

**MATERNAL HEALTH CARE PRACTICES OF THE RAJBANSHI
WOMEN**

(A Case Study in Lakhanpur VDC, Jhapa)

**A Dissertation Submitted to
Central Department of Population Studies
Faculty of Humanities and Social Science for the Partial
Fulfillment of the Degree of Master of Arts in
Population Studies**

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Recommendation

This is to certify that the dissertation entitled " **Maternal Health Care Practice of the Rajbanshi Women: A Case Study of the Lakhanpur VDC of Jhapa** " is prepared by **Rita Lawati** under my supervision. She has collected the primary data for this purpose in Rajbanshi Communities and completed successfully the requirements for dissertation in Master of Arts in Population Studies.

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Jhapa

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ABSTRACT

The study “Maternal Health Care Practice of the Rajbanshi Women: A Case Study of Lakhanpur VDC, Jhapa District”, is based on primary data. There were altogether 560 HHs of Rajbanshi communities in the village. Out of this 101 HHs was included using random sampling method for the study purpose. In this study, various variables were analyzed to understand maternal health care practice, attitudes, behavior socio-economic status and relation between education and maternal health care practice. The current situation of maternal health care practice is very virulent. The major causes of its careless of women in pregnancy period, lack of awareness and traditional behavior.

This study has been designed to identify the maternal health care practices and educational status of Rajbanshi women of the Lakhanpur VDC of Jhapa district. Maternal health is the issue of human right and women’s life security. There are various difficulties for achieving the goal of maternal health. In Nepal, various social and economic barriers have been attempted to enhance the overall development of women’s health and other aspects of their life. Rajbanshi are indigenous people with own culture and social setting. They rather live a village life. They are socially and economically back and isolated from the main stream of the nation. They have strong cultural beliefs which have made them traditional rather than modern. They yet have to face so many social and cultural exploitations. Within the ground reality of cultural, economical and social disparities, this study has attempted to identify the situation of Rajbanshi with respect to maternal health care practices and educational status. This study is based on the primary data obtained from field survey. The study has explored the following information.

In the comparison to the national average, the literacy rate of Rajbanshi women is found lower (33%) but proportion of Rajbanshi women completing higher education is insignificant. The socio-economic conditions of Rajbanshi women have not so better and not so bad. Among of the Rajbanshi 24.8 percent had land less. There was good divined water and electricity facility. Eighty seven percent have mud houses but 13-9 percent have not toilet cant percent Rajbanshi have communication facilities. Many Rajbanshi women have involved in business (62.4%). Some of them are involved in agricultural (26.7%). And 64.3 percent Rajbanshi women income source is business. A large proportion of Rajbanshi women (61.4%) in the study area were married

before the age of 20. this shows that they still practice early marriage. Similarly, a large proportion of Rajbanshi women (37.6%) of the study area had their first conception before the age 20. About 79 percent Rajbanshi women of the study area were informed they had antenatal care service but the utilization of postnatal care is lower (63.4%) There is better coverage of family planning method (96%) couples have using contraceptives. Out of the total respondents, 66.3 percent were used new blade to cut curd 21.8 percent took bath same day and 27.7 percent have fed their baby immediately.

This study is a symbol of improvement over the past situation, though it is not compared with the past events. There were various significant improvements in the past and the trend is positive, which if maintained, leads to better situation. But there are many gaps and difficulties to overcome. For example, the main aspect of this study, maternal health care practices is obviously low and poor which should be strengthened with necessary facility. Concluding it can be stated the higher status of maternity care is the result of better social, economic, cultural and political settings. All of the mentioned factors should play an optimum role honestly in order to strengthen the maternal health service. Therefore, this study has produced some of the reliable facts and realities based on the Rajbanshi traditional and cultural settings including socio-economic backgrounds.

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ACRONYMS

AHW	Auxiliary Health Worker
ANC	Antenatal Care
ANMs	Auxiliary Nurse Midwives
AIDS	Acquired Immune Deficiency Syndrome
CBS	Central Bureau of Statistics
CEB	Children Ever Born
CHDK	Clean Home Delivery Kit
FP	Family Planning
HA	Health Assistant
HIV	Human Immune Deficiency Virus
ICPD	International Conference on Population and Development
ILO	International Labor Organization
IMR	Infant Mortality Rate
INGOs	International Government Organizations
LBW	Low Birth Weight
MDGs	Millennium Development Goals
MOH	Ministry of Health
MMR	Maternal Mortality Rate
NDHS	Nepal Demographic Health Survey
NGOs	Non Government Organizations
NFPFHS	Nepal Family Planning Fertility and Health Survey
PNC	Postnatal Care
RH	Reproductive Health
SBA	Skilled Birth Attendant
SES	Socio Economic Status
TBAs	Traditional Birth Attendance
SLC	School Leaving Certificate
TT	Tetanus Taxoid
UNFPA	United Nations Populations Fund

UNDP	United Nations Development Programme
VDC	Village Development Committee
WHO	World Health Organization