothers on healthy postnatal practices for the care of mothers and baby through an information booklet.

**METHODOLOGY:** Mixed research methodology was used, conducted on 30 postnatal mothers in selected urban areas of Haldwani. Non-probability convenient sampling technique and data was collected through unstructured interview schedule and data was analyzed by descriptive statistics and content analysis.

**RESULT:** Maximum 25(83.3%) mothers' monthly income was less than Rs. 20,000. majority 26(86.7%) were home makers. Majority mothers were taking food items for breakfast such as moong dal, dalia, chapatti, milk and bread. All the mothers were avoiding certain vegetables such as peas, cucumber, pumpkin, cauliflower, spinach, brinjal and cabbage. They were also avoiding certain fruit items such as plum, pear, peach, orange, lemon, pineapple and grapes. Majority of mothers were taking special foods containing dry fruits which was prepared at home. Regarding hygiene, none of the mothers were in the habit of daily bath and frequent hair wash. About physical activity, all the mothers were not performing household activities such as washing vessels, cutting vegetables, carrying water and lifting household material. Mothers had both positive and negative practices on baby care.

**CONCLUSION:** Postnatal mothers used to have dietary restrictions in food items, vegetables and fruits. They don't use to take daily bath and restrict themselves in performing strenuous activities. In order to improve the food and hygiene behavior of the mothers sustained health awareness programmes are necessary.

**INTRODUCTION**

Motherhood is a joyful stage in the life of any woman, as she is the only one capable to bring for the new life. Postnatal period lasts from the delivery of the placenta and membranes until 6 weeks after delivery. During this period reproductive organs revert back to the pre-pregnant state.

It is the most critical period regarding the health and safety of mothers and babies. Significant ill-health and even death of mothers and babies occur during the postnatal period, due to lack of appropriate care when the health and safety norms are not followed.

Puerperal illness mainly originates during the postpartum period. The majority of maternal deaths (50-70%) occur during the postpartum period. The most important cause of maternal death occurs due to sepsis and hemorrhage which is frequent during the post-partum period.

Postnatal care is the care and medical attention provided to the women and newborns in the first 6 weeks after the child birth. Postnatal care is important to mothers so that it helps early detection and treatment of complications and disease and advice on initiate breast feeding, birth spacing, immunization, and maternal nutrition to prevent morbidity and mortality of mothers and babies.

The global maternal mortality rate is 211 deaths per 100000 live births (UN Inter-agency). The major cause of maternal mortality is hemorrhage, pre-existing medical conditions aggravated by the pregnancy especially eclampsia, sepsis,

embolism and complication of unsafe abortions.

The effects of belief and practices on health can sometimes reach negative levels that threaten life, and they may even result in death. For this reason, health professionals have significant responsibilities to protect and improve women's health. To provide better health services, it is important for health professionals to understand the beliefs and practices of the individuals, families, and society that they serve, so that these mothers and their family members, elders, friends etc. can be guided accordingly to follow the health & safety guidelines as recommended by the health professionals.

In developing countries, less attention was given to postnatal women and their newborns babies don't receive postnatal care from health workers.

**AIMS AND OBJECTIVES**

- To identify the beliefs and practices of the postnatal mothers regarding the postnatal care of mothers and baby.
- To assess the relevance of postnatal practices to health.
- To promote awareness of mothers on healthy postnatal practices for the care of mothers and baby through an information booklet.

Material method and Conceptual frame work The research design adopted for the present study was exploratory descriptive design carried out in selected urban areas of Haldwani, Uttarakhand.

**Sampling technique adopted were –**

Convenience sampling technique use to select the sample population.

**Operational Definition**

**Beliefs:** In this study belief refers to the opinion and assumption of the mothers regarding the care of mother and her baby regarding diet, hygiene, physical activity, rest and sleep.

**Practice:** In this study it refers to self care practices adopted by the mothers regarding diet, hygiene, physical activity, rest and sleep and care of the baby.

**Postnatal Care:** In this study it refers to the above practices related to diet, hygiene, physical activity and rest and sleep and care of the baby.

**Postnatal Mother:** In this study it refers to postnatal period of mothers between 2<sup>nd</sup> to 6 weeks.

**Healthy Practices:** In this study it refers to the awareness and above practices relevant to the health.

**Information Booklet:** It this study it refers to information provided based on identified health need of postnatal mothers such as diet, hygiene, physical activity and rest and sleep.

