

**CULTURAL BELIEFS, PRACTICES AND EXPERIENCES  
REGARDING HOME BIRTH AMONG RURAL WOMEN IN  
MYANMAR**

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**A THESIS SUBMITTED IN PARTIAL FULFILLMENT  
OF THE REQUIREMENTS FOR THE DEGREE OF  
MASTER OF ARTS (HEALTH SOCIAL SCIENCE)  
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MYANMAR**

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**CULTURAL BELIEFS, PRACTICES AND EXPERIENCES REGARDING HOME BIRTH AMONG RURAL WOMEN IN MYANMAR**

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**ABSTRACT**

The purpose of this study is to understand cultural beliefs and practices during the pregnancy period, childbirth (intra-partum) period, and postpartum period regarding home birth among rural women, to describe home birth experiences among rural women, and to know how women`s cultural beliefs and practices regarding home birth are shaped in the socio-cultural-economic contexts among rural women in Myanmar. Qualitative research design was used and data was collected by means of ethnographic interview and participant observations from August 20<sup>th</sup>, 2014 to December 20<sup>th</sup>, 2014.

The findings of this study showed that the factors influencing rural home birth women to give birth at home were 1) home birth cost is less, 2) having supporters when the baby is delivered at home, 3) home birth is a traditional practice (ancestors, mother, and sisters also gave birth at home), 4) home birth is our cultural norm, 5) when giving birth at home the mother can follow traditional practices, 6) mothers experienced no problems during their first home birth, 7) they did not have any problems related to pregnancy, and 8) the midwife did not tell them to go and deliver baby at hospital. In addition, the health care provider (health assistant) is another source of advice and influences women to give birth at home. The health assistant encouraged women to give birth at home as giving birth at home is good. Cultural beliefs practiced by rural home birth women during pregnancy, childbirth, and postpartum period do not aim to affect mother and baby`s health, but this study found that some cultural beliefs practiced by rural home birth women during pregnancy and the postpartum period have harmful effects on the mother and baby`s health. Furthermore, some cultural beliefs practiced by rural home birth women have gradually diminished. Regarding the experiences of rural home birth women, rural home birth women felt that giving birth at home is free and enjoyable, free and safe, free and peaceful, free, fulfilling, safe and no stressful.

Health care providers should be aware of rural home birth women`s cultural beliefs and practices that have harmful effects on the mother and baby`s health and should educate rural home birth women, rural home birth women`s mothers and mother-in-laws, and neighbours to promote maternal and child health, especially in rural areas in Myanmar.

**KEY WORDS: RURAL WOMEN/ HOME BIRTH/ CULTURAL BELIEFS AND PRACTICES/ EXPERIENCES/ MATERNAL AND CHILD HEALTH**

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## LIST OF ABBREVIATIONS

DOP	Department of Population
e.g.	For example
HA	Health Assistant
MDG	Millennium Development Goals
MIDSON	Midwifery Society of Nepal
MMR	Maternal Mortality Ratio
MOH	Ministry of Health
%	Per cent
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children Fund
UK	United Kingdom
WHO	World Health Organization

## **CHAPTER I**

### **INTRODUCTION**

#### **1.1 Justification**

“Birth is an event of great important in family life. Under healthy conditions, pregnancy and birth are a normal social and physiological process” (Vedam, 2003 is cited in Kukul, & Oncel, 2009). Home birth can be defined as giving birth to a baby in a home (MacDorman, Mathews, & Declercq, 2012). Every year, 40 million women give birth at home without the help of a skilled birth attendant around the world (State of the World’s Mothers, 2013). According to the World Health Organization (WHO) (2009), over half of women in developing countries give birth at home. In rural Africa (WHO, 2009), there are many reasons why women are choosing home birth. It is not only the lack of health providers that keep them from getting the care they need but also they live far from health centers and hospitals. There are also transportation barriers, cost barriers, cultural norms, and beliefs that impede a woman’s ability not to seek health care particularly during childbirth.

Home delivery of babies is common in many developing countries including Myanmar. For example, 86 % of women in Laos (Phoummalaysith, Hompannga, & Khamsida, 2005), 74 % in Pakistan and 42.0 % in Malawi gave birth at home (Abeje, Azage, & Setegn, 2014). In Ronsmans, Carin, & Graham’s study (as cited in Centre for the Study of Adolescence Population Action International, 2009), 90 to 95 % of women in Ethiopia (2009) gave birth at home .In Islam et al., study (as cited in Kukul & Oncel in 2009), the home birth rate in Bangladesh is 95% . According to a study by Chervenak, McCullough, Brent, Levene, & Arabin (2013), the home birth rate in the Netherlands is the highest in the developed world and also home birth has been traditionally the first choice for uncomplicated pregnancies.

Based on public health perspectives, home birth may affect maternal and child mortality. According to the Nepal Demographic Health Survey, 2006 (as cited in MIDSON, 2010), 81% of women give birth at home and 67% of maternal deaths occur

at home. In Bangladesh, 80% of maternal deaths occur at home (Patel, Burnett & Curtis, 2003). A study by Simfukwe (2011) in Dodoma, Tanzania, the maternal mortality rate is high because of a high home delivery rate, natural home birth habits, and traditional practices. A number of studies mentioned health complications related to home birth. One study found that in 146,752 women who had low-risk pregnancies in the Netherlands, two out of every 1,000 women died during childbirth at home and more than 50% encountered haemorrhaging or extreme blood loss (Harris, 2014). Another study in Washington showed that infants of planned home births were almost twice more likely to be at increased risk of neonatal death than infants of hospital deliveries. In addition, nulliparous women intending to give birth at home were more likely to have prolonged labour and postpartum haemorrhaging than the women giving births in hospitals (Pang, Heffelfinger, Huang, Benedetti, & Weiss, 2002). Tuladhar, Khanal, Khanal, Shrestha, & Giri (2009) found complications of home delivery at Nepal Medical College Teaching Hospital. The most common complication for transfer to hospital after home delivery was retained placenta with or without postpartum haemorrhage and the most common reason in women for transfer to hospital after 24 hours of home delivery was puerperal pyrexia.

In Myanmar, according to the Ministry of Health, 2009 (as cited in UNFPA, 2010), about 1.3 million women give birth each year. 76% of births in Myanmar take place at home (UNDP, 2012). According to DOP, 2009; MOH and UNICEF, 2006 (as cited in UNFPA, 2010), 4 out of every 5 deliveries take place at home, and 90% of maternal deaths occur at home or on the way to healthcare facilities. Most maternal deaths occur among home-delivered babies in rural areas (MOH & National Health Plan, 2006-2011, Myanmar as cited in Ministry of Planning and Economic Development & UNICEF, 2012). According to MOH & UNFPA (1999), in Myanmar most midwives generally recognize complications and refer the laboring woman to a hospital. However, some patients in rural areas are reluctant to give birth in a hospital and go on to deliver at home. Only when they encounter complications such as prolonged labour or obstructed labour, do they decided to go to a referral centre. The major causes of maternal deaths at home are complications of prolonged labour and postpartum haemorrhage. A recent study by UNFPA reported that 87% of maternal deaths occur in rural areas and the maternal mortality rate in

Myanmar is one of the worst in the region. The Government of Myanmar's Public Health Statistics Report 2011 (as cited in UNDP, 2012), estimates the proportion of skilled attendants at birth was 67%. According to the Nationwide Cause Specific Maternal Mortality Survey 2004-2005 (as cited in UNFPA, 2010), postpartum haemorrhage was a leading cause of maternal death (30.98%). Maternal mortality due to prolonged and obstructed labour and puerperal sepsis were 8.46% and 7.04%. Three quarters of all maternal deaths occur during delivery and the immediate postpartum period. Myanmar's maternal mortality ratio (MMR) is estimated to be 200 per 100,000 live births in 2010. This is a cause for concern as the country may not achieve the national MDGs 5 in reducing MMR to 130 per 100,000 live births by 2015 (UNDP, 2012).

However, some studies have shown that the outcomes of home birth are nearly as safe as that of hospital ones. In British Columbia, Canada, a study by Janssen et al. (2009) showed that there is no significant different outcome between planned home birth with a registered midwife and planned hospital birth with a midwife or physician. In this study, the rate of perinatal deaths per 1000 births was very low in all three groups; it was 0.35% among the planned home births, 0.57 % among the planned hospital births attended by a midwife and 0.64% among the planned hospital births attended by a physician. In addition adverse maternal outcomes were rare in all three groups. Women who planned a home birth with a registered midwife were significantly less likely to have perineal tear, postpartum haemorrhage when compared to those who planned a hospital birth with a midwife and a physician. In the Western world, a study by Olsen (1997) also highlighted that prenatal mortality rate was not significantly different between planned home birth group and planned hospital birth group. In Coren's study, 2002 (as cited in Kukul, & Oncel, 2009) home birth has its advantages and disadvantages. The advantage of a home birth is that the mother gives birth in a familiar setting, feels more comfortable, and secure. The main disadvantage is that home birth presents with an increased risks of adverse neonatal and maternal outcomes.

Dealing with women's point of views, factors influencing women's decision to give birth at home were shown in many studies. According to a study by Jouhki (2012, p.56) in Finland: "Several reasons led to a decision to give birth at

home. The main reasons were: previous birth experience, considering birth to be a natural process, increased autonomy, the home environment, intuition, the desire to choose the birth attendant, mistrust of the medical establishment and the opportunity to have the baby's siblings present at the birth". Kukululu, & Oncel (2009) showed that the reasons why women in rural Turkey choose to give birth at home were financial difficulties, feeling more convenient at home, far from health centers, and trusting the person who would assist in the time of home birth.

Cultural belief is one of the major reasons cited by women when they decide to give birth at home. According to a study by Boucher, Bennett, McFarlin & Freeze (2009) in the United States, women stated that their reason for choosing a home birth was due to their beliefs and they felt home was the safest place for them. In addition, they reported that home birth allowed the chance for their better health outcomes. Women and Children First (UK), 2014 reports that 30% of the population of women in Ethiopia gave birth at home. The reasons for giving birth at home are cultural factors and traditional beliefs. Then one study also found birthing beliefs regarding home birth in Western Australia. In this study, there is a significant belief held by home birth couples and their attendants. They believed that childbirth is a natural physiological event, and it was possible to deliver a baby at home naturally. Husbands believed that the body of a woman is just a natural thing and the body is meant to give birth in nature without any intervention and interference (Morison, Percival, Hauck & McMurray, 1999).

In many societies, the birthing process is culturally constructed. The cultural patterning of birth consists of beliefs, practices and meanings related with pregnancy, childbirth and postpartum period (Sargent, n.d.). In Zambia in Southern Africa, a study by Maimbolwa, Yamba, Diwan, & Ransjo-Arvidson (2003) pointed out some cultural practices and beliefs during pregnancy, labour and delivery, and postpartum periods among Zambia women. They also mentioned that there are some food restrictions and behaviour restrictions during pregnancy, labour and postpartum period as preventive measures. Pregnant women avoided having eggs during pregnancy period because they believed the baby will be born without hair if they eat eggs. They also believed that eating fish can cause infant abnormality and therefore, they avoided eating fish during pregnancy. Another belief is that having a sexual

relationship outside of marriage during pregnancy is harmful and that it could injure the unborn baby and cause obstructed or prolonged labour or death of the mother and baby as well during delivery. Therefore, pregnant women avoided having sex from the eighth month of pregnancy onwards. During labour and delivery period, only a pregnant woman is allowed to inform her aunt or a very close relative that she felt labour has been started. They believed if other people know that she is in labour, other people will bewitch her and this can cause something bad to happen during the delivery. During postnatal period, a delivered mother sings when the umbilical cord is being cut in order to prevent after birth pains. A new mother avoided cooking till her baby's umbilical cord dropped off because they believed the woman would get unsolved disease.

In Indonesia, there are some beliefs about what types of food should and should not be eaten during pregnancy by women. A significant belief is that vegetables are better than meat because they believed that eating vegetables enhances milk production and freshens the taste of breast milk. They also believed that eating a lot of meat will cause the breast milk to be a bit sour and the baby will not want it (Wulandari, & Whelan, 2011). Similarly in Thailand, some behavior restrictions and food restrictions are also practiced during the postpartum period among Thai women. Avoidance of sexual intercourse is practiced for women's health and involution of the uterus during postpartum period in terms of behaviour restriction. During the postpartum period, several behaviour restrictions are common for Thai women such as resting, avoidance of carrying heavy things, and avoidance of exercise. Women are allowed to have protein, vegetable, and fruit. However, women are not allowed to eat buffalo meat because they believed that buffalo meat is harmful, toxic and poisonous for postpartum women. In addition to behaviour and food restrictions, taking hot baths, taking hot drinks, and maintaining body heat are performed during postpartum period (Kaewsarn, Moyle, & Creedy, 2003).

