

Narratives of Motherhood: Exploring Antenatal Practices Amidst Cultural Richness in Punjab's Nangran Village

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Abstract:- This study delves into the antenatal practices of pregnant women in Nangran village, Punjab, India. Guided by semi-structured interviews and focus group discussions, data collection was aimed for a comprehensive exploration of expectant mothers' experiences. Thematic analysis uncovered a rich cultural tapestry, illuminating five major themes: "Protective Rituals and Superstitions," "Cultural Beliefs and Dietary Practices," "Traditional Practices and Maternal Home Beliefs," "Gender Preferences and Social Norms," and "Social and Community Support and 21 sub-themes, that influence the experiences of expectant mothers. The finding reveals that pregnant women in a specific cultural context follow various traditional and superstitious practices for protection, adhere to cultural dietary practices and beliefs, observe traditional rituals and maternal home norms, express gender preferences influenced by social norms, and receive strong social and community support, contributing to their pregnancy experiences. The study advocates for collaborative efforts between traditional and modern healthcare systems to enhance maternal and child health outcomes.

Keywords:- Antenatal Practices, Pregnancy Beliefs, Cultural Traditions, Maternal Health, Focus Group Discussions, Thematic Analysis.

I. INTRODUCTION

Motherhood is a phenomenon that concerns women all around the world. This is not to say that all women are mothers, but it is to say that all women are affected in one way or another by motherhood, by its absence or presence [1]. Furthermore, motherhood—which we take to mean the gendered situation of being a mother—and mothering—which we take to mean the gendered practice of parenting in terms of everyday care and sustenance—are ongoing day and night in all kinds of societies and environments [2]. India is a diverse country with multiple religions, languages, ethnicities, and regions, which shape the pregnancy-related beliefs and practices of different communities [3]. Rooted in the traditions prevalent in India, the study acknowledges the diverse mosaic of religions, languages, and ethnicities that shape the pregnancy-related beliefs and practices of different communities[10].

As expectant mothers navigate the path to motherhood, their experiences are woven into a narrative deeply embedded in cultural beliefs. The study unfolds key themes, such as protective rituals, superstitions, dietary practices, traditional beliefs, gender preferences, and community networks. Each theme serves as a thread in the intricate tapestry of antenatal care, shedding light on the intimate and collective aspects that contribute to the holistic well-being of both mother and child. The study, labelled "Protective Rituals and Superstitions," delves into antenatal practices among pregnant women in rural India. It uncovers various protective rituals influenced by cultural beliefs, examining subthemes such as "Pregnancy Secrecy and Evil Eye Beliefs," where secrecy safeguards against bad luck, and "Protection Objects at the Bedside," featuring iron objects and water to ward off negativity. Another subtheme, "Desi Ghee and Normal Delivery," explores consuming clarified butter for a smoother delivery, while "Fair Complexion Beliefs" investigates practices for ensuring the baby's fair complexion. The study also sheds light on "Traditional Practices and Maternal Home Beliefs," including rituals with *Hing* and mustard, avoiding funerals, and the tradition of delivering at the maternal home.

Therefore, it is not surprising that some beliefs and practices are common across different groups, while others are specific to certain groups[10]. For example, the protective rituals and superstitions, and the cultural beliefs and dietary practices that we found in our study are rooted in the Hindu religion and culture [5], which is the dominant faith and tradition in India.

The themes outlined in study capture the essence of the antenatal journey, where protective rituals and superstitions intersect with cultural beliefs, traditional practices, gender preferences, and the invaluable support of social and community networks [4]. As we explore each theme and sub-theme, we gain insights into the intimate and intricate tapestry of motherhood woven by the women of Nangran Village of Punjab, India.

II. METHODOLOGY

The research, sanctioned by the university's research ethics committee, placed a strong emphasis on ethical considerations, including obtaining informed consent and ensuring participant confidentiality. Utilizing narrative and phenomenological research designs, the study unfolded in Nangran village, covering a catchment area that includes four villages: Bhallon, Majara, Nangran, and Majari, with a specific focus on the Health and Wellness Centre (HWC). Purposive sampling was employed to select a sample of 50 women, conveniently accessed through Mamta Divas, a weekly gathering at the HWC catering to pregnant women, mothers, family members, and healthcare providers who participate in antenatal, postnatal, and child immunization services. Data collection encompassed four Focus Group Discussions (FGDs) and three In-Depth Interviews (IDIs), employing semi-structured guides to delve into socio-cultural beliefs [5].

➤ Data Analysis

Thematic analysis was utilized to discern recurrent themes, offering valuable insights into the community's perceptions and practices regarding antenatal care.