**Organization of study findings:**

The data findings have been organize, finalized and presented dare organized and under the following section:

**Section-I:** Scio demographic characteristics of postnatal mothers

**Section-II:** Belief and practices related to diet, hygiene, physical activity, rest and sleep and baby care

**Section-III:** Assessment of practices relevant to health

**Section-IV:** Identification of need based on food items avoided, vegetables items avoided, fruit items avoided and hygiene, physical activity, rest and sleep and baby care

**Section-V:** Components of information booklet.

**Section 1- Finding related to demographic characteristics**

- It was observed that out of 30 samples majority of 15(50 %) mothers were in age group between 25-29 years.
- Majority of 17(56.7%) mothers belonged to Hindu religion, 12(40%) Muslims.
- Maximum of 25(83.3%) had monthly income less Rs 20,000.
- 13(43.3%) belonged to the graduation and above category in terms of education status.
- Most of the 26(86.7%) mothers were home makers.
- Majority 18(60%) mothers were live in joint family.
- Maximum of 13(43%) mothers had 2 children.
- Majority 19(63.3%) mothers were taking both vegetarian and non-vegetarian diet.

**Section 2- Finding related to food taken for breakfast, lunch and dinner and foods avoided**

**Food items taken for breakfast**

Majority of the mothers mentioned they take moong dal (20), dalia (24) chapatti (22) milk (24), bread (28) these response were obtain from 30 mothers. The common breakfast timing was between 8-9 am.

**Food items taken for lunch**

The most of the mothers were taking for lunch, rice (10), dal (20), similarly they were also taking khchidi (12) and most common observation was that none or the mothers mentioned taking chapatti for lunch. Whereas common timing for watch was between 12-2 pm.

**Food items taken for dinner**

The mothers were taking for dinner, Dalia (20) khchadi (18), and important observation that for dinner also none of the mothers were chapatti and none of mothers were taking dal at night. It appears that mothers were avoiding many food items

during postnatal period.

**Vegetables taken and most commonly avoided vegetables**

All the mothers (30) commonly were in habit of taking the vegetables such as: radish and leafs (pahadi), beans, methi leafs and mustered leaf, small number of mothers mentioned they take onion (14) very few mother (4) were taking bhindi, potato lauki and purmal and ridge guard (toriya). Only 12 mothers mentioned they were taking tomato. As mentioned above it is obvious that except leafy vegetables, the consumption of vegetable by the mothers is very minimal.

**Vegetables avoided**

All the mothers 30(100%) mentioned that they were avoiding peas, cucumber pumpkin, cauliflower, spinach, brinjal and cabbage. The list of vegetables avoided is very clear testimony to the beliefs prevalent among mothers regarding food items and vegetables During the first few weeks of post natal period consumption of vegetables is highly inadequate and the intake of water is also very less.

**Habit of taking fruits and avoided fruits**

Majority of the mothers 26 mentioned that they were in the habit of taking apple whereas, almost common practice among all the mothers 30 was that all of them avoiding taking plum, pear, peach, oranges, pineapple, grapes and lemon.

**Special food items taken by mothers**

Majority of the mothers 22-37% were taking panjiri (combination of flour, methi, ajwain, dry fruits, black paper) and 20 mothers were taking halwa (sheera) whereas, (11) mothers taking nuts.

**Section 3: Findings related to reason for avoidance of vegetables and fruits**

**Reason for avoidance of vegetables**

**\*The mother were asked why they were avoiding certain vegetables.**

\*All the mothers mentioned that they were avoiding the vegetables because of combination of reasons. The most common reason to avoid the vegetables were; these vegetables cause cold, diarrhea, indigestion or fever. They were apprehensive that the baby may get these symptoms.

**Reason for avoidance of fruits**

All the mothers mentioned that if they take these fruits such as plum, pears, peach, orange, lemon, pineapple the baby will have the symptoms such as cold, indigestion, vomiting, diarrhea and reashes in skin. they believed that one or more symptoms will be experienced by the baby.

**Section -4 Findings related to practices such as diet, hygiene, physical activity, rest and sleep and baby care**

**• Diet**

It was observed all the mothers were avoiding 7 types of vegetables such as peas, cucumber, pumpkins, cauliflower, spinach all the mothers also avoiding 6 types of fruits such as plum, pears, peach, orange, lemon, pineapple due to avoiding of these items the mothers were deprived of the most essential vitamins and minerals.