In Myanmar, most deliveries take place at home. Many women prefer to give birth at home for several reasons, including the low costs and the availability of family support. However, there is a general belief also that giving birth at home is perfectly safe, and therefore only few women go to hospital for delivery (MOH & UNFPA, 1999). There are some traditionally dietary restrictions during pregnancy.

Another belief is that the postpartum period (*me dwin*) is recognized as a time of susceptibility to illness as the mother's body is "cold" from blood loss. Thus, the body is warmed with external heat and women eat warm foods and drinks with "hot" properties as well ([https://bearspace.baylor.edu/Charles\\_Kemp/www/burma.htm](https://bearspace.baylor.edu/Charles_Kemp/www/burma.htm)). In Myanmar, the Karen people are usually more traditional than other Burmese people. There are some cultural beliefs of the Karen people that are practiced during pregnancy and the postpartum period. Women avoid spicy foods during pregnancy and the postpartum period and most women give birth at home traditionally. After delivery, women rest for one month and eat only rice and a special soup (Chapman, PowerPoint slides).

As shown previously, childbirth is a natural process that is encapsulated by cultural practices that have been handed down for many generations and cultural beliefs regarding childbirth exist everywhere around the world. Numerous studies in other countries have pointed out the reasons why women choosing home birth are cultural and social factors, economic, transportation barriers, and lack of access to health care services, as well as mistrust of the medical system (Maimbolwa, 2003; Jouhki, 2012; & Shrestha et al., 2012). However, in Myanmar there have few reports studying about factors related to why women decided to give birth at home which have been written about economic difficulties, transportation barriers, lack of access to health care services, and beliefs (MOH & UNFPA, 1999; UNFPA, 2010). Specifically, no studies on the cultural beliefs and experiences regarding home birth in Myanmar have been conducted. As mentioned above, cultural belief is one of the major reasons why women decide to give birth at home and birth is culturally constructed everywhere and the cultural patterning of birth consists of beliefs, practices and meanings related to pregnancy, childbirth and the postpartum period. Different cultures might have different meanings, beliefs, and practices surrounding pregnancy, childbirth and postpartum period regarding home birth. This research focusing on the meaning of those women gives to giving birth and pregnancy. Furthermore, women's cultural beliefs and practices during pregnancy, childbirth and postpartum period, perceptions of home birth risk, feelings of childbirth at home, home birth experiences and the reasons why rural women decide to give birth at home need to be understood as well. In order to understand rural women's emic view about the whole process of

home birth, the cultural interpretive approach will be used. In addition to knowing the rural women's emic view on home birth, this research can discover what are the rural women's cultural beliefs and practices regarding home birth from the cultural interpretive perspective. Some practices regarding home birth might have beneficial and harmful effects on both mother and newborn and this study will explore why women still keep practicing by understanding their cultural beliefs. Therefore, cultural beliefs, practices and experiences regarding home birth among rural women in Myanmar should be studied from more holistic point of view along with socio-cultural-economic context.

## **1.2 The potential benefits of the study**

The topic of birth and reproduction is interesting to examine from the perspective of medical anthropology because though birth is a biological process, it is everywhere culturally constructed in many societies. The management of pregnancy, birth and the postpartum period has important consequences for women's reproductive health. By looking at the birthing process from the cultural interpretive approach, people's behavior, culture, beliefs on home birth, and practices in birthing process can be understood. Women's health concerns and women's perceptions about their health during antenatal period, intra-partum period and postpartum period can also be understood. Understanding women's cultural beliefs, and practices related to birthing process might help women to overcome their health concerns. This also helps the government, health professionals and health policy makers to redesign a comprehensive health care system by improving high quality of health care services to improve women's reproductive health especially in the rural areas, Myanmar.

## **1.3 Research objective**

### **1.3.1 General objective**

To explore the cultural beliefs, practices and experiences regarding home birth and socio-cultural -economic context of Myanmar.

### 1.3.2 Specific objectives

- To understand cultural beliefs and practices regarding home birth among rural women in Myanmar.
- To describe home birth experiences among rural women in Myanmar.
- To know how women`s cultural beliefs and practices regarding home birth are shaped in the context of socio-cultural-economic.

## 1.4 Research question

### 1.4.1 General research question

What are cultural beliefs, practices and experiences regarding home birth among rural women in Myanmar?

### 1.4.2 Specific research questions

- 1) What are the perceptions related to home birth and home birth risks among rural women in Myanmar?
- 2) How do social, cultural and economic factors influencing women to give birth at home in Myanmar?
- 3) What are the cultural beliefs related to home birth at the antenatal period, intra-partum period and postpartum period?
- 4) What are the practices of home birth at the antenatal period, intra-partum period and postpartum period?
- 5) What are the experiences of women regarding home birth?

## 1.5 Operational definition

**Home birth:** refers to giving birth a baby at home.

**Antenatal period:** refers to a period between the conception of the fetus and delivery or pregnancy period.

**Intra-partum period:** means during childbirth period or the period from the onset of labor to come out of the baby from the uterus.

**Postpartum period:** refers to a period beginning immediately after the birth a child and extending for about six weeks.

**Cultural beliefs:** refer to the women's perceptions and beliefs about health, disease and health care based on culture during pregnancy period, intra-partum period and postpartum period such as giving birth at home is perfectly safe, eating the whole banana will born the baby twins, and lifting heavy objects during pregnancy period can cause spontaneous abortion or miscarriage.

**Practices:** refers to avoidance of eating the whole banana, hot food and spicy food and taking herbal showers for easy birth based on cultural beliefs during pregnancy period. During intra-partum period, rituals, applying herbal medicine and eggs on the abdomen to ease delivery are practiced. During postpartum period, avoidance of sex intercourse, taking hot baths and staying by the fire are practiced based on cultural beliefs.

**Experience:** refers to women's feelings and experiences based on what situations and complications they have encountered during pregnancy, childbirth and postpartum period related to home birth including women feel home birth is safe or unsafe, comfortable, painful during childbirth and so on.

## **CHAPTER II**

### **THEORETICAL CONCEPTS AND LITERATURE REVIEW**

#### **2.1 Definition of home birth**

Home birth refers to childbirth taking place outside health facility or at home (Simfukwe, 2011). It includes planned home birth and unplanned home birth. Planned home birth is defined as a birth that is intended to have a baby at home with the help of a home birth practitioner. Home birth practitioners involve midwives and medical practitioners, both are registered and non-registered, but not indigenous traditional midwives. Unplanned home birth refers to a birth at home where the woman is assisted by family members and friends (Batian, Keirse, and Lancaster, 1998). According to South Africa Health (2013), a planned home birth is defined as a planned birth where the woman made a decision to have a normal vaginal delivery at home with the assistance of a registered practitioner. In the study, the researcher will be focusing on both planned home births and unplanned home births.

#### **2.2 Theoretical concepts**

##### **2.2.1 Cultural Interpretive Theory (Meaning-centered Approach)**

Medical anthropology examines how health and well-being are socially and culturally constitution in comparative and transnational contexts and the ways in which culture influence the experience of illness, the practice of medicine and the process of healing for the individual and community. There are three theoretical perspectives in medical anthropology to understand human health: the epidemiological or ecological perspective, the interpretive perspective, and critical medical anthropology perspective. The interpretive perspective among these three theoretical perspectives looks at the way cultures use symbolic meaning to explain and understand health and illness (<http://en.wikibooks.org/>). In this respect, cultural

interpretive medical anthropology is the study about how people in different cultures and social groups explain the causes of their ill health, the types of treatment they believe in, and to whom they turn if they get ill. It is also the study of how these beliefs and practices relate to biological, psychological and social changes in the human organism, in both health and disease (Helman, 2001).

Medical anthropology is a brand of social and cultural anthropology. Anthropologists studying the socio-cultural anthropology pointed out that in all human societies, beliefs and practices relating to ill health are a central feature of the culture. These are connected to beliefs about the origin of a much wider range of misfortunes (accidents, interpersonal, conflicts, natural disasters, crop failures, theft and loss), of which ill health is one form. In some societies, the entire range of these misfortunes is blamed on supernatural forces, or on divine retribution, or the evil of a witch or sorcerer. Therefore, the values, and the customs linked with ill health are part of the wider culture and cannot be studied in separation from culture (Helman, 2001). Cultures all over the world use different methods of meaning to describe and respond to illness. Anthropologists studying these differences with symbolic meaning use the interpretivist approach to medical anthropology. This interpretive perspective looks at illness from an emic perspective, to understand health and illness relative to a particular culture. By studying an emic view on a culture, medical anthropologists can more understand that idea of embodied person-hood. Embodied person-hood is the relationship of cultural beliefs and practices in connection with health and disease to the sentient human body (<http://en.wikibooks.org/>). Emic view is that the anthropologists' focus on understanding and studying culture in context usually implies trying to find out how people view their own situation and how they solve the problems (Hardon et al., 2001).

Anthropologists have stated many definitions of culture and here pick up one early well known definition of culture by Taylor (1871). Taylor, 1871 (as cited in Helman, 2001) stated "Culture is that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society." Many aspects of people's lives such as their beliefs, behavior, perceptions, emotions, language, religion, rituals, family structure, diet, dress, body image, concepts of space and of time, and attitudes to illness, pain and

other forms of misfortune are influenced by cultural background and all of these aspects may have important implications for health and health care (Helman, 2001).

Good (1994:53) explained that disease is associated with culture in the interpretation of human illness. Disease is not an entity but an explanatory model. Disease belongs to culture, in particular to the specialized culture of medicine. And culture is not only a means of representing disease, but is essential to its very constitution as a human reality. According to Baer, Singer, & Susser (1997), from the cultural view, disease is knowable, by the sufferers and healers alike, only through a set of interpretive activities. These activities include an interaction of biology, social practices, and culturally constituted frames of meaning (e.g. in the Western culture, there is an association between obesity and lack of self control) and result in the construction of clinical realities (e.g. a diagnosis of AIDS or the flu). That different sub-specialities of biomedicine episodes occasionally reach quite different conclusions even about the same clinical episode confirms to interpretive medical anthropologists the basic role of cultural construction in the making of a disease.

For example, in Beals and Taylor's study (as cited in Joralemon, & Donald, 2005), in South India, cholera was thought to be caused by goddesses as a punishment for sinful behavior. Similarly, in China, cholera was caused by sin and divine punishment during outbreak in 1942; public rituals were performed to placate the angry gods (Hsu, 1955 as cited in Joralemon, & Donald, 2005). Levi-Strauss, Favret-Saada, & Wikan also explained cultural construction of disease. For example, malaria is perceived as being caused by a microbe. However, earlier it was thought to be unhealthy night air or "Roman fever". Both of these explanations are cultural constructions, even though one is seen as untrue, mistaken, and one as correct, true. Because of belief in certain biological causes then it is known that there is already a biological cause. This knowledge is however an approximation, a pure biological result cannot be derived without culture. It is agreed that there are underlying biological causes for disease, thus, disease should be understood not only from an underlying biological understanding but also as a set of words, concepts and values embedded in a cultural, social and political context.

Based on the cultural interpretive approach of medical anthropology, "Childbirth is a significant human experience, its social meaning shaped by culture in

which birthing women live. Cultures throughout the world express the meaning of childbirth through different beliefs, customs and practices. These diverse cultural interpretations are part of a larger integrated system of beliefs concerning men, women, family, community, nature, religion, and supernatural powers” (Lefkarites, 1992, p.385 as cited in Liamputtong et al., 2005). Many studies highlighted the outcomes of childbirth at home is as good as that of clinical ones, but childbirth at home is dangerous for both mother and newborn if something went wrong during childbirth. However, in the women`s opinion, birth is not a disease, is a natural physiological process and they did not think that going into hospital was necessary. That`s one of the most significant reasons when women deciding a home birth (Jouhki, 2012). Birth process is culturally constructed everywhere. All cultures share beliefs about the vulnerability of the mother and fetus during pregnancy and throughout the early postpartum or lactation period. In Malawi, it is believed that when a pregnant woman eats food containing pepper, the baby will be born with a rash and therefore pregnant women are not allowed to eat spicy foods. There is another belief that if pregnant women eat eggs, the baby will be born with an egg shaped head, so pregnant women are advised not to eat eggs (Kamwendo, 2009). In Lao PDR culture, the placenta is buried into the earth near the house and makes a fire around buried area. It is believed that if the placenta is buried far from the house, the child would die (Sychareun et al., 2009). In many cultures, the postpartum period is considered as one of the vulnerability for both mother and child and is characterized by a reduction of household chores, minimal social interactions, and support from female relatives (Whittaker, 2004). Therefore, birthing process should be studied from the cultural interpretive view of medical anthropology to get better understanding of the rural women`s culture, beliefs and practices related to antenatal period, intra-partum period and postpartum period of home birth.

