

**MATERNAL AND CHILD HEALTH CARE PRACTICE AMONG NEWAR  
AND  
NON-NEWAR WOMEN IN JHAUKHEL VDC OF BHAKTAPUR  
DISTRICT**

**BY**

**Asmita Shrestha**

**Exam Roll No.:280821/2066**

**T.U.Regd. No.: 9-1-43-16-96**

**A Thesis Submitted to Health,  
Physical and Population Education Department For the Partial  
Fulfillment of the Requirements for Master's Degree in Health Education**

**CENTRAL DEPARTMENT OF EDUCATION**

**UNIVERSITY CAMPUS**

**TRIBHUVAN UNIVERSITY**

**KIRTIPUR, KATHMANDU**

**2068**

## APPROVAL SHEET

This Thesis entitled “**Maternal and Child Health Care Practice Among Newar and Non-newar Women in Jhaukhel VDC of Bhaktapur District**” submitted by Asmita Shrestha in partial fulfillment of the requirements for the Master’s Degree in Health Education has been approved.

### Thesis Evaluation Committee

### Signature

1. **Dr. Lokendra Serchan** , Professor

Head, Health, Physical and Population .....

Education Department, Faculty of Education

T.U. Kirtipur

Chairman

2. **Mr. Bishnu K.C.**, Lecturer

Health, Physical and Population .....

Education Department, Faculty of Education

T.U. Kirtipur

Supervisor

3. **Dr. Ram Krishna Maharjan**, Professor

Health, Physical and Population .....

Education Department, Faculty of Education

T.U. Kirtipur

External

Date: 2068.12.24

## ACKNOWLEDGEMENT

First of all I would like to express my sincere gratitude to my respected and thesis supervisor **Mr. Bishnu K.C.**, Lecturer, HPPE Department, T.U. Kirtipur for his constant guidance, creative suggestions, genius supervision and encouragement. It would be impossible to present thesis in this form without his co-operation.

I gratefully acknowledge to **Prof. Dr. Lokendra Serchan**, Head of the Department of Health, Physical and Population Education, T.U. Kirtipur for providing the opportunity to undertake this research work.

I would like to offer thanks to all the respondents who patiently participated in my research work. I am really proud of my friends who supported me to collect the data to complete this research work. My special thanks go to my husband Mr. Gyan Bahadur Shakha for his continuous encouragement and support towards the path of my academic pursuit and providing me constant moral and financial support to complete research work as well as academic session. Similarly, I would also take this opportunity to express my sincere thanks to my parents and relatives for their kind support and co-operation to collect the data.

Finally, my sincere thanks also go to Village Development Committee of Jhaukhel, Bhaktapur and Health Post. I would like to thank all who have directly and indirectly assisted me to make this thesis.

**-Asmita Shrestha**

## ABSTRACT

The study entitled “Maternal and Child Health Care Practice among Newar and Non-newar Women in Jhaukhel VDC of Bhaktapur District” was carried out in order to identify the practice of maternal and child health care. The study was mainly based on primary data collected from 2 wards (5 & 7). The married women were interviewed to collect the information.

The main objectives of the study were to find out the socio-economic & demographic characteristics and the MCH care practice of the Jhaukhel VDC. The study was based upon the data collected from primary sources among 100 households (43 Newar and 57 Non-newar). The researcher used the interview schedule to collect the data. The collected data were tabulated for analysis and descriptive method was used to analyze and interpret the tables.

According to this study, most of the Newar respondents (74.42%) were more educated than Non-newar respondents (71.93%). The ANC visit was satisfactory. Most of the respondents had taken the iron tablet, however they were not regular visit. 51 percent of Newar and 49 percent Non-newar respondents had received the TT vaccine and iron tablet. About 80 percent Newar respondents had given birth at hospital whereas 81 percent Non-newar respondents had given birth at hospital which is favorable aspect for the mother's health. The pregnant women in Non-newar were assisted by 45.45 percent mother in laws during delivery at home followed by Newar (44.44%). Similarly, most of Newar respondents (95.35%) used the safe delivery kit to cut the cord whereas only 77.19 percent Non-newar respondents used the safe delivery kit to cut the cord. Most of the women had suffered from health problem during delivery period like swelling of hands, face and legs; back pain and bleeding etc. Majority of the Newar mothers (97.67%) fed the first milk after the delivery followed by Non-newar (94.74%). Majority of respondents in both had used the foods containing ghee and meat during postnatal period. More than 85 percent Newar respondents took vitamin A capsule during postnatal period whereas Non-newar by only 82.46 percent. Similarly, most of the Newar respondents (48.84%) did not provide bath to their babies in fixed time followed by Non-newar respondents (45.61%). According to this study, 83.72 percent of Newar respondents and 78.95 percent of Non-newar respondents used family planning devices. 63.16 percent children had been suffered from different kinds of diseases in Non-newar community but only 58.14 percent children had been suffered from different kinds of diseases in Newar community.

The contribution of husband and family members in antenatal, natal and postnatal period needs to be more effective which helps to reduce the maternal and child mortality. Therefore, there should have advocacy, awareness campaign and income based programs for the Jhaukhel community.

