

Father's Involvement during the Pregnancy and Child Birth Time in Nepal

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Abstract

This study was conducted in two districts: Lamjung and Chitawan. All the respondents were 25 years and above fathers. The study collected data from face to face in –depth interviews. The findings show that almost respondents (fathers) care their pregnancy wives. Furthermore, 25-40 age group respondents care their pregnant wives more sensitively: they are aware of providing rest, not allowing carrying loads, supplying nutritious food, providing love and affection, go together for pregnancy checkup and regular help to solve their wives' problems at pregnancy time.

Keywords: antenatal care, birth, child, male, postnatal care, nutritious food

Introduction

Dan K Key and friends recommended the identified men have different descriptions of their relationships; responsibility was an obligation; ideal fathers provide support to mothers during childbirth; the health system limits male involvement in childbirth; men have no clear roles during childbirth, and exclusion and alienation in the hospital environment. The men described qualities of the ideal father as one who was available, easily reached, accessible and considerate (Kaye1, et al., 2014, p. 1) . Similarly, Goodman wrote fathers play an important role in the development of their children. Father involvement is situated at different domains, including child's academic achievement, mental health, socioeconomic status and adolescent relationships (Goodman, 2005)

WHO wrote on his report that Antenatal Care (ANC) can be defined as the care provided by the skilled healthcare professionals to pregnant women and adolescent girls in order to ensure the best health conditions for both mother and baby during the pregnancy (WHO, 2016, p. 95). Furthermore, Alio and friends wrote that an American study emphasizes the fathers' need to be an active participant in the pregnancy process, providing physical and emotional support, encouraging the mother, understanding the influence of hormones, empathizing with her and being patient with her (Alio, 2013, p. 5) .

Redshaw & Henderson wrote that a British study shows a majority of fathers is present for pregnancy tests or confirmation, for one or more antenatal checks (Redshaw, 2013, p. 4). Likewise, Uppsala University Uppsala Dissertations from the Faculty of Medicine 1057 team wrote that one improvement of these was better involvement of expectant fathers, as fathers were described as the mothers' best means of support and also had needs of their own. The fathers used different strategies to get involved during the pregnancy, but sometimes found it difficult to know what was expected of them (Widarsson, 2015, p. 2).

According to Joann O ' Leary and Clare Thorwick, when a baby dies, the anguish of the mother is visible to the world because she has the physical experience of pregnancy and giving birth, by this does not happen for fathers. They described the feeling overlooked; there was concern shown neither for the fathers 'equally devastating loss nor for their difficulty coping in the subsequent pregnancy (Thorwick, 2005, p. 80).

Lars Plantin stated that even if many fathers want to be involved with their children, and there is evidence that this can positively influence the health outcomes for the man, his partner, and children, very little or no help at all is offered specifically to the majority of the men regarding parenting (Plantin, 2011, p. 98).

Awalia Hanifah and friend wrote in Cimanggis Primary Health Care, Depok City, the coverage of both the first antenatal care visit (ANC) and the fourth ANC was 99.4% (2013) and 91% (2014). The husband support is one of the factors that plays an important role in mothers' ANC visit. This study aimed to assess predisposing, enabling, and reinforcing factors of the husband support towards their wives' ANC visit (Hanifah, Pratomo, & Hoang, 2018, p. 8).

Bhatta Bimala find majority of husbands had low knowledge about support during pregnancy, delivery and postpartum period while activities did for support was very negligible regardless of knowledge. Most of the husbands don't know about danger signs during pregnancy. Very low level of knowledge was found about birth preparedness, emergency obstetric conditions during delivery period. Husbands took decision regarding place of delivery in majority (Bimala, 2011, p. 45).

Sabitri Sapkota and friend write the results show that when a woman's husband is present at the birth, she feels more in control during labour. This finding has strong implications for maternity practices in Nepal, where maternity wards rarely encourage a woman to bring her husband to a pregnancy appointment and to be present during childbirth (Sapkota, Kobayashi, Kakehashi, Gehanath, & Yoshida, 2012, p. 1).