### **2.2.2 Health Care Pluralism System (Kleinman Model)**

The health care system consists of not only biological aspects but also consists of social and cultural ones. Besides the formal health care system which includes the medical and nursing professions, there are usually smaller, alternative systems such as homeopathy, herbalism and spiritual healing which are popular in

many societies and countries. These might be termed health care sub-cultures (Helman, 1990). A health care system includes “Patterns of belief about the causes of illness; norms governing choices, and evaluation of treatment; socially-legitimated statuses, roles; power relationships, interaction settings, and institutions” (Kleinman, 1980, P.24). According to Kleinman (1980), health care system is identified and described into three sectors that are interconnected and overlapping with each other.

**The popular sector:** This is the lay, non-professional, non-specialist domain of society, where illness is first recognized and treated by self medication without consulting either folk healers or medical practitioners. In this sector, the most important field of health care is the family where illness is recognized and then treated by self-treatment, following the advice given by relatives, friends, neighbours or other lay persons. Self-treatment that people perform based on lay beliefs about the structure and function of the body, and the origin and nature of ill-health. It includes a variety of traditional treatment or practices such as food diet and behaviour or herbal medicines. These practices are already linked from people to people in the society based on interaction with their relations and social network such as family, friends, and other lay experts, all of which make up an informal relationship respond to ill-health. Those who had illness experiences share the information to each other (Kleinman, 1980; Helman, 1990).

**The folk sector:** This is non-professional sector. This is comprised of local healers, such as herbalists, bone-setters, spiritual healers and traditional birth attendants (TBAs). This sector plays an immediate role between popular and professional sectors. Most folk healers share the basic cultural values, and grasped the same world view of the communities in which they live, including beliefs about the origin, significance and treatment of ill health. In many societies, where illness and other forms of misfortunes are blamed on social causes (witchcraft or Evil Eye) or supernatural causes (gods, spirits or ancestral ghosts), sacred folk healers are mostly common. Their approach is usually a holistic one which is dealing with all aspects of the patient’s life, including relationships with others, with the natural environment, and with supernatural forces, as well as physical or emotional symptoms (Helman, 1990). In China, India, Vietnam and Cambodia, traditional healers exist together with modern doctors and other health care providers. Thus, folk medicine is a mixture of

many different components, some are related to the professional sector and some closely relate to popular sector (Kleinman, 1980).

**The professional sector:** This sector is composed of medical specialists who working legally in health facilities such as physicians, nurses, midwives, and physiotherapists. In most societies, this is basically modern scientific medicine. In addition to medical specialists, members of other professionalized indigenous medicine such as Chinese, Ayurvedic medicine also belong to the professional sector.

### 2.2.3 Explanatory Model

Explanatory models (Ems) are held by both patients and practitioners. They offer explanations for the origins of a condition (sickness) and treatment to guide choices among available therapies. Meaning is given to the symptoms through explanatory models (Hardon, et al., 2001). Kleinman suggested that a useful way of looking at the process of illness is the explanatory model.

Kleinman suggested that by exploring the explanatory model of illness we can better understand our patients and families, in effect making sense out of nonsense. To understand others, ask what, why, how, and who questions. For instance: What do you call the problem, What do you think the illness does, What do you think the natural course of the illness is, What do you fear? Why do you think this illness or problem has occurred? How do you think the sickness should be treated, How do want us to help you? Who do you turn to for help, Who should be involved in decision making?

Explanations were provided into five aspects of illness: (1) the etiology of the condition, (2) the timing and mode of onset of symptoms, (3) the pathophysiological processes involved, (4) the natural history and severity of the illness and (5) the appropriate treatments for the condition. These models respond to a particular episode of illness, and are not identical to the general beliefs about illness that are held by that society.

The explanatory model can also be useful in interpreting the culture of Western medicine to others who find our explanatory model unusual. The Western medical model is mechanistic in nature; the body is like a machine, prone to malfunctions, requiring tune-ups or occasional part replacement. The patient's

obligation is to present this 'machine' to the 'mechanic' (physician) who will make repairs. This explanatory model differs greatly from other models that view illness more as an imbalance of forces (e.g. Chinese - yin/yang; Hispanic – hot/cold) or as being influenced by unseen forces such as spirits, demons or curses.

#### **2.2.4 Balance and Imbalance Theory**

In all these theories, the health of the body is thought to depend on the harmonious balance between two or more elements or forces within the body. This balance is dependent on external forces, such as diet, environment or supernatural agents, as well as on internal influences such as inherited weakness, or state of mind. The most widespread of these theories is the humoral theory, which has its roots in ancient China and India, but which was elaborated into a system of medicine by Hippocrates. In the Hippocratic theory, the body contained four liquids or humors: blood, phlegm, yellow bile and black bile. Health resulted from these four humors being in optimal proportion to one another, whereas ill-health from an excess or deficiency of one of them. Treatment for imbalance/disease consisted of restoring the optimal proportion of the humors by removing excess (by bleeding, purging, vomiting, starvation), or by replacing the deficiency (by special diets, medicines, etc.).

In Latin American folk medicine, the humoral theory often called the 'hot-cold theory of disease', postulates that health can be maintained (or lost) only by the effect of heat or cold on the body. As Logan points out, 'hot' and 'cold' here do not pertain to actual temperature, but to a symbolic power contained in most substances, including food, herbs and medicines. In addition, all mental states, illnesses, natural and supernatural forces are grouped in a binary fashion into hot or cold categories. To maintain health, the body's internal 'temperature' balance must be maintained between the opposing powers of hot and cold, especially by avoiding prolonged exposure to either quality. Certain illnesses are hot illnesses, believed to result from over-exposure to sun or fire or from ingesting hot foods or beverages. Both pregnancy and menstruation are considered to be hot states, and like other hot conditions are treated by the ingestion of cold foods and medicines, or by cold treatments such as sponging with cold water. Such beliefs can have dangerous effects on women's health. For example, postpartum or menstruating women from parts of Latin America may

avoid certain fruits and vegetables, which they classify as cold and liable to clot their hot menstrual blood. The avoidance of such foods, in women who already have a diet deficient in vitamins, may eliminate even more of these vitamins from their diet. In one American study, some postpartum Puerto Rican women believed that if the lochia was 'clotted' by cold foods it would be reabsorbed to cause nervousness, even insanity. As a preventive measure, they drank tonics containing hot foods, such as chocolate, garlic and cinnamon (Helman, 1990).

In some Eastern countries such as China, Vietnam, Korea and Japan, traditional medicine gave explanation of health as harmonious balance between two contrasting cosmic principles: *yin* and *yang* (balance and imbalance theory). The *yin-yang* dichotomy was first developed in China as early as the sixth century B.C. The principle of *yin-yang* is always illustrated as the theoretical foundation of Chinese medicine and as a major tool for classifying medical or health phenomenon. Generally, brightness outside, activeness, heat, and hyper function are *yang*, inside, coldness, darkness, and hypo function are *yin*. The original meaning was that *yang* is the bright side and *yin* is the dark side. Although *yin* and *yang* are opposite relationship, they are complementary each other. For example, without *yang*, there is no *yin*, and without *yin*, there is no *yang*.

If *yin* and *yang* are in equilibrium, the person will be in good health. If *yin* dominates *yang*, one may feel cold, weak, and pale or one may suffer from dizziness. On the other hand, if *yang* is strong, one may feel hot or feverish, restless and may suffer from insomnia. The same *yin-yang* principle was also applied to food that is divided into two kinds "hot and cold". Hot and Cold foods are defined by type of nature rather than temperature. If a person is in a hot state, cold foods are given to cool down the system and back to healthy condition. Hot foods are considered good for treating common cold, but it is harmful in pregnancy. Cold foods are avoided after childbirth. Therefore, this is the main reason that pregnant women and postpartum mothers follow "hot and cold" foods principle during pregnancy and postpartum period (Shi, 1999).

## **2.3 Literature Reviews**

### **2.3.1 Cultural beliefs about childbirth at home**

Culture is one of the major contributing factors that make women decide to choose a home birth (Tabatabaie et al., 2012). Childbirth is a cultural process, therefore each culture has its own beliefs, views and meanings related with it. There are some studies which highlight how cultural beliefs influence on decision to choose a home birth. In Western Australia, a study by Morison, Percival, Hauck, & McMurray (1999) pointed out, home birth couples and their birth attendants view that birth is a natural process, and not frightening event, so it is possible to give birth at home in nature. Besides, husbands believed that a woman's body is a natural thing and the body is intended to birth without medical interventions. Women also believed that there is no special breathing at home birth and it is just relaxing. Another study in America by Boucher, Bennett, Barbara, & Freeze (2009) shows that although the percentage of hospital birth in American has increased, home birth still remains approximately 1% of American women. It is because of cultural beliefs. In this study, women who planned to birth at home believed that home is the safest place to birth and home birth has a better possibility for health outcomes. Furthermore, women believed that there is no pharmacological intervention in home birth, home is comfortable, peaceful, and safer environment for their babies than hospital. The result of a study in Burkina Faso also point out culture effects on decision to choose a home delivery. Women in this study revealed that giving birth at home is just bending down, whereas in health facility, it is suggested to lie down. So they believed that they can deliver a baby at home safely if they bend down. Besides women believed giving birth with no crying, is a good signal of bravery for the woman. In these situations, women choose to birth at home with the help of few persons as to be kept secret if they cried (Some et al., 2011).

### **2.3.2 Cultural beliefs and practices in antenatal period, intra-partum period and postpartum period regarding home birth**

**In developing countries:**

Liamputtong et al. (2005) showed that there are some dietary and behavioral restrictions among Thai women during pregnancy. Consumption of *khong salaeng* (allergic foodstuff) was particularly avoided by pregnant women. They believed consumption of *khong salaeng* during pregnancy may have a negative side effect on the health and well-being of a fetus. Women are not allowed to eat spicy food and drink coffee and tea, for the safety of their unborn baby. And also women are not allowed to eat a whole banana during pregnancy because they believed that eating a whole banana may cause a birth obstruction. They believed eating egg plants during pregnancy may cause anal pain after giving birth or during a confinement period (*yu dyan*). As behavioral restrictions, women avoided doing rigorous activities during pregnancy such as lifting heavy objects, lying down on their abdomen and sexual intercourse as they believed that these activities may lead to a spontaneous abortion or stillbirth. Some cultural knowledge is more symbolic. Pregnant women are not allowed to attend a funeral, even if one of their family members passing away. They supposed that it is not good for a pregnant woman and attending funeral might affect pregnancy. As another strong cultural belief, they believed that preparing things like nappies and clothes for their unborn baby will result in the death of the unborn baby.

In addition to dietary and behavioral restrictions, women prepared for easy birth by eating of some food stuffs during pregnancy. Women eat *pak plang* (a vine-like green vegetable) during pregnancy to make women give birth easily. Because they believed that vegetables will make the baby's body slippery, so that the baby can slip out easily (Liamputtong et al., 2005). Similarly, in the Philippines, pregnant women eat green leafy vegetable, as it is believed that the consumption of vegetable will help for an easy birth (Hadwiger, & Hadwiger, 2012). In Thailand, women mentioned that eating traditional herbal medicine (*ya tom*) will make the baby strong, thus facilitating for an easy birth. Besides, women take magical showers (*nam mon*), which has been blessed with sacred words during pregnancy to prepare for an easy birth (Liamputtong et al., 2005).