## TABLE OF CONTENTS

	<b>Page No.</b>
<b>APPROVAL SHEET</b>	i
<b>ACKNOWLEDGEMENT</b>	ii
<b>ABSTRACT</b>	iii
<b>ACRONYMS</b>	iv
<b>TABLE OF CONTENTS</b>	v
<b>LIST OF TABLES</b>	viii
<b>LIST OF FIGURES</b>	x
<b>CHAPTER I INTRODUCTION</b>	<b>1 - 5</b>
1.1 Background of the Study	1
1.2 Statement of the Problem	2
1.3 Objective of the Study	4
1.4 Significance of the Study	4
1.5 Delimitation of the Study	5
1.6 Definition of the Terms Used	5
<b>CHAPTER II REVIEW OF RELATED LITERATURE</b>	<b>6 – 9</b>
<b>CHAPTER III RESEARCH METHODOLOGY</b>	<b>10 – 11</b>
3.1 Research Design	10
3.2 Sources of Data /Population of Data	10
3.3 Sampling Procedure and Sample Size	10
3.4 Tools of Data Collection	10
3.5 Validation of the Tools	11
3.6 Data Collection Procedure	11
3.7 Methods of Data Analysis and Interpretation	11

<b>CHAPTER IV</b>	<b>ANALYSIS AND INTERPRETATION OF DATA</b>	<b>12-41</b>
4.1	Socio-economic and Demographic Characteristics	12
4.1.1	Educational Status of Respondents	12
4.1.2	Number of Family Members	14
4.1.3	Occupational Status of Respondents	14
4.1.4	Family Size	15
4.1.5	Number of Child	16
4.2	Antenatal Care Practice	17
4.2.1	Age at Marriage	17
4.2.2	First Child Bearing Age of Respondents	18
4.2.3	Quantity of Food Practice During Pregnancy	19
4.2.4	Intake of Additional Nutritious Food During Pregnancy	20
4.2.5	Who Advised to Use Service?	21
4.2.6	Antenatal Check up During Pregnancy	22
4.2.7	TT Vaccine Receiving	23
4.2.8	Where was Antenatal Check up During Last Pregnancy ?	23
4.2.9	Practice of Taking Iron Tablets during Pregnancy	24
4.2.10	Complication During Pregnancy	25
4.3	Delivery Practices	26
4.3.1	Place of Delivery	26
4.3.2	Assistance during delivery	27
4.3.3	Cord Cutting Assistance	28
4.3.4	Cord Cutting Instruments	29
4.4	Postnatal Care Practices	30
4.4.1	Breast Feeding After Birth	30

4.4.2	Period of Method of Breast Feeding	31
4.4.3	Weaning Practice for Baby and Prepare Sarbotam Pitho	32
4.4.4	Intake a Vitamin A Capsule in Postnatal Period	33
4.5	Sanitary Practices	34
4.5.1	Clean of Lactating Mothers Nipple	34
4.5.2	Bathing Children	35
4.5.3	Child Ear Cleaning Way	36
4.5.4	Condition of Bathing Water for Babies	36
4.6	Family Planning Practices	37
4.6.1	Use of Family Planning Devices	37
4.6.2	Method of Family Planning	38
4.7	Child Care Practices	39
4.7.1	Prevalent Disease Among the Living Children	39
4.7.2	Use of Bottle Milk	40
4.7.3	Immunization Practice	41
<b>CHAPTER-V SUMMARY, FINDINGS, CONCLUSION AND RECOMMENDATION</b>		<b>42-48</b>
5.1	Summary	42
5.2	Findings	42
5.3	Conclusion	46
5.4	Recommendations	47
<b>BIBLIOGRAPHY</b>		<b>49-50</b>
<b>APPENDICES</b>		<b>51-58</b>

## LIST OF TABLES

<b>Table No.</b>	<b>Title</b>	<b>Page No.</b>
1.	Educational Status of Respondents	13
2.	Number of Family Members	14
3.	Occupational Status of Respondents	15
4.	Types of Family Respondents	15
5.	Types of Number of Child	16
6.	Status of Age at Marriage	17
7.	First Child Bearing Age of Respondents	18
8.	Quantity of Food Practice during Pregnancy	19
9.	Intake of Additional Nutritious Food during Pregnancy	20
10.	Any one Advised to Use Antenatal Care Service	21
11.	Antenatal Checkup during Pregnancy	22
12.	Where was Antenatal Check up during Last Pregnancy?	24
13.	Complication during Pregnancy	25
14.	Place of Delivery	26
15.	Assistance during Delivery ad Home	27
16.	Cord Cutting Assistance	28
17.	Cord Cutting Instruments	29
18.	Frequency of Breast Feeding after Birth	30
19.	Duration and Methods of Breast Feeding	31
20.	Weaning Practice of Baby and Prepare Sarbottam Pitho	32
21.	Intake of Vitamin A Capsule in Postnatal Period	33
22.	Clean of Lactating Mothers Nipple Before and After Feeding	34
23.	Frequency of Bathing	35



24. Child Ear Cleaning Way	36
25. Uses of Family Planning Devices	37
26. Method of Family Planning	38
27. Prevalent Disease among the Living Children	39
28. Use of Bottle Milk	40
29. Immunization Practices	41

## LIST OF FIGURES

<b>Figure No.</b>	<b>Title</b>	<b>Page No.</b>
1.	Receiving TT Vaccine	23
2.	Practice of Iron Tablets During Pregnancy	25
3.	Condition of Bathing Water for Babies	36

## ACRONYMS

AIDS	:	Acquired Immune Deficiency Syndrome
ANC	:	Antenatal Care
BCG	:	Bacillus Chalmette Guerin
CBS	:	Central Bureau of Statistics
DHS	:	Demographic and Health Survey
FOE	:	Faculty of Education
FCHVs	:	Female Community Health Volunteers
INGOs	:	International Government Organizations
ICPD	:	International Conference on Population Development
MCHC	:	Maternal Child Health Care
MCH	:	Maternal Child Health
MOHP	:	Ministry of Health and Population
NGOs	:	National Government Organizations
TT	:	Tetanus Toxic
TBA	:	Trained Birth Attendant
UN	:	United Nations
UNFPA	:	United Nations Fund for Population Association
UNICEF	:	United Nations International Children's Emergency Fund
VDC	:	Village Development Committee
WHO	:	World Health Organization