

SAFE MOTHERHOOD PRACTICE AMONG MUSAHAR COMMUNITY

By:

Chhabitra Rai

Symbol No. 2180102 (2068)

T.U. Regd. No.: 6-1-13-51-98

A Thesis

Submitted to Health Education Department

in Fulfillment of the Requirement for the Master's Degree in Health Education

**TRIBHUWAN UNIVERSITY
HEALTH EDUCATION DEPARTMENT
JANTA MULTIPLE CAMPUS
FACULTY OF EDUCATION
ITAHARI**

2074



Tribhuvan University

१०२५ – ५८००६४
५८१३००

Janta Multiple Campus

Itahari, Sunsari

Estd: २०४५

(Science, Management, Humanities & Education)

Ref:

Date:

RECOMMENDATION LETTER

This thesis is entitled **Safe Motherhood Practice among Musahar Community** submitted by **Chhabitra Rai** in partial fulfillment of requirement for the Master's degree in Health Education under my supervision. Therefore, it is recommended for viva voice.

.....
Asst. Lec. Sanjiv Kumar Yadav (Supervisor)
Head of Department of Health Education
Janta Multiple Campus, Itahari, Sunsari



Tribhuvan University

025 – 580064
581300

Janta Multiple Campus

Itahari, Sunsari

Estd: 2045

(Science, Management, Humanities & Education)

Ref:

Date:

APPROVAL SHEET

This thesis entitled “**Safe Motherhood Practice among Musahar Community**” submitted by **Chhabitra Rai** in partial fulfillment of requirement for the Master's degree in Health Education has been approved.

Thesis Evaluation Committee

Signature

1. Mr. Sanjiv Kumar Yadav, Lecturer (HOD)
Head, Department of Health Education
Janta Multiple Campuse, Itahari, Sunsari
Tribhuvan University

.....
(Chairman)

2. Mr. Sanjiv Kumar Yadav, Asst. Lecturer
Department of Health Education
Janta Multiple Campus Itahari, Sunsari
Tribhuvan University

.....
(Supervisor)

3. Prof.

.....
(External)

Viva Date:

DECLARATION

I hereby declare that the thesis entitled **Safe Motherhood Practice among Musahar Community** submitted to Faculty of Health Education, Tribhuvan University is my original work for the partial fulfillment for the Master's Degree under supervision of Mr. Sanjiv Kumar Yadav, Asst. Lecturer of Janta Multiple Campus.

Date:

Chhabitra Rai

M.ed 2nd year

Roll No. 2180102(2068)

T.U. Regd. No: 6-1-13-51-98 (2004)

ACKNOWLEDGEMENT

I have received a wrathful help and support to express my research work. I express my Humble thanks for their time through and co-operation by which I could accomplish my work. This study would be incomplete and worthless without continuous inspiration and guided which is provided by my respected thesis supervisor Mr. Birandra Karki, lecture Health Education Department, Janta Multiple Campus, Itahari, Sunsari. Whatever expressions would be less for the support amnd guidance which got in-spite of his busy schedule, so, I want to express my sincere and heartily gratitude towards him.

Similarly, I would like to express my sincere thanks and cordial gratitude to my respectable teacher Mr. Sanjiv Yadav, Head of Health Eduaction Department for providing me this chance to conduct this study. Similary, I am deeply indebted to other teachers for providing me with valuable guide, comments and suggestions for completing this research.

I am grateful and inbedted to my family and relatives for their inspiration and continuous encouragements during the study. I would like to express to my friends for their help and co-operation. I would also like to all the respondents for providing their information during the time and data collection and at last but not the list I would like to thank Mr. Suresh Chaulagain, owner of R.S. Brothers Books & Stationery for computer typing and printing.

Chhabitra Rai

M.ed 2nd year

Janata Multiple Campus

Faculty of Education

ABSTRACT

This study focuses on safe motherhood practice in Mushar Community" of Triyuga Municipality Deuri Udayaur District. The main aim of those study is to find out the existing antenatal intranatal and postnatal practices of Mushar Women if study are tgis study will be quantitative as well as descriptive in nature,

This study will be mainly based on source data. Descriptive research design will be adopt for study. This study will be conduct among the total number 386 women; among them 176 women are pregnancy and puerperium period. They are selected by random sampling questionnaire and Interview related to family background which is used to collect the necessary information.

It is very sensitive stage for mother and new born baby. Educational status of Mushar women is illiterate i.e. unable to write their name and they could not reading writing . They are few a person complete primary level education. Occupationally most of them depend in agriculture and fishing. They are marriage below 20 year of age and they are 30 to 40 percentage of home delivery. Mushar women are 50% to 60% mothers are used family planning who were involved in agriculture. Among the total respondent 54.5% mothers having uterine prolapse who had got married 20 years below.

Mushar community higher proportions of responded 72% women are not antenatal check up and they do not take Iron folic and calcium tablets. They are avoided green leafy vegetable and most used to meat and fish.

