

## Cultural practices during postnatal period in Tamang community in Bhaktapur district of Nepal

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### Abstract

<b>Introduction</b>	Different communities have different cultural practices during post natal period. Cultural practices during postnatal period in Tamang community in Kathmandu valley has not been studied. The research was conducted in Changu Narayan Village Development Committee (VDC) Ward No. 4 & 5 of Bhaktapur district of Nepal in 2005.
<b>Objectives</b>	To explore the cultural practices during postnatal period.
<b>Methods</b>	This is qualitative study. Purposive sample of 50 participants of that community was taken. The entire participants were local residents and knew their cultural practices regarding postnatal period in that community.
<b>Results</b>	In postnatal period, usually they use alcohol made by millet believing that millet alcohol is very good for health. It reduces the pain due to contraction of uterus. In the meantime, the family members of the house prepare a special place for postnatal mother in ground floor for staying till <i>nwarana</i> ceremony. During post natal period they provided special food like <i>Sundi Khole</i> and chicken.
<b>Conclusion</b>	In Tamang community after birth mother and newborn child are considered birth polluted and stayed separately on straw bed for 3 days. During postnatal period Tamang practices prevention and precaution from family God, evil eyes and witches. These practices are influenced by cultural, social and economic factors. Local beliefs, customs, traditional healers like <i>Dhami/Jhakri</i> (Shaman), mother-in-laws, illiteracy and the lay referral by significant female relatives play key role in recommending these behaviors.
<b>Key Words</b>	Belief, Bhaktapur district, Cultural practices, Postnatal period, Special food, Tamang community

### Introduction

Every year there are an estimated 200 million pregnancies in the world<sup>1</sup>. Most of these face the chance of an adverse outcome for both the mother and for the baby. While risks cannot be totally eliminated once pregnancy has begun, they can be reduced through effective, affordable, accessible and acceptable maternity care.

Globally, at least 585,000 women die each year from the complications of pregnancy and childbirth. Almost 90 percent of these deaths occur in sub-Saharan Africa and Asia making maternal mortality the health statistic with the largest discrepancy between developed and developing countries. While women in northern Europe have one in 4000 likelihood of dying from pregnancy related causes, for those in Africa the chance is one

in 16<sup>1</sup>. More than 70 percent of all maternal deaths are due to five major complications: hemorrhage, infection, unsafe abortion, hypertensive disorders of pregnancy and obstructed labour. The majority of maternal deaths (61 percent) occur in the postpartum period, and more than half of this takes place within a day of delivery<sup>2</sup>.

In Nepal 70 percent of mother's death is related to pregnancy. Among them 46.2 percent is directly related to hemorrhage after delivery, 16.1 percent from obstructed labour, 14 percent from eclampsia and pre-eclampsia, 11.8 percent is due to infection after delivery, 5.4 percent is due to abortion, 5.4 percent is due to Ante Partum Haemorrhage and 1.1 percent is due to ectopic pregnancy<sup>3</sup>.

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Different communities have different cultural practices regarding pregnancy and childbirth. Mother in laws and family members conduct most of the deliveries in these communities. Some tribes deliver at cattle shed, some cut cord by unsterilized sickle. They are following unsafe and unhygienic cultural practices. In Nepal alarmingly 67.4 percent of mothers die in their house, 11.4 percent die on the way and 2.3 percent in the Primary Health Center, 14.4 percent die in a hospital and 4.5 percent die in a private clinic<sup>3</sup>. In 2001, according to one survey conducted by government, NGOs and some private organizations, for 707500 people only one health institution is there, which can conduct emergency services. But in fact there should be one health institution for 500,000 populations. Fifteen percent pregnant women need care for life threatening complication at any time during pregnancy; such women need emergency delivery services. But only 5 percent such women are receiving emergency services. Among pregnancies 5 percent women must need cesarean section, but only 0.73 percent women get those services. From the above data it is clearly seen that delivery services are quite poor in Nepal. This increases the maternal mortality rate very high<sup>4</sup>.

### Methodology

The research was conducted in Changu Narayan Village Development Committee (VDC) (5500 masl) Ward No. 4 & 5 of Bhaktapur district of Nepal in 2005. Among the total population of 5858, in Ward no 4 & 5 a total of 1734 Tamang are living (29.60%). There are altogether 356 households of Tamang.

This is qualitative study. Purposive sample of 50 participants of that community was taken. Nine primi parous mothers, twenty multi parous mothers, twelve mother in laws, three father in laws, and six husbands have participated in this study. Among them seven (3 primi parous & 4 multi parous) were post partum mothers. One of them was Female Community Health Volunteer (FCHV) who was involved in this study. The entire participants were local residents and most of them knew their cultural practices regarding postnatal period.