A study by Hadwiger & Hadwiger (2012) in the Philippines state that there are some beliefs and practices based on folk culture during pregnancy and childbirth among Filipina women. Pregnant women avoided jumping up and down, lifting heavy things or wearing high heels shoes to prevent clip or any deformity for the baby. When

pregnant women go out during the evening or night time, they wear hats to protect their unborn baby from dew because they believed that dew is not good for the baby. Women believed that eating twin bananas during pregnancy will have twins. Hence, they avoided eating twin bananas. Women mentioned that they carry ginger with them when they go to somewhere or unfamiliar place to protect their baby from evil spirits because they believed that evil spirits may cause the baby's head to have extra water.

In Lao PDR, a study by Sychareun et al. (2009) pointed out that “most of the women during pregnancy reduced their daily physical activities, especially hard work was prohibited”. Rigorous activities are considered as harmful to the pregnancy because they believed that the activities can lead to abortion. Therefore, lifting heavy objects and sexual intercourse are avoided to prevent an abortion. However, women keep doing light works such as cooking and cleaning their houses through pregnancy. They believed doing light activities will help the women to have enough energy to push during in labor. But the women are not allowed to sleep during day time as they believed that they will encounter difficulty in labor and the baby would have jaundice after giving birth.

Liamputtong et al. (2005) said that there are also many precautions in Thai culture during the childbirth period. For example, no one in the family is allowed to punch a nail in a plank or other such the activities while the woman is in labour. Symbolically, they believed nailing and punching activities will cause the birth to be difficult. When the woman is in labour, all windows and doors are opened wide because they believe that this signifies symbolically an easy birth. When giving birth, the woman faces the east. “It is believed that east is the direction of first light and hence it symbolically means birth and life”. On the other hand, they believed west is associated with death in Thai culture. Hence, facing the west is prohibited when giving birth. There is also a ritual event regarding childbirth in Thai culture. It is called *bucha tien* ritual. For example, when a woman is in labour, a family member takes her clothes, her birth date and time of birth and a candle stick to the nearby temple and ask the monk to perform the *bucha tien* ritual for her. “A monk then performs a blessing on these items to bless them for a safe and successful birth” (Liamputtong et al., 2005).

In the Philippines, women believed that eating raw native egg during labour make it easy for the baby to come out. So they eat raw native egg. Then the placenta is buried by the husband in the location where the water from the roof is draining so they believed that the child will grow into a bright nice person not rude or disrespectful to elders (Hadwiger, & Hadwiger, 2012). In Lao PDR, during delivery, the husbands prepare wood for fire, boiled water, ginger, herbal medicine, a bamboo bed and charcoal for roasting and nappies and baby clothes as well. However, there is a belief that preparing baby clothes would result in the death of the unborn baby. During delivery, women's mothers and husbands provide women with care and psychological support. Then pregnant women's mothers applied herbal medicine and eggs on the abdomen to ease delivery. "In addition, the women drink coconut milk during labor in order to facilitate the labor" (Sychareun et al., 2009).

During the postpartum period, there are also some traditional postpartum practices among Thai women. For example, avoidance of sexual intercourse, behavior restrictions, taking hot drinks, taking hot baths, and food restrictions are the most popular practices surrounding postpartum period in Thai culture (Kaewsarn, Moyle, & Creedy, 2003).

In the Philippines, women drink hot soup (*kaldo*) with rice and chicken at postpartum period. They believed that drinking *kaldo* to restore the woman's strength after giving birth and help the mother to produce good milk for the baby (Hadwiger, & Hadwiger, 2012). In many Southeast Asian cultures, childbirth is considered as a "cold" state which requires the restoration of heat to a woman's body gradually. Therefore, the practice of "mother roasting" is performed after childbirth to maintain the humoral balance to a woman's body for a period (Manderson, 1981; Mougne, 1978; Rice, & Manderson, 1996; Sich, 1981; & Whittaker, 1999 as cited in Whittaker, 2004). This is confirmed by Sychareun et al. (2009) in Lao PDR, mother roasting practices are performed after childbirth. The women lie down to roast on the bamboo bed which is prepared as a hot bed by making a fire under the bed. This hot bed is called "*Yu Kam*" or "*Yu Fai*" which literally means "on fire" and then put salt on the fire. Before women stay on top of the fire ("*yu kam*" or "*yu fai*"), another ritual is performed in which the water taken from a traditional healer is blown at to the women and a black and red cotton is tied to the wrist, ankle and neck by the elderly in order to

ward off bad spirits. After that the women stay on the fire. During the hot bed ritual, the women take hot baths and drink hot water for almost two weeks. They believed that staying on the fire strengthen the health of the women and accelerate the involution of the uterus. The husband buries the placenta into the earth near the house and makes a fire around buried area. It is believed that if the placenta is buried far from the house, the child would die.

Similarly, in Vietnam, the mother is made to sleep next to a wood fire during the postpartum period in order to heat the woman's body and restore the woman's health. They believed that this raises the body temperature and contracts the abdomen and the uterus (Lundberg & Thu, 2011).

#### **In developed countries:**

A study in Canada by Grewak, Bhagat, & Balneaves (2008) mentioned some beliefs and practices of immigrant Punjabi women living in Canada regarding pregnancy and childbirth. During pregnancy, women eat fresh fruits, vegetables, and milk. Later in the pregnancy, women eat specific foods. For example, women eat fennel seeds roasted in brown sugar. It is believed that eating fennel seeds roasted in brown sugar assist in inducing the labour pain. Women are not allowed to wear high heels and climb up ladders and other activities during pregnancy to prevent premature labour and injury. Childbirth is considered as a cold state from blood loss. Thus, during the postpartum period, they consume hot foods such as lentil soup, lentil soup with rice, ginger curry, and fennel seed tea with ginger to have hot effects and maintain the body's heat into balance. Another rationale of consumption hot foods is to recover from the birthing process and to increase the mother's milk supply. Women take enough rest for 40 days during the postpartum period for gaining strength.

Likewise, in China, the postpartum period is called *zuo yuezi*. This lasts 30days in most families. The postpartum period is considered as the weakest time of a woman's life. Therefore, postpartum mothers eat more food than normal. They consume meals from five to eight times per day, starting at 5am and finish before sleeping at night. But they eat hot food which has full of protein and avoid cold food such as fruit and vegetables to restore the body's heat into equilibrium. Because they believed that during childbirth the woman loses heat and becomes *yin* (cold state). So they eat meat and eggs as "hot" food. In addition, food is made "warmer" by adding

ginger and wine to help the mother's recovery, to encourage expulsion of lochia and to increase production of breast milk. Traditionally, there is a saying that postpartum mother should not bathe or wash their hair during the postpartum period. They believed that as the postpartum mother's skin is loose, water can enter the body through holes in the skin. This will cause body swelling, arthritis and rheumatism in later or a cold which can be passed to the baby. Similarly, they believed that hair washing during the postpartum period will cause a headache (Raven, Chen, Tolhurst, & Garner, 2007). Thus, some women bathed by adding wine to the boiled water to prevent the problems of absorption through the skin. They believed as they were with the baby all the time, they needed to be clean to protect the baby from infection. Some women avoided bathing or washing hair during the postpartum period.

In China, many people believed that brushing teeth would cause teeth loose and gums bleeding during postpartum period. Thus, most postpartum mothers avoided brushing their teeth. Then, there are also some behavior precautions during postpartum period. Postpartum mothers are not allowed going outside during the one month period. Most families believed that if the mother goes out the wind will enter her body and result illness namely arthritis and rheumatism, headache and so on. Besides, women rest in bed, avoid sexual intercourse and avoid household chores as they believed that postpartum mother is weak, she is still bleeding and needs to rest for the whole month to recover from the childbirth and to prevent future illness. In China, most families believed that breast milk was the best food for the baby and breast milk has enough nutrition for up to four months, promotes immunity in the baby and helps the uterus smaller. However, the other women gave milk powder or water during the month. They mentioned that only breast milk is not enough for the baby. Milk powder has also other nutrients for the baby and mixed feeding can provide balanced nutrition for the baby. According to the finding of this research, most babies who were fed milk powder had got diarrhea (Raven, Chen, Tolhurst & Garner, 2007).

### **2.3.3 Social relationship between midwife and women related to home birth**

The role of the midwife is one of the influencing factors in decision making about giving birth at home. In Iran, the close relationship between the woman

and her midwife prepares women to trust and follow their midwife. Women trust and rely on their midwife to diagnose and manage the possible risks related to childbirth at home. Women ask the suggestions of midwives regarding childbirth at home. If the midwife said giving birth at home does not have any problems and risks, the women can easily deliver their child at home, women follow their midwife's suggestions and make a decision to give birth at home. As women believed that a midwife is educated, if something goes wrong during childbirth at home, midwife will diagnose well problem and then the midwife will take the pregnant women to hospital. On the other hand, if the midwife diagnoses a difficult childbirth and the child is not going to be born at home, women decide to go to the hospital according to the idea of midwife. Women accept and trust whatever midwife suggests (Saeedi, Moudi, Vedadhir, & Navidian, 2011).

#### **2.3.4 Socio-economic factors and home birth**

Some studies showed that women's socio-demographic factors can possibly influence their decision to choose a home birth. A study by Hildingsson, Lindgren, Haglund, & Radestad (2006) highlighted that in Sweden, women who chose home births have a high level of education, no occupation and a lower family income. Furthermore, they are older and multiparous women. Similarly, homebirth mothers in Australia were older, more educated, and multiparous women (Cunningham, 1993). In Tanzania, a study by Mrisho et al. (2007) also presents that lack of money and lack of women's education were factors which influence women for home delivery. One study in Nepal shows that multiparous women, teenage pregnant women and poor maternal education were more likely to choose a home birth (Shrestha et al., 2012).

#### **2.3.5 Types of family**

In Nepal, typically women after marriage live with the husband's extended family. Women have little or no power in their marital home and are almost entirely at the compassion of their mother in law's perception of their pregnancy and delivery care needs and dominance of the mothers-in-law were one of the main reasons for choosing a home delivery in Nepal (Shrestha et al, 2012). Hence, if a woman lives in

an extended family, she may be influenced by mother or mother in law more than those who live in a nuclear family, to choose a home delivery.

### **2.3.6 Social factors and home birth**

A study by Jouhki (2012) pointed out that in Finland, the factors of why women decided to give birth at home were support by husbands, friends, and especially other mothers who had given birth at home. In Lao PDR, Sychareun et al., (2012) also mentioned that the factors influencing women to choose home birth were husbands, mothers, mothers-in-law and relatives. Furthermore, nurses are another source of advice and influence when women decided to give birth at home.

### **2.3.7 Women's perceptions and experiences regarding home birth**

Some research scholars suggested that a woman's decision about her childbirth is influenced by her habitus in general, and her perception or construction of risks associated with childbirth in particular. Perception of risk goes beyond the individual and risk is a socio-cultural construct that reflects cultural values, symbols, history and ideology (Weinstein, 1989 as cited in Sjoberg, 2004). Besides, a woman's perception of her pregnancy risk can be affected by prior life experiences and health-care providers (Jordan, & Murphy, 2009). This statement is confirmed by Simfukwe (2011), the main reason for women choosing home birth in Dodoma is natural habits. A study by Saeedi, Tabatabaie, Moudi, Vedadhir, & Navidian (2011) in Iran shows that women perceived risks of giving birth at home are acute medical conditions. Even though health care providers encouraged women who have severe anaemia and high blood pressure to have a birth at hospital, women refused to go to the hospital. Women perceived that medical problems such as high blood pressure and anaemia are normal for them, and they had such kind of medical problems during their previous childbirth at home, but they did not die and they did not face any problem when they gave birth at home. Women are afraid of the risks of hospital birth more than home birth risks. Then women perceived that home is safe, much better, and if something went wrong during childbirth, family and relatives will take them to hospitals. In addition to such perceptions, the role of the husband in supporting and making the decision to give

birth at home is also an important factor. A husband's higher perception of medical risks can lead to the women to birth at hospitals.

For risk management, mental or psychological preparation is the main factor when women choose home birth. Women perceived that their ancestors, their mothers, their grandmothers, and their relatives all gave birth at home and they have not faced any problem. Women used a variety of mental or psychological coping mechanisms to manage the potential risks or even death. Moreover, women use religious belief while they were in danger of childbirth at home. For example, women perceived that death and life of a human is in the hands of God, whether they give birth at home or hospital, no matter where they are, if God desires them to die, they will die.