**• Hygiene**

The 22(73%) mothers were not taking bath, maximum 16(53%) mothers were not doing hair wash frequently whereas 24(80%) mothers were in the habit of hand washing. 24 (80%) mothers were wearing wash cloths daily, maximum 21(70%) were practicing oral care.

**• Physical activity**

Mothers were not performing activity such as washing vessels, cutting, carrying water, lifting household the majority 16(53.3%) of mothers were performing mobbing and 14(46.66%) were doing cooking activity.

**• Rest and sleep**

Majority 16(53.33%) of mothers were sleeping less 5 hrs in a day and 24(80%) mothers used to keep window were closed while sleeping.

**• Baby care**

Mothers had both positive and negative practices related to baby care all the 30(100%) performing two practices such as “wear warm cloth to the baby” and “massaging the baby” regarding the negative practices. 22(73.3%) of the mothers were in the habit of pouring oil in the baby’s ear the reason expressed by them was that, oil helps in cleaning of the ear and prevents keeping the ear dry and improves the listening similarly 15(50%) mothers were in habit of giving honey sucker to the baby the reason mentioned by them was, when they give honey sucker baby will not cry.

**Section 5- Finding related to relevance of postnatal practices to health**

**Total risk score related**

- Avoidance of food items
- Avoidance of vegetables
- Avoidance of fruits
- Avoidance of hygienic score
- Avoidance of physical activity score
- Avoidance of rest and sleep score
- Avoidance of baby care score

**Avoidance of food items**

The daily average intake of items for food including breakfast lunch and dinner is presented with the protein and calories values the combination of food items calorie value of 1198 k cal including egg and 54 g of proteins per day where as the recommended calorie intake as shows that 2500 k cal and 71 g of proteins per day for lactating mothers. The comparison of actual daily calorie intake with the recommended calorie shows that there is a deficiency of nearly 1302 k cal and 70 g of proteins per day the amount of fruits and vegetables taken or not included. Most of the vegetables (7 types of vegetables) are avoided by the mothers and 6 types of vegetables are rarely taken in daily food, though they were not avoided. Therefore the dietary practices of the mothers do not cover even 50% of the recommended calorie intake in their daily diet.

**Avoidance of vegetables**

All the mothers avoided 6 type's vegetables such as peas, cucumber, pumpkin, cauliflower, spinach, brinjal similarly 5 types of vegetables such as bhindi, potato, bottle guard(lauki), parwal, ridge guard are rarely taken by 26(86.6%) of mothers. The nutritive value of the above mention list of vegetables shows that the mineral and vitamin requirement of the mothers or not adequate in their daily dietary habit. Lack of this nutrient only to low immunity and possible health problems and its adverse effect of health.

**Avoidance of fruits**

The large number of mothers takes mango, guava, banana, papaya, pomegranate, custard apple so on the whole nearly 13 items of fruits are not being in the dietary practices of mothers there for this habit is also not supportive of health.

**Avoidance of hygienic**

Maximum number of respondents 14(46.7%) had only 3 score, maximum score of 6, only 6(20%) had. It was surprising to note that 1 mother had 0 score the mean score 2.66 shows that the majority of mothers had very poor hygiene and there for this can be a measured risk for the mothers and baby.

**Avoidance of physical activity**

Maximum no of mothers 14(46.6%) had 8 score which was the maximum score of the physical activity, similarly only 2(6.6%) mothers had 7 score and the mean score itself is 6, which show that the below the mean and the mean level there were

14(46.6%) mothers. The score itself indicates the number of activity not performed.

**Avoidance of rest and sleep**

Maximum 14(46.7%) mothers had 1 score which was that most of the mothers 38(93.4%) were not having adequate sleep.

**Avoidance of baby care**

Maximum number of 20 (66%) were having negative practicing related to baby care.

**Section 6: Identification of need**

It were identified of need based on avoidance of food items, vegetables avoided and fruits avoided and lack of hygiene, physical activity, rest and sleep and baby care.

**Section 7: Promote awareness through information booklet**

As per the objective of research statement to promote awareness on healthy practices for the care of mother and her baby through information booklet. This information booklet provided to all the mothers who given interview. The booklet consist 5 areas about healthy practices for the care of mother and her baby. It consists of following information regarding healthy practices.

- 1-Diet
- 2-Hygiene
- 3-Physical activity
- 4-Rest and sleep
- 5-Baby care

**DISCUSSION**

The main aim of the study was to explore the beliefs and practices of postnatal mothers regarding dietary practices, hygiene, physical activity and rest and sleep and baby care. A number of studies have been conducted in similar field by researchers in India. However, the postnatal period is very specific period with in 2-6 weeks duration, therefore whatever the research available regarding postnatal care is compare with the present study findings.