Personal face-to-face interview with 35 respondents were taken in their residences. Twelve personal interviews were conducted in ward no. 4 and twenty-three personal interviews were conducted in ward no. 5. For each respondent, the interview lasted about three to three and half hours and each one was repeated about 2 to 4 times until the researcher got the complete information. Home visits and observation helped to enrich the relevant information

collection. Repeated interviews were conducted to increase the validity of information as complementary observation approach. For interviews a semi structured schedule with closed and open-ended questions were used.

Three focus group discussions were conducted. There were 5 respondents in each group. Two focus group discussions were conducted in ward no. 4 (Shayngbo Tole & Lama Tole) and one was conducted in ward no. 5 (Chhapa Tole).

### Results

#### CULTURAL PRACTICE DURING POSTNATAL PERIOD

When the pregnant woman gives birth to the child, the family members serve best quality of *aerak* (Alcohol) or *chhyang* (Fermented liquor) to her. If the economic status is good, they serve warm alcohol mixed with one teaspoon of ghee. They believe it helps to restore the energy and as the drink makes her intoxicated it relieves her from exhaustion. In postnatal period, usually they use millet alcohol which reduces pain due to contraction of uterus and it is very good for health. At that time, family members of the house prepare a special place for postnatal mother in ground floor for staying till *Nwarana* (naming and purification) ceremony.

#### PLACE FOR POST NATAL MOTHER BEFORE PURIFICATION

This place is usually arranged in one corner of the ground floor where some straws are kept. It serves as the bed for the postnatal mother and newborn baby for 3 days. Baby is kept near to the mother. In some place they used bed cover also. Like that they can use blanket in winter.

#### POLLUTED RESTRICTION FOR TOUCH

The birth-polluted woman is not allowed to do work or to touch utensil or any person or go anywhere except toilet for 3 days. At that time even, if anything goes wrong to postnatal mother's health they do not go to health post or hospital for treatment because of fear that evil eye sights as well as wrong activities makes family God angry.

#### SPECIAL FOOD

**Sundi Khole** : After the delivery of the child, a special food is given to mother which is called *Sundi Khole*. It is a mixture of rice, nutmeg, *Alaichi* (Amomum Subulantam), *Jwanu* (Lovage), clove, pepper,

*Manmin* (Cumin), Turmeric, *Tejpat* (leaf of cinnamon Tamlā) and *Dalchini* (cinnamon). *Sundi Khole* is provided three to four times a day along or with normal daily food like rice. This type of special food is provided for postnatal mother minimum for 7 days to 3 months according to their economic status.

**Naka (cock/hen)**: Chicken meat is also given during post natal period with *Sundi Khole*. While cutting *Naka* (cock/hen) at that time, husband or head of household male always eats the *Nakala Tho* (head of the hen) and postnatal mother eats the *Nakala Paksa* (Chicken anus). One *Nakala shya* (Chicken meat) is kept for 2 to 3 days.

**Aerak**: During postnatal period a little ghee is put on heated *Aerak* made of millet and is given to drink. This type of mixture of alcohol and ghee is given two times a day (500 – 700 ml) for preventing from cold. Some women will be provided rice *Chhyang* if breast milk is not sufficient. But some women do not drink *Aerak* and *Chhyang*.

**Table 1: Food and drinks allowed and avoided during postnatal period**

	Type of Food and Drink	Cultural Explanation
<b>Food Prescription</b>	Rice, Chicken, <i>Sundi Khole</i> , Kidney bean, Mutton, Ghee, Oil, spices	Makes body warm and nutritious
<b>Food Restriction</b>	Buff meat, Pork, Chilly, Potato, Fish, Millet (Bread/ <i>Dhedo</i> ), Wheat bread, Chewing corn, Green leafy vegetable, Mutton (pregnant goat).	These all foods are cold which may harm to mother and neonate. Vegetable and chilly may cause diarrhoea. Chewing corn make loose tooth in latter life. Mil let suppress lactation.
<b>Drink Prescription</b>	Alcohol (Millet), <i>Chhyang</i> (Rice)	Millet alcohol prevents body ache, mix with ghee prevents cold, return of uterus in normal position fast and reduce lower abdomen pain. <i>Chhyang</i> (rice) produce sufficient lactation.
<b>Drink Restriction</b>	<i>Chhyang</i> (Millet, Wheat), cold water.	Cold to the mother and baby, suppress lactation.