A study by Borquez, & wiegers (2005) states birth experiences of women who delivered at home in the Netherlands. In this study, women mentioned that home is the most comfortable and dependable environment before, during and after delivery. They said that they did not feel home is a stressful environment because they feel home is warmer than the hospital.

Janssen, Henderson, & Vedam (2009) pointed out home birth experiences of women in Canada. Women expressed their experiences that midwife provided them emotional support during pregnancy period. They felt they were treated with love and respect by midwife, and the prenatal visits were like visiting a friend. Many women stated that they felt relaxed and comfortable when they gave birth at home, and they never felt pressured to have the baby faster. Some women expressed negative experience of home birth. They encountered a long and difficult labour and they felt tired when they gave birth at home. Then they felt it was so painful. On the other hand, in Finland, a study by Jouhki (2012) describes women's home birth experiences. In this study, women expressed home birth as a very positive experience based on full autonomy, involvement of family members, without being medical intervention and confidence in own body.

In Sweden, women stated their satisfaction of giving birth at home because of being in their own bed and taking a shower in their own bathroom and as well as being at home is a safe place. Furthermore, women feel that their husbands were pain

analgesic for them during labor period because their husbands were along with them through the labour (Sjoblom, Nordstrom, & Edberg, 2006).

### **2.3.8 Health care delivery systems for maternal and child health and home birth in Myanmar**

Myanmar is administratively divided into seven States and seven Divisions for the management of health programmes (MOH, 2003). Public health services in Myanmar are provided through a network of service providers at various levels. The highest-level referral facilities are the tertiary hospitals and the hospitals in States and Divisions, where have high-tech sophisticated medical facilities. Below this, at the district level, there are referral hospitals with medical specialists, including a gynaecologist and a pediatrician, who provide specialized services to townships under the district jurisdiction. Hospital services are found only in the township urban centre, and in one or two strategically placed station hospitals. Below this, each township has approximately five rural health centres staffed by a health assistant, lady health visitor and a midwife. Below each rural health centre, there are four or five sub-rural health centres, staffed by a midwife. Midwives and lady health visitors are very basic health workers in providing of maternal health care service delivery such as antenatal care, delivery care and postnatal care and so on (DOH Myanmar, 2002).

In addition, the lady health visitors and midwives are responsible for the training and supervision of voluntary health staff including voluntary health worker, auxiliary midwives and community health workers. A number of health volunteers are active in the provision of MCH services in Myanmar. Auxiliary midwives are selected from villages where there is no midwife resides, and given six months of training. Auxiliary midwife's main responsibility are antenatal care, assistance at normal deliveries, referral to a higher level of service when required, postnatal care, health education, and the treatment of minor ailments. There are also a number of traditional birth attendants who have been given sixty hours of training in the villages. Most pregnant women receive antenatal care from midwives. In urban areas, generally antenatal care is provided in the outpatient department of the hospital or at the maternal and child health centre. In rural areas, women receive antenatal care through two ways. There are regularly scheduled days at rural health centres and sub-centres

on which antenatal care is provided, and midwives also conduct visits to the homes of pregnant women. The usual content of antenatal care at a health facility includes history-taking, weighing of the women, blood pressure measurement, a physical and abdominal examination, the administration of tetanus toxoid, urine examination for albumin, and taking blood for a VDRL syphilis testing. Pregnant women also receive additional information regarding immunization days, appropriate diet, exercise and personal hygiene and are suggested to come back to the midwife if problems arise. But women who receive antenatal care at home cannot access to usual content of antenatal care like a health facility because care is restricted to a physical examination such as the clinical screening for anaemia, advice on nutrition and so on.

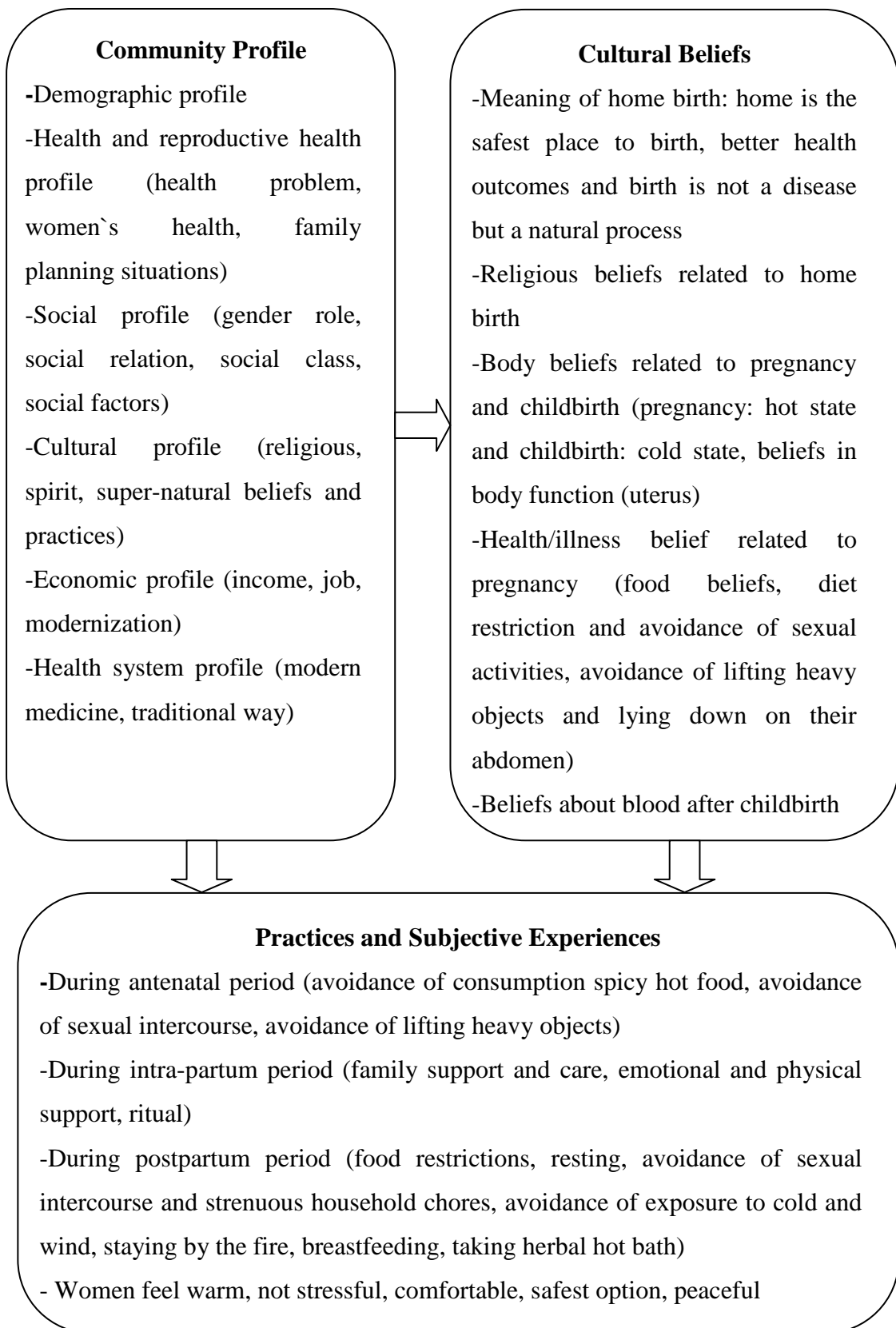
Nationally, it is generally recommended that all first births should be delivered in hospital. Many women in rural areas refuse to deliver their first births in hospital though they get encouragement from midwives. Because women believe that it is completely safe to give birth at home. The midwives and auxiliary midwives provide postnatal care at the women's home. According to the national guidelines, the midwife need to visit the women each day within the first week after delivery and then again to visit at six weeks, however, while the usual care involves daily visits for the seven days, a follow-up visit is performed only when the woman is experiencing problems (MOH & UNFPA, 1999).

Furthermore, to improve the health status of maternal, and child through promotion of overall reproductive health, improving the quality and accessibility of birth spacing services are performed with the heightened interest in reduction of newborn, child and maternal mortality (DOH, 2002). According to the approval of the Ministry of Health in 2003, Myanmar's Reproductive Health Policy was formulated in 2002 to attain a better quality of life for all by improving reproductive health status of women and also men (DOH, 2004).

### **2.3.9 Conceptual framework and explanation of conceptual framework**

In this study, the researcher will be using cultural interpretive theory (Good, 1994), explanatory model (EMs), health care system (Kleinman model) and balance and imbalance theory as theoretical concepts in order to know the reasons why

rural women decide to give birth at home, to know how rural women explain the causes of ill health related to pregnancy, childbirth and postpartum period, and to understand rural home birth women's cultural beliefs, practices, and experiences surrounding pregnancy period, intra-partum period and postpartum period. The researcher supposed that the reason why rural women give birth at home and the reasons why rural women follow practices during pregnancy, childbirth and postpartum period are due to cultural beliefs. For example, women believe giving birth at home is safe and comfortable. Women believe that pregnancy period is considered as a hot state, so they avoid spicy food and hot food. There are also health/illness beliefs related to pregnancy such as food beliefs and behavior restrictions. In some societies, the older people believe that blood from childbearing and lochia after childbirth are very dirty and would contaminate the master's spirit. In addition to cultural beliefs, women's decisions to give birth at home and to follow practices might be influenced by socio-economic factors such as education, income, age, number of deliveries, type of family. For example, teenage women with first pregnancy are more likely to give birth at home and to follow practices during pregnancy and childbirth than older women who have more than one child, because teenage women have no experiences and knowledge regarding childbirth. Furthermore, women's decisions may be made not only by themselves, but also by women's husbands, mothers, mothers-in-law, relatives, friends, and health care providers (midwives). Socio-cultural-economic context of rural women's cultural beliefs, practices, and experiences regarding home birth will be displayed as following the conceptual framework:



**Figure 2.1 Conceptual framework**

## **CHAPTER III**

### **RESEARCH METHODOLOGY**

#### **3.1 Research design**

The pregnancy period, intra-partum period and postpartum period are very special phases for women, and it commonly happens in life of women. Therefore, pregnancy period, intra-partum period and postpartum period should be considered as a complex phenomenon in which social, cultural, and economic dimensions are interconnected and interwoven. In order to explore cultural beliefs, practices, experiences surrounding pregnancy period, intra-partum period, and postpartum period regarding home birth among rural women, a qualitative and descriptive research using ethnographic approach were used in this study. Qualitative research by using ethnographic approach involves fieldwork in which the researcher observes and records behavior and event in their natural setting. In addition, qualitative researchers gather an in-depth understanding of human behavior. Common methods of qualitative research include focus group discussion, in-depth interviews and participation or observation. In qualitative research, the sample size is typically small and respondents are selected purposively. Ethnography is defined as description and interpretation of a cultural or social group or system. Ethnography entails the close and prolonged observation of a particular social group. Moreover, ethnography is considered as a systematic approach to describe, observe and analyze the particular patterns of a culture or subculture (Pelto, & Pelto, 1978). Ethnographic approach is a small scale study and prolonged observation of the group typically through participant observation in which the research is immersed in the day-to-day lives of the people or through one-to-one interviews with members of the group and looks at the insider's perspective.

### 3.2 Research site

In proposal, the researcher mentioned that the study will be conducted in one village of Kyauk Lone Gyi village tract which is located in Sub-Palauk Township, Palaw Township Tanintharyi region, Southern part of Myanmar. Tanintharyi Region has common borders with Thailand on the East and South-east. There are six villages in Kyauk Lone Gyi village tract. Thus, in order to obtain the relevant study area, the researcher selected one village among six villages of Kyauk Lone Gyi village tract. The name of the study village is *Thabyay Ywa*. The village name was made pseudonym for ethical consideration. The reason why the researcher chose *Thabyay Ywa* among six villages of Kyauk Lone Gyi village tract as the study area for this study is that there is a rural health centre (RHC) in the study village, and then, the study village is near Sub-Palauk Township hospital, although there is a rural health centre in the study village and the study village is not so far from Sub-Palauk Township hospital, most women gave birth at home, there was enough number of participants to recruit for this study and home birth women in the study village were still following cultural beliefs and practices during pregnancy, childbirth and postpartum period. In addition, the study village is the researcher's native (place of birth), so the researcher is able to conduct the interviews easily with the villagers. Hence, the reasons why women giving birth at home are the questions the researcher wanted to answer and to know the reasons those women chose to have a home delivery. Furthermore, the researcher wants to explore cultural beliefs, practices, and experiences surrounding pregnancy period, intra-partum period (childbirth), and postpartum period regarding home birth.