They are go to hospital emergency situation but does not go to the common simple situation. 40% women and home delivery and 60% hospital delivery and they are most complication situation i.e. post partum hemorrhage and high blood pressure and low birth weight baby. So that during postnatal period are most complication. It ispuerperal sepsis and neonatal sepsis. Among the total respondents 50% women suffering the anemia occasionally 45% low birth weight and Musher community women are complication i.e. hypertension, postpartum hemorrhage and puerperal sepsis and they normal women (non pregnant women's are most common lower abdomen pain like PID and vaginal discharge syndromes.

TABLE OF CONTENTS

CONTENTS	Page No.
TITLE PAGE	
DECLARATION LETTER	II
RECOMMENDATION LETTER	III
APPROVAL SHEET	IV
ABSTRACT	V
ACKNOWLEDGEMENT	VI
TABLE OF CONTENTS	VII
LIST OF TABLES	VIII
CHAPTER I: INTRODUCTION	
1.1 Background of Study	1
1.2 Statement of the Problem	2
1.3 Objectives of the Study	4
1.4 Significance of the Study	4
1.5 Delimitation of the Study	4
1.6 Definition of the Term Uses	5
CHAPTER II: REVIEW OF THE RELATED LITERATURE	
2.1 Theoretical Literature	6
2.2 Empirical Literature	7
2.3 Implication of Literature Review	9
2.4 Theoretical Conceptual/Framework	10
CHAPTER III: METHODS AND PROCEDURES OF THE STUDY	
3.1 Design and Method of Study	12
3.2 Population of the Study	12
3.3 Sampling Techniques and Sample Size	12
3.4 Data Collection Tools	12
3.5 Data Collection Procedures	13
3.6 Methods of Data Analysis and Data Interpretation	13
CHAPTER IV: ANALYSIS AND INTERPRETATION OF DATA	
4.1 Educational and Economic Status of TB Patient	14
4.1.1 Educational Status of Resondents	15

4.1.2 Occupation Status	16
4.1.3 Age at Marriage	17
4.2 Safe Motherhood Practices	17
4.2.1 Antenatal Care Practices	17
4.2.2 Place of delivery According to Education	18
4.2.3 Assistance during Delivery Period	19
4.2.4 Complication during Delivery	19
4.2.5 Practice of postnatal Check up	21
4.2.6 Food Intake on Postpartum period	22
4.1.7 Health Problems during Postnatal Period	23
4.2.8 Food Avoidance	24
4.2.9 Duration of Resting on Postpartum Period	24
4.2.10 Use of Conceptive Device	25
4.2.10 Practice of Colostrum Feeding	26
4.2.12 Practice of Bathing	26
4.2.13 Breast Feeding Practices	27
4.3 Summary and Finding	28
CHAPTER – V: FINDINGS, CONCLUSION AND RECOMMENDATION	
5.1 Conclusion	30
5.2 Recommendation	31
5.3 Conclusions	34
5.2.1. Recommendation to Improvement for Practice Level	31
5.2.2 Recommendation for National Level	32
5.2.3 Recommendation for Future Study	33

BIBLIOGRAPHY

ANNEX-I

QUESTIONNAIRE

LIST OF TABLES

Table No.	Title	Page No.
1.	Age Composition Reproductive Group	14
2.	Education Status	15
3.	Use of Family Planning Method According to Occupation	16
4.	Reproductive Health Problem According to Occupation	16
5.	Age at Marriage	17
6.	Antenatal Care Practices	18
7.	Place of Delivery According to Education	18
8.	Assistance during Delivery Period	19
9.	Complication during Delivery According to Place of Delivery	20
10.	Time of Colostrum's Feeding Very Important Period for Baby and Prevent Postnatal Bleeding	20
11.	Practice of Postnatal Check-Up	21
12.	Intake of Iron Tablet during Postnatal Period	21
13.	Type of Food Intake after Delivery	22
14.	Health Problem in Child	22
15.	Total Complication	23
16.	Health problems during Postnatal Period	23
17.	Food Avoidance	24
18.	Duration of Rest on Postpartum Period	25
19.	Use of Contraceptive Device	25
20.	Practice of Colostrum Feeding	26
21.	First Bathing Practices	26
22.	Breast Feeding Practice	27
23.	Use to Contraceptive Devices Awarding to Education	27
24.	Type of Contraceptive Device	28

LIST OF FIGURES

Figures No.	Title	Page No.
1.	School Education Management of Children of TB Patient	16
2.	Occupational Status of TB Patients	17
3.	Distribution of Monthly Earning from Daily Wages in TB Patients	19
4.	Number of Family Members of TB Patients	19
5.	Health Service Seeking Behaviour	20
6.	Initial Symptoms Developed in TB Patients	22
7.	Symptoms of Tuberculosis Pericarditis in TB Patients	23
8.	More Infected System of Body	24
9.	Knowledge on Causes of TB	25
10.	Knowledge about Transmission of TB	26
11.	Behaviors of Health Workers towards TB Patients	27
12.	Distance between House and DOTs Centers of TB Patients	28
13.	Condition of Discrimination in DOTs Centers	29