

Harmful postpartum beliefs and practices of mothers in India: rapid policy brief

Plain Language Summary

Cultural beliefs and practices are important in the care of women and their babies during the postpartum period in India. Many of the postpartum practices are beneficial for maternal and newborn health; however, some practices still exist that maybe harmful.

The practice of giving prelacteal feeds is widely prevalent in different regions and settings across India. This is a harmful practice for several reasons including its association with the delayed initiation of breastfeeding, which may interfere with breastfeeding technique and production of milk, in addition to increasing the risk of infection in the infant. The World Health Organization (WHO) recommends exclusive breastfeeding for the first six months of life.

A rapid evidence synthesis was conducted to explore and identify common harmful postpartum practices and beliefs. Many studies from across India reported similar harmful postpartum practices. Some of the harmful practices included: giving prelacteal feeds, delayed initiation of breastfeeding, restriction of nutritious food and water consumption, early bathing of newborns, and unhygienic practices relating to cord care and personal hygiene. The review of evidence essentially showed that the socio-cultural influences on postpartum practices remain strong, which may sometimes lead to harmful practices. These practices may impact maternal and newborn health, both in the short-term and in the future.

What is a rapid policy brief?

A rapid policy brief is based on a rapid review which brings together global research evidence in a specific decision-making context.

Why this rapid policy brief was prepared?

This was prepared on request from the District Medical Officer (DMO), Malappuram, Kerala.

Suggested citation

Moola S, Tyagi J, Shah P, Nambiar D, Bhaumik S. Harmful Postpartum Beliefs and Practices of Mothers in India: Rapid Policy Brief. Vishakhapatnam: The George Institute for Global Health, India. August 2020.



Background

The postpartum period is an important transition time for a woman and her newborn.(1, 2) Some of the care practices in the postpartum period may have an impact on maternal and newborn health outcomes.

Traditional postpartum practices related to maternal and newborn care in the period are reported in many cultures and may relate to aspects of breastfeeding, nutrition and newborn care.(3) Some of these traditional postpartum practices have been found to be unsafe or harmful for mothers and newborns.

The District Medical Officer (DMO), Malappuram, Kerala, identified several harmful postpartum practices of mothers that were influenced to a certain extent by postnatal care attendants. The DMO requested for a rapid review of evidence to identify if similar harmful postpartum practices existed in different regions across India. A rapid review of evidence was undertaken to explore and identify such common harmful postpartum beliefs and practices, so that they may be compared against prevalent beliefs in the district, and countered, as appropriate.

Summary of the evidence

A comprehensive search was conducted to identify published and unpublished research on common harmful postpartum practices across India. Following a systematic and streamlined approach for identification and study selection, 22 studies were included in the final report. The studies were conducted in nine different states and one Union Territory (UT) in India including: Andhra Pradesh (AP), Delhi, Gujarat, Haryana, Karnataka, Kerala, Maharashtra, Odisha, Punjab, and Uttar Pradesh (UP). A majority of the studies were conducted in rural areas, followed by urban slums.

There was adequate evidence to show that harmful postpartum practices still exist and are widely prevalent in India, across settings and regions. Women who were less educated, primiparous and living in rural areas were more likely to use harmful postpartum practices related to maternal and newborn care. The studies included in the review reported common harmful postpartum beliefs and practices. These include:

- No handwashing before and after handling the baby.
- Improper bathing practices (including early bathing of the newborn).
- Use of unsterile cloths or wipes.
- Delayed initiation of breastfeeding.
- Giving prelacteal feeds (honey, sugar, etc).
- Delayed weaning.
- Withholding or discarding colostrum.



- Restriction of certain ‘hot’ and ‘cold’ foods (including fruits and vegetables that may be nutritious).
- Reducing daily water consumption.
- Unhygienic cord care including cord cutting practices.
- Application of homemade substances to the cord.
- Application of castor oil or breast milk to eyes of the newborn to clear any discharge.

Only one relevant study conducted in Kerala was identified. In this study, most of the traditional care givers were found to recommend prelacteal feeds for the newborns and restriction of fluids for the postnatal mothers to reduce abdominal distension and bleeding.(4)

Policy options

- Health education and promotion programmes should identify and discourage mothers and their family members from resorting to locally prevalent harmful postpartum practices
- A checklist of healthy postpartum practices may be developed for postpartum mothers, their families and for newborn care.
- It is important that community level health workers such as the ANMs, Anganwadi, and ASHAs in rural India are supported to develop locally tailored behaviour change communication strategies related to postpartum care.

Recommendations for future research

- In future, research should focus on how health workers can be educated and trained to ensure new mothers use beneficial postpartum practices that promote good maternal and baby health.
- Qualitative research methods could be potentially used to identify harmful practices that might be amenable to change.

References

1. World Health Organization. WHO recommendations on maternal health. 2017.
2. World Health Organization. WHO recommendations on newborn health. 2017.
3. Raman S, Nicholls R, Ritchie J, Razeen H, Shafiee S. Eating soup with nails of pig: thematic synthesis of the qualitative literature on cultural practices and beliefs influencing perinatal nutrition in low and middle income countries. *BMC Pregnancy Childbirth*. 2016;16(1):192.
4. Leena Sankar J, L., Amudha M. Maternal and New-Born Care Practices by Traditional Delivery Care Givers: A Cross Sectional Survey. *International Journal of Science and Research*. 2017;4(11):2028-32.



Competing interests

The authors do not have any relevant competing interests.

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