#### DRESS-UP

During postnatal period mother, wear warm clothes like cotton *Gunyus*, cotton *Chaubandi Cholo* (full sleeve special type of blouse). *Ke* (a white wide cloth tied round the girdle) is tied around the abdomen for support. On the head, they wear *Thaku* (woolen cap which covers the both ears or wear cotton scarf covering forehead and both ears) and *Khasto* (shawl).

#### NEONATTALCARE

The newly born baby is not brought out side for sunbath and oil massage till *Nwaran* ceremony is observed. However, oil massage is done for newly born infant in side the house warmed in coal fire.

#### OIL MASSAGE

After the delivery both, the mother and baby are massaged daily by mustard oil in which *Methi* (seed of fenugreek) is roasted.

#### RESTRICTION OF FOOD DURING POSTNATAL PERIOD

Women believe that certain food have bad effect to the body physically or mentally for both the mother and her child in the long run. If someone neglects it, it means that she will be at high risk of bad health condition. Food prescription and prohibition are the way to prevent bad health according to their traditional belief. The Table shows the food and drinks allowed and avoided during postnatal period.

#### REST

In postnatal period only three days they take complete rest. After purification ceremony, they are allowed to do household work inside the house. Although most of them take rest for 7 days to 1 month.

#### PERENNIALHYGIENE/BATH

In postnatal period, they do not bath daily. They bath once a week, but they clean perineal area 2 – 3 times per week.

**BREASTFEEDING**

After child delivery, within 30 to 60 minutes after bathing the neonate they breastfeed. Before breastfeeding they wash both the breast with Luke-warm water and soap. They do not throw out colostrums.

**PURIFICATION AND NWARANA CEREMONEY**

After the delivery, the first ceremony carried out is purification and *Nwaran* (naming) ceremony. This cultural rite is usually performed on the third day of birth.

**Burning polluted straw:** On the third day, all the members of the family get up early in the morning. The postnatal mother collected all the *So* (straw) where she and her newborn infant had slept, and herself takes it to the nearest crossroad and burns it and warms her body, face, head etc. with this fire for a minute. According to their belief, if the postpartum mother does not warm her body by burning this *So* her hair may fall in latter life.

**Cleaning the house and wash the floors:** On the day of *nwaran* ceremony, after the postnatal mother having tea, *Sundi khole* and *Chhyang*, The floor including the areas where the postnatal mother and her newborn infant had occupied for staying is also smeared with *wala shyabra* (red mud) mixed with *melakhli* (cow dung).

**Bathing:** On this day, postnatal mother had to go to the nearest river for bath. She may not go to the river for bath. Instead of river, they bath outside the home (courtyard) or nearest tap. In winter, they take bath with warm water.

**Nwaran:** In the process of purification, the families sprinkle pure water mixed with urine of cow on their body with leaf of *Chyanjen* (*Artemisa valgaris*), all over the house and the *Ghware* (sickle) or knife or blade, which is used to cut the cord. After that they perform *Lung Taba* (steaming process) ritual. For this, they will arrange different branches of herbs, where they put heated *Shel Yungba* (White Crystal/stone/Flint). In which they pour few drops of pure water over the heated *Shel Yungba*. Due to this there were steam come out from heated *Shel Yungba*. The newborn infant will be bathed on the steam. After *Loong Taba*, new baby is purified and prevents him from skin disease, makes him healthy and longevity according to their belief. After bathing the Lama will find out appropriate name for the baby.

**EARPIERCING CEREMONY**

After purification ceremony, they pierce ear by un-sterile needle with un-sterile thread. After piercing

by needle, the thread is tied over the ear in both ears. It can be pierced by one of the family member or neighbor.

**PURIFICATION FOR WORSHIPPING FAMILY GOD**

From 7 to 15 days after purification ceremony the postnatal mother takes bath and boil all her dress and clothes used during delivery and postnatal period in water mixed with ash. Only after that she and her child are purified for *Timla La* (family God). Now she is allowed to go upstairs and worship *Timla La*.

**CUSTOMS AND RITUALS DURING POSTNATAL PERIOD**

**Security from evil eyes:** According to their belief, during postnatal period mother is very weak, and preventing from evil eyes and witches attack for both the mother and her child they keep one sickle with her. Besides, some put *Doko* (big basket made by small bamboo) in the leg side, a net or piece of net used for catching fish and *Mephra* (ash) from sacrificial fire enkindled by ascetics near the pillow.

**AN ATTENDANT FOR POSTNATAL MOTHER BEFORE PURIFICATION**

After delivery, usually one male caretaker stays with postnatal mother near by her without touching for minimum of three days in the night.