**Sample characteristics**

The present study showed 15(50%) mothers were in the age of 25-29 years, 83.3% mothers were educated but similar study conducted by Bhuvaneswari. B.G 2013 presented that majority of 69% mothers were in the age of 18-25 years, 92% of the mothers were educated.

The study conducted by N. Nethra. majority of the mothers were in age group between 19-22 years (45%) and present study showed 50% mothers were in the age of 25-29 years.

**Belief and practices related to diet and hygiene**

Agarwal Bindu. Agrawal Archana. Caudhary Piyush. Rana Sudhir (2017) conducted study on traditional belief and practices in newborn care among mothers in a tertiary care center in Dehradun, Uttarakhand, India. The result revealed that 71% mothers were practicing daily baby massage, 71.3% believed that hot and cold foods can harm their baby’s health, 57.3% practiced application of kaju on baby’s face, 81% of mothers accept to practice of pouring oil in baby’s ear, 22.3% mothers believed in isolating mother baby together for 30-40 days. The study concluded that certain practices are still prevalent even today like discarding colostrum, kaju application, pouring oil in baby’s ear and very restricted dietary regimen of mothers. These practices need to be stopped by educating mothers and relatives in postnatal wards. The present study findings are consistent with this study that, all the mothers 30(100%) were avoiding in diet 7 types of vegetables such as peas, cucumber, pumpkin, cauliflower, spinach and the reason mentioned by the mothers were that, all these foods would cause cold to the baby. Similarly all the mothers were avoiding fruits such as

plum, pear, peach, orange, lemon and pineapple the reason for avoiding the fruits also was that if the mothers take these fruits, it causes indigestion, constipation and may harm to the skin, cause cold and cough, lead to itching in the body and the baby may vomit the milk. Anyone or the multiple reasons were mentioned by the mothers for avoiding the food items.

Similar findings are reported in another study conducted by Catherin Nisha. Britto Rock et. all on beliefs and practices regarding nutrition during lactation in a rural area in Karnataka. The study revealed that good practices included consuming green leafy vegetables, rice, bread, jowar, meat, egg and fruits like apple. The practices which may potentially harm the health included avoidance of food items like ragi, papaya, mango and guava during pregnancy and reduced water consumption during the post natal period. Beliefs like "casting an evil eye" or "colour of the baby" had an influence on the food given to antenatal mother. The study found numerous food items which are nutritious and safe and available locally either restricted or denied thus making women (pregnant and lactating) and infants vulnerable. There is need for health education programs in rural areas regarding nutrition which will in turn improve the maternal and child health.

#### Practices related to diet and baby care

The findings of the present study, that the mothers were not taking baby outside 30(100%) and all the mothers 30(100%) for avoiding some fruits and vegetables, are similar to the findings of the study by Ud giri Rekha (2018) conducted cross sectional study on cultural practices related to postnatal care in Vijiyapur Karnataka. The data consist of 200 mothers by purposive sampling. The result revealed that 76% mothers avoiding some fruits and vegetables. Cultural practices like oil massage (73%), mothers were not allowed to go outside in the evening (94%), Use of warm clothes both for mother and baby (100%) were also followed by mothers. The study was concluded that some of good practices among mothers can be motivated, at the same time; harmful practices can be avoided by educating and counseling the mother and her family members.

In this study the data collected through interview consisted of combination of items, relating to fruits during breakfast, lunch and dinner and because too many fruits items were restricted in postnatal period. They were taking only specific limited items. There was so much of commensality in food practices of mothers. Another important reason for commonality belief and practices of the mothers was that they belong to the same settings. Therefore approximate combination of daily intake of food for breakfast, lunch and dinner were listed in a table as presented in table no 13. The score was also computed based on this due to uniform list of food items taken daily (as in table no 13.) it was possible to compute the nutritive value of these food items which showed that there was a deficiency of 1302 kcal and 54 g compare to the WHO recommended calorie intake for postnatal period.

The most common fruits preferred by all the mothers was apple and the most common mothers not preferring other fruits due to these other nutritive value of fruits such as minerals, vitamins were could not be computed. The avoidance of vegetables and fruits indicate practice of applying kajal and pouring oil in ear of the babies and avoidance of household activities or negative practices which need to be avoided.