Sarah Lewis and friend concluded that although complex, expectant fathers do have an important role in maternal health and safe childbirth. Male involvement needs to be recognised and addressed in health education due to the potential benefits it may bring to both maternal and child health outcomes. This has important implications for health policy and practice, as there is a need for health systems and maternal health interventions to adapt in order to ensure the appropriate and effective inclusion of expectant fathers (Lewis & Lee, 2015, p. 1).

Magdalena Mattebo and friends wrote in Nepal, by tradition, family life and marriage are generally controlled by patriarchal norms, sanctions, values and gender differences. Women in Nepal have limited possibilities to make decisions regarding their sexual and reproductive health, as the husbands and other elders in the family make most of the decisions regarding family planning, pregnancy and childbirth (Mattebo, Sharma, Dahlkvist, Molinder, & Erlandsson, 2016, p. 31).

Olugbenga-Bello Adenike and friends wrote that this still shows that men lag behind in their responsibilities in improving maternal health (Olugbenga-Bello, Asekun-Olarinmoye, Adewole Adefisoye, Adeomi, & Olarewaju Sunday, 2013, p. 262). According to Isabel Lawot Lecturer, Tribhuvan University, Institute of Medicine, Pokhara, Nepal, the study concluded that a significant proportion of husbands were willing to provide support during maternal period. There are still people need to be aware and help their wives (Lawot, 2017, p. 78).

Kyi Mar Wai and friends wrote the majority of husbands supported their spouses' maternal care services use financially; however, they were less involved in birth preparedness and postnatal care. Exposure to maternal health education and their maternal health knowledge were main predictors of their involvement. Women were more likely to use maternal care services when their husbands company them for ANC visits and had a well-birth plan in advance (Kyi Mar, et al., 2015, p. 11).

R Rumaseuw wrote that significantly influence the participation of a husband in accompanying his wife during pregnancy examination are the wife's age, wife's education, husband's education, wife's working status, husband's working status, number of children and pregnancy status (Rumaseuw, et al., 2017, p. 7).

Suresh Jungari and Balram Paswan wrote that the major results of this study are the association found between husbands' knowledge of pregnancy complications and maternal health care service utilization. Husbands with complete knowledge of pregnancy complications were more likely to report antenatal care, delivery, and postnatal care utilization by their wives than husbands having no knowledge of the relationship between men's knowledge of pregnancy complications and maternal health care utilization among tribal communities in India (Jungari & Paswan, 2019, p. 10).

Sharmistha Self and Richard Grabowski wrote that the results indicate that an increase in educational levels can have direct and indirect effects that may lead to a significant increase in the use of maternity health care. Education levels of women (and men) by themselves were

found to have a significant positive effect; however, an increase in the level of education of the community as a whole was also associated with a significant positive effect on health care utilization (Self & Grabowski).

Government of Nepal conducted demographic and health survey that showed key findings in 2016 more than 8 in 10 women (84%) age 15-49 receive antenatal care (ANC) from a skilled provider (doctor, nurse, and auxiliary nurse midwife). The timing and quality of ANC are also important. Two-thirds of women have their first ANC visit in the first trimester, as recommended. Seven in ten women make four or more ANC visits (Nepal Demographic and Health Survey Key findings, 2016, p. 8).

Government of Nepal NDHS published report in 2016 showed that postnatal care helps prevent complications after childbirth. More than half of women (57%) receive a postnatal check within two days of delivery, while 42% did not have a postnatal check within 41 days of delivery. Similarly, 57% of newborns receive a postnatal check within two days of birth, while 40% did not have a postnatal check (Nepal Demographic and Health Survey Key findings, 2016, p. 8).

Objective

The main objective of this study is to explore fathers' involvement during the pregnancy and childbirth in Nepali People of Lamjung and Chitawan. The specific objective of the study is following:

- To explore status of Nepalese Fathers' involvement during the pregnancy and childbirth.