**PARENTS HOME GOING CEREMONY**

After 15 days to one and half months of delivery, postnatal mother's parents come to take their daughter in her mother's home

**IN PARENTS HOME**

In her parents home also, she receives *Sundi Khole* with chicken and rice three or four times a day. She and the new born baby also do oil massage.

**MATURATION OF POSTNATAL PERIOD**

On an average in Changu Narayan VDC, postnatal period is observed for twenty days to three months. Some time between 20 days to three months, the husband or head of house hold goes to the postnatal mother's parent's home to call her back to her own home. After returning from her parent's home, her postnatal period is matured.

**SEXUAL INTERCOURSE**

There is no hard and fast rule. Although after returning from her parents' home, they usually sleep together. Most of the respondents do not give exact answer, some male and female informants said after two and half months onwards, they began to have sexual intercourse.

## Discussion

In all society the process of pregnancy and birth of a child is known as a part of the life cycle that is socially marked and culturally elaborated. The study was conducted to explore the cultural beliefs and practices during post natal period in the Tamang community of Changu Narayan VDC.

The postnatal period is the last stage of the rite childbirth, where women should follow many cultural practices. Among Tamang mother and newborn child are considered birth polluted for 3 days. No one can touch either the mother or her newborn for fear of becoming polluted. The purification ceremony observed on 3<sup>rd</sup> days after birth. They have to follow traditional cultural practices from restriction in certain foods and drinks, restriction in worshipping family God, interested to treat by *Dhami/Jhakri* to follow certain traditional rules before breast feeding, very conscious and afraid from witches and evil eyes. So they do many activities for preventing from evil eyes and witches until the danger period is over. The postpartum period is considered significant. The findings of this study support the view that the cultural rituals are important during the postpartum period.

The cultural belief is that 90 days is not only the time to follow lot of prohibitions but also to adhere certain traditional knowledge to avoid ill health for both mother and child in the later years. They provide special foods called *Sundi Khole* with chicken 3 times daily whereas green vegetables, buff, chilly, pork, fish potato, etc. are restricted.

Comparing to other cultures, the beliefs, regarding duration of traditional postpartum practices in Tamang Community of Changu Narayan VDC is 90 days, while in Chinese community last 40 days<sup>5</sup>. In Somalia, after child is born, the new mother and baby stay indoors at home for 40 days, a time period known as "*Afatanbah*"<sup>6</sup>. In Rai community of Nepal, the new mother must not cook, neither for herself nor for others. She is supposed to rest and not leave the small area allotted to her and the new baby. No body except the newborn infant may touch her. No persons outside the immediate family member are permitted to enter the house and the area allotted to the new mother and child may not be visited by any male family member<sup>7</sup>.

However, the same cultural meaning regarding postpartum period in the duration embedded with the cultural traditional beliefs that period is a time of convalescence both mother and her newborn, which postpartum mother should confine at home for a

specific time period. Almost all implication of these practices based on the lay theory of balancing between hot and cold it is applied to food, drinks, rest, avoiding wind.

From findings, it is clear that the family members play important role on the postpartum mother's health and the decision regarding traditional cultural practices.

Due to acculturation and change in Tamang society, numbers of joint family are converted to nuclear family. Those who live in nuclear family are free of making decision in what sort of practices followed and not. Women in the nuclear family are free from supervision from the other family members in taking action. Living in the nuclear family means they are independent from their elders. However, such a change has its own disadvantage that brings some new obstacles such as restlessness, lack of support system etc. in the vulnerable and sensitive stage of pregnancy and childbirth.

## Conclusion

The postnatal period is considered significant. After birth mother and newborn child are considered birth polluted and stayed separately on straw bed for 3 days without touching any person and utensil except one female caretaker and not allowed to go anywhere except toilet until purification ceremony is observed.

Certain foods like buff, pork, fish, potato, millet bread, wheat bread, green leafy vegetables are restricted and foods like rice, chicken, *Sundi khole*, are special food during postnatal period. Drink like *Chhyang* (millet and wheat) and cold water are restricted. Alcohol (millet), *Chhyang* (rice) are prescribed. During postnatal period Tamang practices prevention and precaution from family God, evil eyes, witches.

These practices are influenced by cultural, social and economic factors. Local beliefs, customs, traditional healers like *Dhami/Jhakri* (Shaman), mother-in-laws, illiteracy and the lay referral by significant female relatives play key role in recommending these behaviours.

Most of the cultural practices and belief are not scientific and need to change their beliefs and practices by improving health education in that community.

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