#### CONCLUSION

The aim of the present study was to explore the belief and practices of mothers regarding awareness of the healthy practices of the mother and baby. The study identified that postnatal mothers follow too many restriction in the choice of dals, vegetables and fruits and among non vegetarian items, meat, fish and chicken. They also avoid performing domestic

activities and all of them avoid daily bath.

Due to avoidance of fruits and vegetables and pulses they are likely to have deficiency in calorie, protein, minerals and vitamins which exposes mother and baby to low immunity and related health problems. In order to improve the food and hygiene behavior of the mothers sustained health awareness programmes are necessary.

#### Limitation

During the interview because they were postnatal mother it was not possible to prolonged the interview as mothers were taking rest also they were busy in baby care. Some of the mothers were also busy in baby care, cooking and also household work, therefore it was not possible to probe deep in to the mothers knowledge and awareness why they were avoiding certain food items such as vegetables and fruits.

1. Whatever they mentioned we simply recorded.
2. The interview generated qualitative data which made it difficult to feed data to measure the compiled the score of practices adopted by mothers.
3. The study conducted in a locality which had commonly influence of the local culture practices therefore most of the responses regarding all the practices were commonly repeated the response because of this it was difficult to recognize the minor difference between the mothers regarding their practices. The most of the responses stereo type.

#### Recommendations

- At a higher education level in nursing, post graduate students must be encouraged to take up more qualitative study to identify the belief and practices during postnatal period.
- The quantity of the study items taken and frequency of taking items including belief related to what remedies they take for minor illness, what remedies they take for common illness, what remedies they take for improve illness including the items.
- Study should be done considering in the gender of the baby compare to the mothers foods.
- The similar study can be conducted all region of Uttrakhand to see the practices emerging from the same belief.
- Similarly study can be conducted having multiple religious groups.

#### REFERENCES

1. Javadifar N, Majlesi F, Nikbakht A, Nedjat S, Montazeri A. Journey to motherhood
2. in the first year after child birth. Journal of family & reproductive health. 2016
3. Sep. 10. (cited on: feb5.2019).
4. W.H.O (World Health Organization guidelines). Postnatal period. April 2016. (Cited on-feb8.2019). Available at: www.mcsprogram.org.
5. W.H.O (World Health Organization guidelines). Postnatal period. April 2015. (Cited on-feb8.2019). Available at: www.mcsprogram.org.
6. Dehury Ranjit Kumar. Pati Aslata. Traditional practices and beliefs in postpartum care: tribal women in Maharashtra. Indian journal of women and social changes. (2018) June. (Cited on-Feb. 2.2020). Available at: https://journals.sagepub.com/doi
7. Wudineh. Kihinetu Gelaye. Et. al. Postnatal care services utilization and associated. BMC Pregnancy and Childbirth(2018).Dec. (Cited on Feb.28.2020). Available at: https://bmcpregnancychildbirth.biomedcentral.com/
8. UNICEF DATA 2019 September .trends in maternal mortality: 2000-2017. Available at: Maternal%20mortality%20-%20UNICEF%20DATA.html.
9. Kamile Altuntu .Emel Ege l. Necmettin Erbakan University. Faculty of Health Sciences. Nursing Department, Konya, Turke
10. S. Swarna, cultural belief and practices of postnatal mother in selected rural area. Triputi (Internet). Jan2013 (Citedon. March.28). Available from: https://www.ejmanage.com/mnstemp/157/157-1463401763.
11. N Netthra. Traditional beliefs and practices in newborn care among mothers in a tertiary health care centre. International Journal of Community Medicine and Public Health. (2018) March. (Cited on- Jan15. 2020). Available online at http://www.ijcmph.com.
12. Aggarwal Bindu. Agrawal Archana. Chaudhary Piyush. Rana Sudhir on traditional belief and practices in newborn care Dehradun, Uttrakhand, India. Indian J Child Health. (2017) cited on 12 June. Available from: http://pdfs.semanticscholar.org.
13. Catherin N, Rock B, Roger V, Ankita C, Ashish G, Delwin P, Deeepthi S, Goud BR. Beliefs and practices regarding nutrition during pregnancy and lactation in a rural area in Karnataka, India: A qualitative study. Int J Community Med Public Health. 2015 Apr;2(2):116-20.
14. Ud giri. Rekha. Cultural practices of postnatal care: hospital based study. Vijiyapur Karnataka. Journal of the Scientific Society (2018). (cited on -Jan20.2020) available online at http://www.jscisociety.com.