Methodology

The research was an explorative based on qualitative method. The study was conducted in Lamjung and Chitawan districts, Nepal. Eligible participants were 25 years and above fathers. The data were collected through in-depth interviews with semi-structure questionnaire especially with male. While talking about the philosophical foundation, philosophical stance guides the researcher about the way in which the data about a phenomenon were gathered, analyzed and report prepared. So research paradigm in a qualitative research acts as the guide of any research since it talks about involvement of fathers during pregnancy. It also deals with the researchers and their existence as well. Research paradigm is a collection of belief, which guides any researcher to decide what can be studied and how results can be interpreted. The researcher decided to use the interpretive and critical paradigm for this research work. According to Cohen and Mahion (L., 2007, p. 638), interpretive is concerned with understanding the subjective world of the human experience by interviewing or observing the participants. This paradigm gives importance to subjective relationship between the researcher and subject. It also helps the researchers to conduct this study in natural environment where the male participation is practiced.

There were total 20 respondents participated in in-depth interview through random sampling method, 10/10 respondents represent from Lamjung and Chitawan respectively. Applying of face to face interview was used at data collection. Collected data were complied, analyzed and prepare research report of the study.

Result and discussion (question wise result)

Fathers from rural area of Lamjung and Chitawan districts of Nepal participated in an individual level in-depth interview. Respondents answers concised and prepared report accordingly.

General information:

The age of respondents varied from 25 years and above. Respondents are divided into three groups these were i. 25-40 years old male, ii. 41 – 55 years and iii. Above 55 years respectively.

The respondents were also asked their age, education, family types and occupation. The fathers were found literate to BA (graduate). 25-40 years fathers' occupation are farmer, international labor, mason, carpenter, hydropower job, etc. 41-55 years fathers are found driver, farmers and social workers. Above 55 years fathers' occupation found farmer, job retired, etc.

Checkup wife's Health in pregnancy time:

Total 75% respondents reported that they carry their wives for checkup in health centers in Municipality, Rural Municipality and hospital (Palika level). They carry pregnancy wives for checkup 3-8 times. Mostly 25-45 years fathers were more actively involved in this matter.

Feed wife after delivery up to the 2 months Or what nutritious food feed after delivery: All the respondents replied that they provided meat (Chicken and goat), ghee, oil, rice, green vegetables, cardamom/Thyme soup (Jwano soup), beans soup according to mum advice and postpartum super food (Sutkeri masala). One respondent replied that he could not provide special food; he had provided normal family available food.

After birthing checkup wife and children in health centers: Those husbands (75 percent) reported that after birth too they carried their wives and children to the health centers for regular checkup.

Provided rest with nutritious food to wife:

Almost three-fourth husbands regularly provided nutritious foods and rest to their wives. Among them, 25-45 years group husbands were found more conscious.

Breast feed was enough to children up to 6 months:

Yes, 85 percent responds replied breast feed was enough. Only 15 percent replied that it was not enough. So that they fed animal milk (cow & buffalo, lacto), Jaulo & litto, Cerelec and Horlicks.

Full dose vaccination to children:

Yes, 90% respondents replied full dose vaccination was provided to their children. They provides BCG, Missals, Polio, accordingly.

Feed solid food (after 6 months) to children:

All the respondents fed milk (Cow & buffalo), Jaulo, Egg, Sarbottom flour, rice & pulse, bean soup, fruits, juice, green vegetables.

Local level nutritious food available to feed children:

They provided Litto & Jaulo, milk, egg, Sarbottom flour, rice & pulse, beans soup, fruit, green vegetables, nettle soup, dhido, chapati , etc. which were easily available in local level.

Conclusion

Husbands' involvement during pregnancy and after birth of a child is essential. The results show that even people from rural areas are also aware of love, care, affection and support to the pregnant woman. They are also aware of immunization. Their support in regular health checkup, arrangement of nutritious foods, providing rest, and consciousness during and sfter birthing show that they are well learnt.

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