Figure 3.1 Map of Myanmar

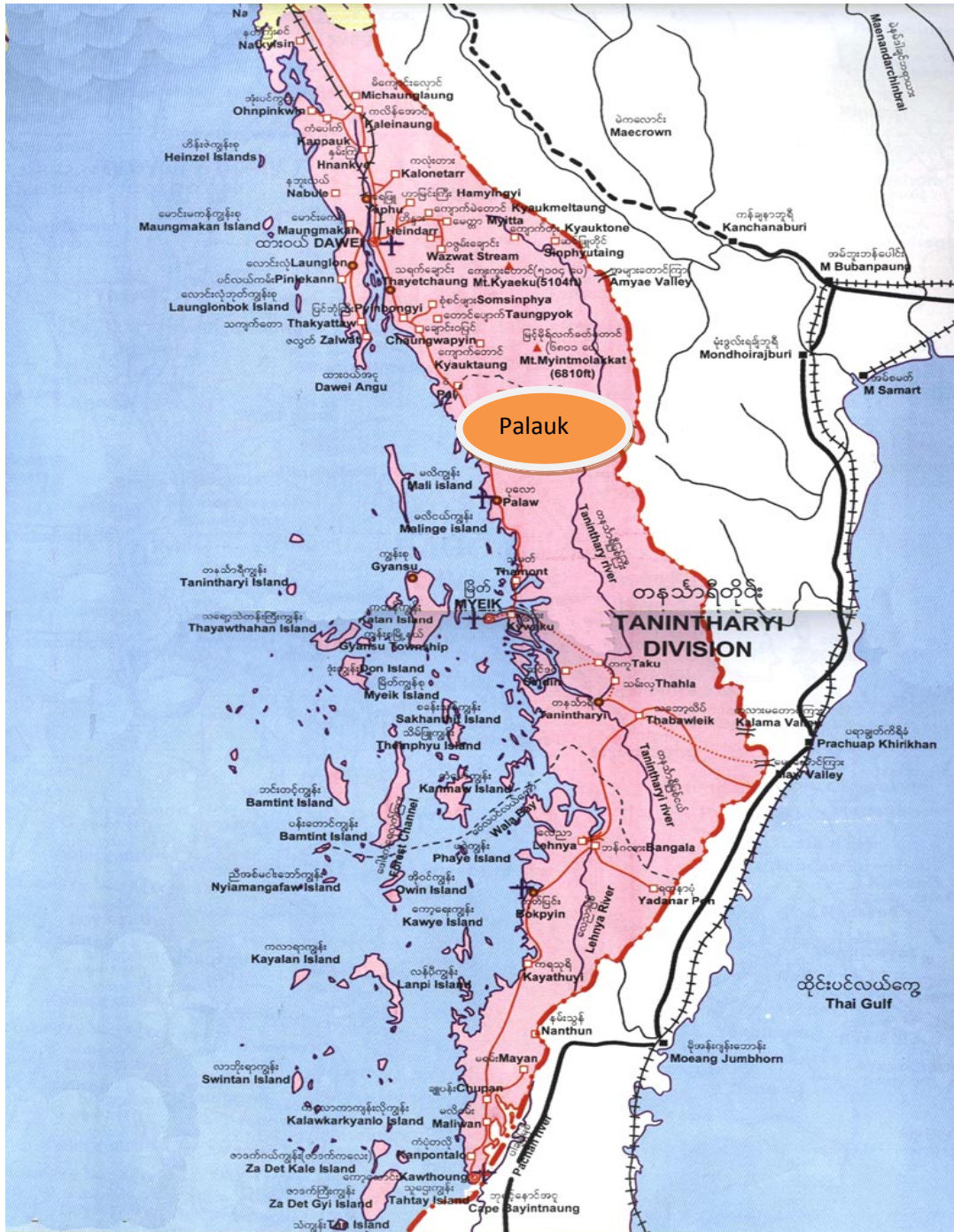


Figure 3.2 Map of Palauk Township, Tanintharyi Region, Myanmar

### **3.3 Informants selection criteria and process**

#### **3.3.1 Research informant selection**

As selecting informants, seven rural home birth women were recruited for the study. Among 7 women, 6 women who delivered at home within one year and one woman who recently delivered at home within 2 months with the assistance of midwife (registered) who is working at rural health centre of the study village and with the assistance of auxiliary midwife (non-registered) who is not working at the rural health centre of the study village were recruited as informants. All of them have a different age that ranging from 22 to 36 years old, have a variety of delivery experiences, live in different types of family (nuclear and extended family), have different educational background. Two out of seven women are; housewife and take odd jobs, and housewife and seller (snacks, tea, coffee and cold drinks in her house) while the others five women were housewives. However, all cases were homogenous in terms of their income status. But women who are above 18 years old with reproductive age were recruited.

As selecting key informants, the researcher mentioned intentionally in the thesis proposal to recruit key informants with the following criteria:

- One midwife who working at rural health centre of Kyauk Lone Gyi village tract has at least one year experience related to women's home birth delivery and resident in the study village, Kyauk Lone Gyi village tract will be recruited as a key informant for the study.
- Then, three family members (sister, sister-in-law) of home birth women (informants) who delivered at home within two to five years with the assistance of health assistant (registered) or auxiliary midwife (non-registered) and above 18 years old with reproductive age will be recruited as the key informants.

But, in reality, key informants sampling was changed because family members of home birth women were not in the study village and most people in the study village including women also go and work at the other countries especially in Thailand. Thus, the researcher recruited the other two home birth women who delivered at home within 2 to 3 years with above 18 years old age with the assistance of midwife (registered) who working at the rural health centre of the study village, one

midwife who working at rural health centre of the study village for 7 years experiences related to women's home birth delivery and one auxiliary midwife who is a volunteer of the study village for 13 years related to women's home birth delivery were recruited as key informants for the study.

**Table 3.1 List of interviewees (women who delivered baby at home within one year and who recently delivered at home within 2 months) as informants**

To maintain confidentiality, all the participant's names have been changed

Name	Age	Occupation	Education	Type of family	# of children	Delivery by
Ma Cho	33	Housewife And take odd job	Primary school (3 <sup>rd</sup> standard)	Nuclear family	4 <b>Remark:</b> She aborted the first pregnancy with two months	midwife
Ma Moe	22	Housewife	Primary school passed (3 <sup>rd</sup> standard)	Nuclear family	2	Auxiliary midwife
Ma Mya	29	Housewife	High school passed (9 <sup>th</sup> standard)	Extended family	3	Midwife
Ma Phyu	28	Housewife	Bachelor	Nuclear family	1 The first baby miscarried	Midwife

**Table 3.1 List of interviewees (women who delivered baby at home within one year and who recently delivered at home within 2 months) as informants (cont.)**

Ma Myint	29	Housewife	Primary school (4 <sup>th</sup> standard)	Extended family	2	Auxiliary midwife
Ma Yu	36	Housewife	Primary school (3 <sup>rd</sup> standard)	Nuclear family	5	Midwife
Ma Sandar	26	Housewife and run coffee shop	Secondary school passed (5 <sup>th</sup> standard)	Nuclear family	3	Midwife

### 3.3.2 Recruitment process

Firstly, the researcher contacted to health care providers (midwife and health assistant) working at rural health centre in the study village, Kyauk Lone Gyi village tract. And then, the researcher introduced herself as a student of Master in HSSIP, Mahidol University, Thailand, and explained the aim of the study to health care providers. Midwife carrying out home births provided the researcher information those who delivered baby at home recently or within one year. Initially, the researcher started home visits to home birth women who are potential research informants for the study and the researcher chit-chatted with them and with their family members. In addition, the researcher made home visits to the other home birth women who had home birth experiences within 2-3 years and who could be the potential research's key informants and then, the researcher chit-chatted with them and their family members.

After making home visits for several times, the researcher started recruitment process for the study. The researcher asked permission from them that the researcher would like to recruit them for the study if they agree. The researcher explained the aim of the study and confidentiality issue regarding their profiles. Finally, the researcher recruited 7 home birth women for the study according to their permission. Among 7 home birth women, 6 home birth women who delivered baby at

home within one year and one home birth woman who recently delivered baby at home within 2 months. Furthermore, the researcher recruited two home birth women who delivered at home within 2-3 years, one midwife who working at rural health centre in the study village for 7 years experiences regarding women home birth delivery and one auxiliary midwife who is the volunteer in the study village for 13 years experiences regarding women home birth delivery as key informants according to their permission.

### **3.4 Methods of data collection**

Data was collected from August 20<sup>th</sup> 2014 to December 20<sup>th</sup> 2014 by using a wide range of data collection methods such as building trust, ethnographic interview, in-depth interviews, participant observation and community mapping was used in order to reach the objectives of the study.

#### **3.4.1 Building trust**

The researcher arrived to the study area which is the researcher's native on the first week of July, 2014. It was rainy season. Firstly, the researcher contacted to the health care providers (midwife and health assistant) working at rural health centre of the study village, Kyauk Lone Gyi village tract. Midwife gave the researcher information those who delivered baby at home recently and delivered at home within one year. Although the researcher is a native of the study village, some villagers do not know the researcher because the researcher left the native village since 2002. Hence, the researcher started walking to the whole village in order to know well with the villagers to make rapport, and then, talked with the villagers by introducing herself as a student of Master in HSSIP, Mahidol University, Thailand rather than the researcher introduced herself being as a nurse to those who do not know the researcher. Some know the researcher as a nurse and as a native of the study village greeted the researcher as where are you living now and are you working at Yangon General Hospital, and then, the researcher chit-chatted with them. So, the researcher got some information of cultural beliefs and practices regarding home birth and also, the researcher knew those who delivered baby at home recently and delivered at home

within one year from making informal conversation with the villagers. Sometimes, the researcher's mother also accompanied the researcher when the researcher walked to the village and made home visits to home birth women's houses and sometimes, researcher's nieces or aunty accompanied the researcher because some places were quite far from the researcher's residence.

After that, for building trust with potential research informants the researcher started home visits to potential research informants before recruiting research informants. Here again, the researcher introduced herself as a student rather than the researcher introduced herself being as a nurse to narrow the barriers down between the researcher and potential informants. When the researcher visited to their houses, the researcher made general informal talks in order to get familiar with them, and their family. Some potential research informants know that the researcher is a nurse but some potential research informants did not know that the researcher is a nurse.

### **3.4.2 Ethnographic interview**

After recruiting research informants, the researcher visited again home birth women's houses in order to get more familiar with them and to know their daily life experiences by making informal talks. By making home visits and informal talks helped the researcher to get more information and made them comfortable to answer the researcher's questions. Here again the researcher introduced herself as a master student and explained the aim of the study. Then, the researcher showed her identity as "a normal person" rather than as a nurse. The researcher talked with them and their family about everything in general but also the researcher talked with other villagers to get the additional information as needed. During the stay in the field area, the researcher visited the informant's houses, had chit-chat with them, observed their daily life activity, helping them in doing things like the researcher helped them when they put flowers into the coconut stick to be like a garland to offer to the image of Buddha because all informants are Buddhist in order to get closer to them as a family member of them.

When the researcher walked around the community, talked with the villagers to know things happened in the community. In addition, the researcher talked

with village headman to get demographic data such as population and households in the village. Furthermore, the researcher attended wedding ceremony, donation ceremony and talked with the villagers who attended to the ceremony to get rich information like what is happening in the community and then, the researcher got some information of cultural beliefs and practices regarding home birth.

### **3.4.3 In-depth interviews**

In-depth interviews started on the 20<sup>th</sup> August, 2014 although the researcher arrived to the study area since the first week of July, 2014 because the researcher hope it was needed to take time to build enough rapport with research informants. The researcher let women choose time and location of the interview. All of interviews were held in women's homes, especially in the afternoon after lunch. Before starting the interviews, the researcher always introduced herself as a student and explained the purpose, roughly the duration of each interview, confidentiality about their information and profiles and so on. The interviews were performed by starting with the question such as "could you tell me about your home birth?" Women were interviewed individually about cultural beliefs, practices and experiences during pregnancy period, during childbirth (intra-partum period) and during postpartum period regarding home birth, the reasons lead and influence to the decision to give birth at home, and women's background information on socio-demographic characteristics as well. One woman was interviewed two to three times and lasted between 2 and 3 hours based on her responses. Women were asked structured and unstructured questions.