III. RESULTS AND DISCUSSION: THEMATIC ANALYSIS

In the findings, the study delves into the rich tapestry of antenatal practices and cultural beliefs among pregnant women in Nangran Village, Punjab, India. Through thematic analysis, five major themes and 21 sub-themes emerge, unveiling a spectrum of protective rituals, dietary practices, traditional customs, gender preferences, and social support systems that significantly shape the antenatal experiences of the participants. The study finding highlights the importance of understanding the cultural context of antenatal practices. The thematic analysis revealed five major themes and 21 sub-themes, as shown in Table 1. Few quotations revealing the responses of the participants are also given in Table 1.

Table 1: Themes, Sub-themes, Descriptions, and Quotes on Antenatal Practices in Nangran Village

S. No.	Themes	Subthemes	Description	Quotes
1	Protective rituals and superstitions	Pregnancy secrecy and evil eye beliefs	Keeping the news of pregnancy a secret for the first few months to avoid bad luck	“[...] keep it a secret for a while.” P2
		Protection objects at the bedside	Placing iron objects or water by the bed to ward off bad dreams and negative energies	“[...] keep a small iron object under my pillow P5
		Mango leaves and positive vibes	Hanging mango leaves at the entrance of the house to attract positive vibes and blessings	“[...] hang mango leaves” P8
		Avoid cutting during eclipse	Refraining from cutting hair, nails, or vegetables during an eclipse to prevent harm to the baby	“[...] affect the baby’s health and growth.” P10
2	Cultural beliefs and dietary practices	Desi ghee and normal delivery	Consuming desi ghee (clarified butter) to facilitate normal delivery and avoid cesarean section	“[...] desi ghee every day makes delivery easier and smoother.” P15
		Dietary restriction and beliefs	Following certain dietary rules and avoiding certain foods during pregnancy	“[...] cause miscarriage or bleeding.” P12
		Fair complexion beliefs	incorporating milk and kesar (saffron) into their diets or "white" foods to ensure fair complexion of the baby	“[...] saffron milk have a fair skin and beautiful features.” P18
		Gaining weight for a healthy child	Eating more and gaining weight to have a healthy and strong child	“[...]the more I ate, the healthier my baby would be.” P20
3	Traditional practices and maternal home beliefs	Protective rituals with hing and mustard	pregnant women often have hing and mustard tied on their right hand, sometimes in the form of a thread or a small cloth pouch.	“[...] hing and mustard oil on my belly button during pregnancy keeps baby safe from germs and illnesses.” P22
		Avoiding funerals and movement restrictions	Staying away from funerals and limiting movements outside the house to avoid negative influences	“[...]afraid of catching something bad or seeing something unpleasant.” P25
		Maternal home tradition	Going to the maternal home for delivery and staying there for a few months after birth	“[...]tradition to go to our mother’s house for delivery.” P27

4	Gender preference and social norms	Desire for the male child	Hoping and praying for a male child to carry on the family name and lineage	“[...] A boy is a blessing and a pride for the family” P30
		Cultural norm self-grooming	Many expectant mothers are advised against practices like threading and waxing, as they are believed to potentially harm the baby.	“[...] threading or waxing during pregnancy as my mother said it was important to avoid any potential harm to the baby. P33
		Spiritual practices for protection	Performing certain spiritual practices such as chanting, praying, or visiting temples to seek divine protection and blessings	“[...] chant some mantras and pray every day believed that God would protect me and my baby from any harm.” P35
		Gender prediction by baby bump and taste	Predicting the gender of the baby based on the shape of the baby bump or the taste preferences of the mother	“[...] baby bump was round and low was craving sour foods, which meant a girl.” P38
		Restriction on sexual intimacy and meeting others	Avoiding sexual intimacy and meeting other men during pregnancy to prevent harm to the baby or the husband	“[...] not have sex with my husband during pregnancy. afraid of hurting the baby or causing complications or see any other men. considered bad for my husband’s health and life.” P40
5	Social and community support	Family bond	Having a strong bond with the family members and receiving their support and care during pregnancy	“[...] family was very supportive and caring.” P43
		Traditional Rituals	Following certain traditional practices such as God Bharai in the seventh month of pregnancy, the expectant mother is adorned with not just gifts but also abundant blessings and well-wishes	“[...]God Bharai was such a heartwarming event so blessed with the love and support of my family and the community.” P45
		Community network	Having a network of friends, neighbors, or relatives who provide emotional and practical support and share information and experiences	“[...] friends and neighbors who were also pregnant or had children gave me some tips and advice. They were like my sisters.” P48
		Biomedical care during pregnancy	Seeking biomedical care such as antenatal check-ups, immunization, or institutional delivery to ensure safe pregnancy and delivery	“[;...] hospital for regular check-ups and tests and delivered my baby in the hospital.” P50

The study employs thematic analysis, uncovering five key themes. Theme 1, "Protective Rituals and Superstitions," encompasses subthemes like "Pregnancy Secrecy and Evil Eye Beliefs," where expectant mothers in Nangran village practice secrecy in the early months to shield the baby from the "evil eye." This aligns with broader cultural beliefs, highlighting the profound influence of culture on pregnancy decisions. Another subtheme, "Protection Objects at the Bedside," reveals the use of iron objects under pillows and glasses of water for holistic security, rooted in cultural beliefs about their protective symbolism. Similarly, "Avoid Cutting During Eclipse" signifies pregnant women avoiding cutting activities during eclipses due to concerns about congenital issues.