The researcher requested their permission to use tape recorder for almost interviews. All of interviews were tape-recorded with their permission. In one case, the researcher had got a flat battery of tape-recorder during interview. In some cases, baby cries and their elder children playing interrupted interviews while the researcher was interviewing. Furthermore, in some cases, visitors (informant's friends, aunty) came in and they listened to what we were talking for a while and then, sometimes they talked on behalf of informants. According to researcher's experiences, some informants were not comfortable and shy during the first time interview. In the second time interview, they felt more comfortable when they talked with the researcher

regarding sharing their home birth experiences. Some informants did not know that the researcher is a nurse because the researcher introduced herself as a student but in the second time interview, they asked the researcher that are you *saya ma* (nurse)? We know as you are *saya ma* (nurse) other people say. Then, the researcher had to answer them that now, the researcher did not work as a nurse, and now the researcher is a student.

The researcher as an unmarried woman with no childbirth experiences showed sympathy, empathy when the researcher interviewed informants to understand their internal feelings related to their embodied home birth experiences. The researcher paid attention and respected the informants while talking about their home birth experiences to get the real experiences. Besides home birth women who delivered at home recently or within one year, in-depth interviews were conducted with two home birth women who delivered at home within 2-3 years, one midwife and one auxiliary midwife as key informants in order to get deeper understanding about the cultural beliefs and practices that women followed regarding the whole process of home birth.

#### **3.4.4 Participant observation**

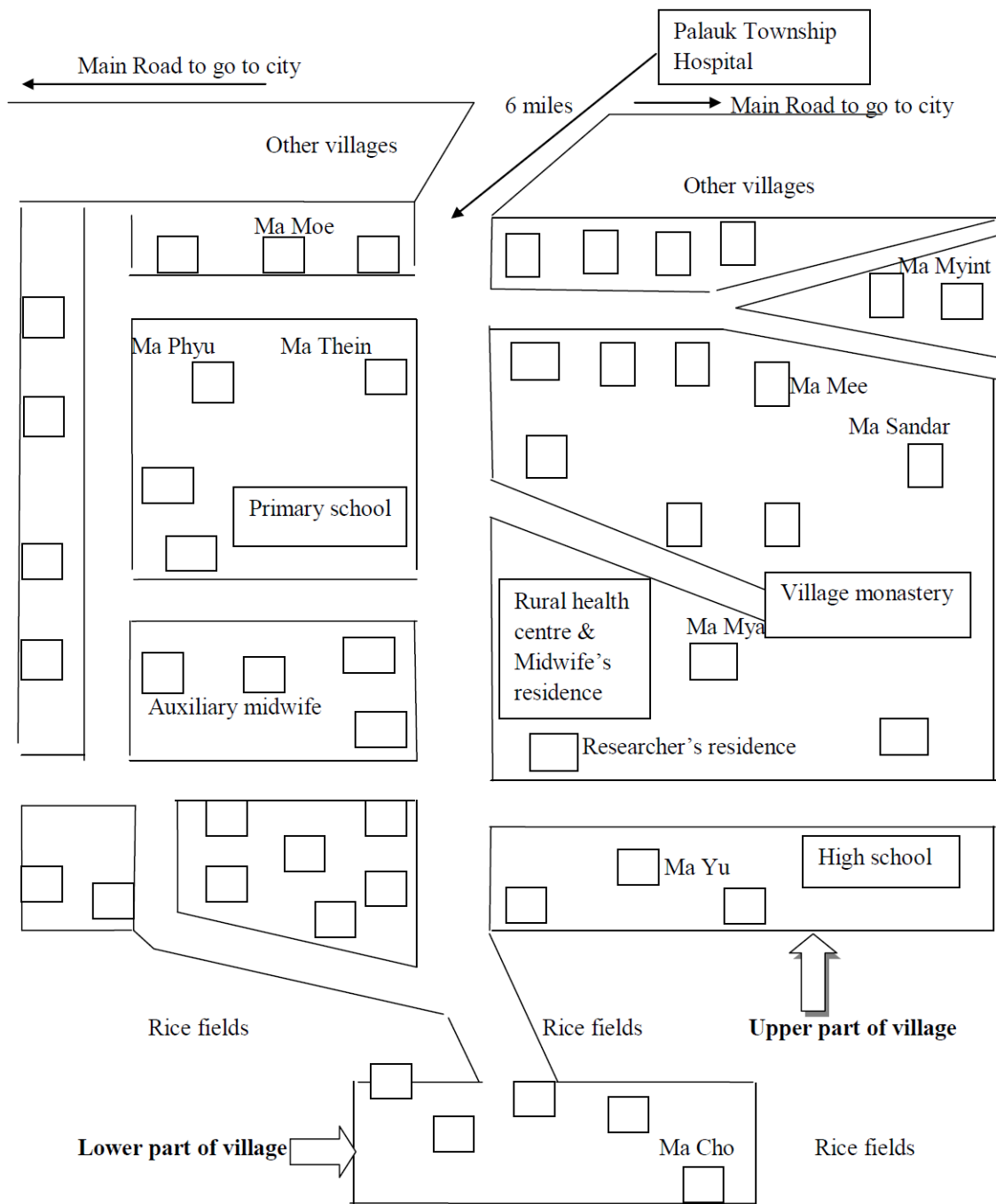
Participant observation is one type of data collection method in the qualitative research and is a period of intensive social interaction between the researcher and the informants. Observation was done of rural home birth women's the actual behavior of their life style and activities at home. In order to get better understanding of cultural beliefs and practices regarding the whole process of home birth, the researcher observed and participated (the researcher helped postpartum mother when she takes a bath at the afternoon) when postpartum mother takes a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and it's fruits are edible fruits in bunches) with cold water), and does *shin ngway khan* (induced perspiration). In addition, the researcher made informal talks with the pregnant women as well as observed their behaviors like how they avoid rigorous activities such as lifting heavy objects and driving motorbike. The researcher tried to get a chance to observe what cultural beliefs are practiced during childbirth. But, during the stay in the field, there were a few cases of patient in maternity and unfortunately, all of patients in maternity delivered baby at

night time. Hence, the researcher could not observe what they do and how they do during childbirth period. During the stay in the field, the researcher spent time to observe the condition of the research area related to the socio-economic condition, geographical characteristics (weather, water resources, electricity, distance from township hospital, and health care availability), and so on.

### **3.4.5 Community mapping**

Community mapping shows data relationships spatially on a geographic background. Mapping of data sets by parcel of land or block can show spatial distributions as well as relationships between two phenomena, for example, households in poverty and infant mortality. Community mapping can also refer to a graphic presentation of relationships that exist within a specified city or country (Melcher, Groop, Keth, & Rozdilsky, 1998-1999).

As the community mapping in the field work, the researcher walked to the whole village and mapped the geographical background of the community, for example: the distribution and setting of household, health care center location etc.



**Figure 3.3 Map of *Thabyay Ywa* (study village), and residences of informants and key informants**

The study village has two parts; upper part and lower part because there are rice fields between upper part and lower part of the village. In the lower part of the village, there are only 8 houses. In which, the researcher's informant who is Ma Cho, Ma Cho's house also is located. A number of houses in the upper part of the village

are many. The rest informant's houses and key informants houses are located in the upper part of the village. Then the researcher described the geographical background of the community such as distribution and setting of houses, the location of health care centre, school, and monastery and also the researcher described the location of key informant's houses and informant's houses. The name of the study village has been changed for confidentiality. The study village is six miles in distance from Sub-Palauk Township hospital.

### **3.5 Research tools**

In this study, the variety of research tools will be used for data collection:

#### **3.5.1 Data collection tools:**

- Observation guidelines of the research area
- Participant observation guideline
- In-depth interview guideline for informants
- In-depth interview guideline for key informants
- As other data collection tools, voice recorder, camera and field notes

were used.

#### **3.5.2 Inter-relationship tools**

The researcher's background, thoughts, ideas and words may affect the research process, research findings and tend to be inherently biased. In order to obtain the real ideologies, reflexivity on the information and data from the informants was done. The researcher was careful her words and behaviors in communicating with them not to interpret research findings without considering the informant's insider's view but the researcher needs to be friendly, open-minded, and generous with them. The researcher prioritized the informant's insider view, feeling, perception in order to avoid bias the data obtained. Inter-subjectivity refers to shared understanding. In other words, inter-subjectivity refers to agreement. There is inter-subjectivity between people if they agree on a given set of meanings. Inter-subjectivity recognizes that meaning is based on one's position of reference and is socially mediated through

interaction. In qualitative research, inter-subjectivity not only points to the ways in which we share understanding with others but also indicates that meaning and understanding lie along a continuum of mutual intelligibility. Thus, during the field work, the researcher tried to know understanding of the meanings, beliefs and internal feelings of those informants gave to home birth process by showing sympathy and empathy the informants.

### **3.6 Validity of data**

For validity of data, the researcher used various data collection methods such as in-depth interview, participant observation, home visit and informal conversation and ethnographic interview. Although the researcher used various data collection methods, there was a little bit barrier when the researcher interviewed them regarding sexual intercourse during pregnancy and postpartum period because the researcher as an unmarried woman with no childbirth experiences. However, the researcher tried to get a close relationship with the informants to narrow down the barrier between the informants and the researcher for validity of data.

### **3.7 Data processing and analysis**

In qualitative research, data analysis is an ongoing process. Thus, data analysis was started since the first data was collected and continued until it ends. The researcher wrote down daily field notes from various sources such as in-depth-interviews, observation, home visit and informal conversation. The researcher used a tape recorder in all interviews with their permission. After finishing each interview, the researcher tried to listen to tape recording for several times before transcribing from local language into Myanmar Language. Then, the researcher transcribed recorded data from local language into Myanmar language first and then, translated into English. At the time of transcribing from local language into Myanmar language, and translated from Myanmar language to English, the researcher had to aware not to change the original meanings as informants talked from the interviews. The transcripts of each interview which has been translated from Myanmar to English were checked

and reviewed in order not to miss the guidelines of interview and then, were saved in Microsoft word processor files.

After finishing data collection for all cases in the field, the researcher read transcripts, and observation notes, filed notes, and then, made marginal notes to form the initial codes by relating with research questions. Data were analyzed using qualitative content analysis (manual analysis). Then, the researcher analyzed and classified different themes and same themes based on coding among interview informants. As final step, data interpretation was done for research findings.

### **3.8 Ethical consideration**

#### **3.8.1 Informed consent**

Before taking informed consent from the participants, the researcher explained about the study in details such as the purpose of the study, and confidentiality issue. The participants who were willing to participate in the study were recruited. In addition, the participants were informed that their participation was voluntary and they could withdraw at any stage of the study. Writing informed consents were obtained from all participants because all participants are able to read and write.

#### **3.8.2 Confidentiality**

Safeguarding the information obtained from the participants is a key part of the relationship of trust and respect that exists between the researcher and the participant. Hence, the participant's names, place of residence and the study setting were used pseudonyms for confidentiality. After completing the study, the interview material was destroyed not to be examined by other individuals.

#### **3.8.3 Privacy**

The whole process of research such as all interviews was done in the private area where the participants feel comfortable and convenient. The collected data were used only for academic purpose and kept privately and confidentially.

### **3.9 Benefit and reciprocity**

After finishing this study, there have been benefits for the participants. Cultural beliefs and practices regarding home birth have advantages and disadvantages. Some cultural beliefs and practices have harmful effects on mother and baby's health. For advantages, the researcher advised them to keep on but for disadvantages, the researcher provided health education to them and it also needs help from the policy makers, health care providers and ministry of health. So the researcher will propose the research findings to the policy makers, health care providers and ministry of health (MOH) in order to redesign a comprehensive health care services system for the maternal and child health especially for the rural area. After finishing interviews, the researcher paid some gifts to the informants such as baby clothes, powder and shampoo especially paid baby clothes for the voluntary participation in the study instead of paying money them.