These findings echo with studies like Sharma et al., (2016)[5], which explored the beliefs and practices of pregnant women in rural India. The shared practices include pregnancy secrecy, the use of iron objects, water for protection, hanging mango leaves for positive vibes, and

avoiding cutting during an eclipse. This consistency across studies underscores the prevalence and cultural significance of these rituals among pregnant women in India

Another theme explores "Cultural beliefs and dietary practices" with specific subthemes indicating that participants adhere to dietary restrictions during the first trimester, avoiding items like eggs, dry fruits, ripe papaya, pineapple, bitter gourd, and dates due to concerns about miscarriage risk.

In "Desi Ghee Consumption for Normal Delivery," participants shared a cultural practice of consuming desi ghee in warm milk during the last trimester, believed to ease normal delivery. This tradition reflects the intersection of cultural heritage and maternal care, emphasizing how dietary choices intertwine with cultural beliefs about childbirth.

The subtheme "Fair Complexion Beliefs" highlights practices aimed at ensuring a fair complexion for the unborn baby, involving curd, milk, saffron, and a unique emphasis on consuming "white" foods as the first meal.

"Weight Gain for a Healthy Child" suggests participants believe gaining weight during pregnancy is crucial for the baby's health, emphasizing proper nourishment. Similarly, Jolivet et al., (2018)[6] found urban Indian pregnant women adhering to these practices, but our study revealed differences in traditional practices, maternal home beliefs, gender preference, social norms, and community support among Nangran village participants.

Other themes explored also include "Traditional Practices and Maternal Home Beliefs," where subthemes like "Protective Rituals with Hing and Mustard" reveal that pregnant women wear *hing* (asafoetida) and mustard on their right hand, believed to protect against negative energies. This cultural practice, passed through generations, signifies the community's belief in the efficacy of these elements for maternal and fetal well-being.

"Avoiding Funerals and Movement Restrictions" highlights advice for pregnant women to stay away from funerals and limit movements during later pregnancy stages to prevent exposure to negative energies. This practice reflects a cultural belief in the susceptibility of pregnant women to external influences.

"Maternal Home Tradition" delves into the auspicious belief of returning to the maternal home for delivery, thought to bring well-being to the child. Participants shared experiences, underscoring the emotional and familial support received during childbirth. Notably, protective rituals, movement restrictions, and the tradition of going to the maternal home for delivery were specific to Nangran village participants, not reported by Goyal (2016) [7].

In exploring "Gender Preference and Social Norms," participants expressed a cultural preference for a male child, driven by the desire to preserve the family name. This reflects deeply ingrained gender preferences, discussed within the context of societal expectations. Expectant mothers adhered to cultural norms prohibiting practices like threading and waxing during pregnancy, as they were believed to potentially harm the baby. Despite initial reservations, participants shared experiences of compliance. Spiritual practices, such as reciting prayers, were adopted for divine protection, emphasizing the comforting aspect of these rituals. Participants also engaged in predicting the baby's gender based on the bump and taste preferences, adding a playful aspect to the pregnancy journey. Cultural norms discouraged sexual intimacy during pregnancy, citing perceived risks. Pregnant women were advised to avoid those who recently had an abortion for a positive environment. Our study uncovered these unique findings, differing from previous research, highlighting the influence of socio-cultural and geographical factors on pregnant women in India.

The last theme, "Social and Community Support," revealed the importance of family bonds as a crucial support system during pregnancy. Emotional and practical support from family members was emphasized. The "God Bharai" tradition around the seventh month celebrated with family, relatives, and the community, fostering love and support. Participants highlighted the value of a community network for shared experiences, creating a supportive web. Biomedical care, including routine checkups and referrals, was stressed for optimal maternal and fetal care. These practices, rooted in the local customs of Nangran village, differ from urban areas due to varying levels of education, awareness, access, and empowerment, as highlighted in previous studies (Upadhyaya et al., 2017) and (Ragini, 2018). Understanding this diversity is crucial for respecting and supporting the choices and preferences of pregnant women in India.

IV. CONCLUSION

In conclusion, the study delves into the beliefs and practices of pregnant women in Nangran village, Punjab, India, revealing a rich tapestry of cultural nuances. Through in-depth interviews and focus group discussions, five major themes and 21 sub-themes emerged, showcasing the diverse array of protective rituals, cultural beliefs, traditional practices, gender preferences, and community support that shape the antenatal experiences of women in the village.

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