### **3.10 Research limitation**

For the researcher, it was very difficult to choose research key informants for the study according to research proposal criteria because there were no many women who delivered at home within two to five years. The reason why there were no many women who delivered at home within two to five years was that most villagers not only men including women as well went and worked at the other countries like Thailand and Malaysia, especially in Thailand and most women delivered baby at Thailand and there were a few cases came back to Myanmar when pregnancy was term and delivered baby at the village, Myanmar. Therefore, it was quite difficult for the researcher to choose research key informants. However, the researcher tried to recruit relevant research key informants. In addition, the researcher could not get a chance to observe, and participate what cultural beliefs and practices are followed during childbirth like ritual beliefs and spiritual beliefs. Although the researcher requested midwife who was a key informants for the study to call the researcher and to let know the researcher when she goes and assists for home birth delivery, all patients in maternity during the stay in the field delivered baby at night time. So, midwife could not contact to the researcher and the researcher also could not get a chance to

see childbirth practices. The current study as a small group of home birth women, therefore the findings are not representative for the whole rural home birth women generally, and it may reflect for that particular area.

## **CHAPTER IV**

### **RESEARCH FINDINGS**

#### **4.1 Community profile of the study area**

##### **4.1.1 Demographic profile of the study area**

The research site for this study is a village called *Thabyay Ywa* which is in the southern part of Myanmar. Geographically, it is located in Kyauk Lone Gyi village tract, Sub-Palauk Township, Palaw Township, Tanintharyi Region and is about six miles in distance from Sub-Palauk Township. *Thabyay Ywa* is a medium size village with its 349 households, and a total population 2,400.

In fact, the village has two parts; upper part and lower part because there are paddy fields between upper part and lower part of the village. *Thabyay Ywa* is six miles in distance from Sub-Palauk Township hospital and four miles in distance from the main road that connects one sub-township in the township, one town in the township and two towns in Tanintharyi Region. From the main road, if we use motorbike, it takes around twenty minutes to reach to the village in summer and it takes around twenty five minutes to reach to the village in the rainy season because roads are muddy and slippery in the rainy season. The village is located on the plain. Most houses are made up of brick and roofed by thatch. A few houses among most houses are made up of brick are roofed with tin plate. Those who own houses like that are marked as possessing better economic condition in compare to general population. Most brick houses are single floor design. There are some houses which are made up of wood and roofed by thatch and are designed for two stories, but leaving empty space in the downstairs without walls, where as the other few houses are made of bamboo and are single flat type with bamboo floor.

#### **4.1.2 Health care availability**

There is a rural health centre in the study village. There are nine sub-rural health centres under rural health centre of the study village. Health assistant who is a leader and the highest position at rural health centre sometimes he provides maternal health care services at rural health centre. Health assistant runs his own clinic at another village and he usually goes and treats ill patients whenever he is called to do. Midwife who is posted at rural health centre of the study village provides maternity health care services and treats minor ailments. Village auxiliary midwife sometimes not only she helps health care staff (midwife and health assistant) in providing maternal health care services and in providing vaccination services for under five years but also she performs treating minor ailments and she assists patient in maternity too. A *bain taw saya* who performs like not only traditional healer, but also he treats ill people when they think they are bewitched by spirits (witches) and he also take responsibility as a religious leader in the village. Even though they do not run their clinic at their homes, they usually go and treat ill people when they are called to do. In the study village, there are some drug stores and then, there are also many drug stores at the other villages. Thus, villagers could buy easily basic medicines such as paracetamol, anti-hypertensive drugs and some analgesics and multivitamins from the village's the general stores.

#### **4.1.3 Water resource**

In the study village, almost every house has well whereas few houses have no wells. The village has dual water source not only for general usage but also for drinking. People who do not have well at their home go and fetch water at neighbour's wells. Most people fetch water with pails whereas some houses pump up water to fill into the water container. Those who own pumps like that are marked as possessing better economic condition in compare to general population. For drinking water, they drink *yay zee* (normal water that are fetched from well) by filtering water with water filter (a funnel which is made with white material) to remove debris. The another way for drinking water is that they boil water and then pour into the kettle and mix with pickle tea leaves to prepare plain tea, which is drunk by most older people and basic drinking culture in the study area.

#### **4.1.4 Electricity**

According to the researcher's informal conversation, the village gets electricity from private power since last six years ago. The researcher is a native study of the village. When the researcher lived in the study village, there was no electricity in the village and every house used candle and petroleum oil lamp. Now, the village gets electricity. Most houses take electricity. The electricity price is 750 kyats (US 0.75 \$) per unit in Myanmar kyat rate. Some poor houses do not take electricity and use candle and petroleum oil lamp. The villagers can use electricity only from 6:00 pm to 10:00 pm. When the researcher was in the field trip, sometimes power was failure. At the time of power failure, the whole village was being dark. During the field trip, the researcher had difficulty in translating recorded data from Myanmar to English by using computer because the researcher could not use electricity at all the time. There are few houses that have solar power (which is the conversion of sunlight into electricity) to use electricity at the day time. Those who own solar power like that are marked as possessing better economic condition in compare to general population.

#### **4.1.5 Communication and transportation**

As communication system, villagers use telephone to communicate especially when their family members went and worked at the other countries. However, there was no satellite for using smart phone. According to the researcher's observation, villagers who used smart phone went to Sub-Palauk Township or went to the paddy fields where satellite is available for using smart phone. Sometimes, the researcher also went to the paddy fields where satellite internet is available to use internet by smart phone because there was no satellite internet in the study village. As transportation system, almost every house has motor bike. Villagers rode motor bike when they go to market, and they travel from the village to city. Students when they go to school, they go to school by motor-bike. Villagers used mostly motor-bike from one place to another place for transportation. Some people who possess better economic condition bought cars for travel. In the study village, there are also daily passenger cars carrying passengers from village to city. Furthermore, there are daily passenger cars for travelling from the village to Thailand through Thai-Myanmar border area.

#### 4.1.6 Education and cultural profile

In the study village, children can study education from primary standard to high standard. After that, those who passed high standard went to university which is in the city. Some parents let their children study only middle standard because of their economic condition and they are not interested in education as well. Some parents who have money send their children who have finished middle standard in the village to city in order to get better education and higher knowledge for high standard. There are two races; Mon race and Burma race. All villagers are Buddhist (Theravada) and there is a monastery and a pagoda situated in the upper part of the village. Some pagodas situated in the north on the high land. That was the time for Buddhist lent when the researcher was in the village. Villagers seem to be interested in religious affairs. The researcher saw villagers not only older people and middle age but also young children between about 8 years and 14 years old age came to the monastery to Sabbath on Sabbath in order to get good merit. They brought flowers to offer pagoda. They do not need to bring their lunch to the monastery because there are groups of middle age women to cook food for their lunch and young women and young men also helped the groups of middle age women in cooking food. At 7:00 o'clock in the morning, they get *Thi La* (Buddha's teaching regarding for those who keep Sabbath) from the abbot (Buddhist monk). After getting *Thi La*, they started meditation. At around 10:30 am, they stopped meditation and they had lunch together and chit-chatted. After lunch, they started meditation at around 1:00 pm and finished meditation at 4:00 pm. Then, they went back home and some of them slept at the monastery and tomorrow morning, they went back their home.

Even though people in the study village believe in Buddhism, people especially women still follow the beliefs on the supernatural spirits such as *Nat* (*shin kee* who is looking after the village or house), who can create not only good things but also can bewitch bad events. For example, when anyone of their family members gets ill, they go to *shin kee eei* (the house of *Nat* which is made up of concrete in which people put statue of *Nat*) to worship *Nat* by carrying a deep bowl in which a bunch of bananas, a coconut, a bottle of any juice, a candle, some areca seeds, some betel leaves and so on to be good health. Further, when pregnant woman started labour pain, they take a cup of water and go down onto the ground where it is in front of the pregnant

woman's house and they pour water onto the ground by saying as *shin kee*, look after pregnant woman who is in labour to deliver baby easily and smoothly.

In addition, according to the researcher's observation and informal talks, they sometimes feed flesh meat such as beef and chicken to *ma kaunn soe war* (evil-spirits) when they think that baby get ill or is not feeling well. Some pregnant women say that when they go out at the evening and night time, they always attach safety pin at their clothes or they always take a small dagger or a thorn in order not to bewitch them by *ma kaunn soe war* (evil-spirits). They believe *ma kaunn soe war* can bewitch them if they go out at the evening or night time without attaching safety pin on their clothes or taking a small danger or a thorn because they say *ma kaunn soe war* are afraid of thorn and things related with iron such as safety pin and knife.

#### **4.1.7 Economic profile**

Most villagers went and worked at the other countries such as Malaysia especially Thailand while some villagers are farmers, masons, boat's crew and vendors. When the researcher was in the field trip, it was rainy season. Farmers were ploughing for transplant with the help of cows, and plough machines. For those who were working in their own paddy lands is likely to be higher in socio economic condition than those who worked as waged farmers and vendors. Even though some have their own paddy lands, they do not do transplanting and they lent their own paddy lands to the other people and then, they went and worked at the other countries. Most villagers not only men but also women went and worked at the other countries because they thought working at the other countries get more money than working as farmers, waged farmers, waged transplanters and vendors in the village. Some men who do not have their own paddy lands, work as waged farmers, masons and the price of daily wage was 5000 kyats (US \$ 5) per day in Myanmar kyat rate. Some men were working as boat's crews at boats which are fishing for 9 months to 10 months per year and they had a break time for two to three months per year only within the rainy season. Some women were vendors who sell vegetables, dried fishes and fishes at the market which is a common market and is in another village which is near the study village and villagers have to go shopping at that market. Some vendors sometimes were selling vegetables and fishes around the village.

Besides, there are also grocery shops, and tea shops scattered in the village where villagers could get some foodstuffs and sometimes tea shop is run together with alcohol. Some those who have money bought cars and carry passengers from village to city and from village to Thai-Myanmar border area. In the study village, the main income of villagers is from going and working at the other countries. In some family, the whole family went and worked at Thailand by leaving their homes. However, in some family, fathers and mothers went and work at Thailand by leaving their children at their parent's houses, their sister's houses or their relative's houses.

#### **4.1.8 Social profile (gender role, social relation, social class, and social factors)**

In order to get better understanding about women especially in pregnancy, childbirth and postpartum period regarding home birth, it is also needed to know gender role within the family, social relation, social class and social factors in the research village. According to the researcher's observation, most families in the study village are nuclear families while some are still extended families. However, before living separately, they have stayed in extended families. In general, in a nuclear family, husband is a house head and takes responsibility to find incomes for his family while wife takes the leading role regarding saving money, money management and household chores such as cooking, washing, child rearing, and fetching water as a housewife. Even though husbands take responsibility to find income for their families, husbands sometimes help their wives regarding household chores such as cooking when wives are not free and when husbands are free and in some nuclear families, wives also find some incomes such as selling some snacks, selling fishes and vegetables, and tailor. In some nuclear families, wife makes decision within the family. This information was obtained from the researcher's observation.

On the other hand, in extended families, husbands, and father or father-in-law are house head and they work together transplanting, and reap in the paddy lands with their wives, and daughter or daughter-in-law. However, in some extended families, husbands do not work together transplanting, and reap in the paddy lands with father or father-in-law and they work as boat's crew for fishing at the other places or they went and worked at the another countries like Thailand or Malaysia. In

addition, some women in the community whether they are from nuclear families or extended families, they find some income by running tea shop, snacks shops and sewing clothes as tailors and selling fishes and vegetables as vendors.

Regarding with gender role, Ma Cho and Ma Mya, told the researcher that their husbands helped them household chores and as they said:

*“When he has no work, he cooks rice... he cooks rice and curry. He is reliable compares to the other husband”*

*(Ma Cho, 33-years-old, 4 children)*

*“When I got a pregnancy, he cooked rice if he was at home. When I do not have pregnancy also, he cooked rice if he was at home and he cooked rice and fetched water. When I did not free also, he cooked rice. When I cooked rice, he also helped me. Sometimes, he cooked rice when I got sick too”*

*(Ma Mya, 29-years-old, 3 children)*

In general, although in a nuclear family, husband is a house head and made decision within the family, Ma Phyu told the researcher that she decided for any matter and the thing that her husband decided is useless and as she said:

*“For any matter, I decided. The thing that my husband decided is useless. According to my husband’s decision, there is no once. My husband said me that he will do as a motor bike broker. I said back my husband that motor bike, nowadays, there are many, it is not the same with past. Do not do. I do not have the other job. I cook rice, fetch water and wash clothes. I do not have income. My husband is a mason and carpenter”*

*(Ma Phyu, 28-years-old, one child)*

But, Ma Myint told the researcher that her husband leads and decided related with work and as she said:

*“If we are doing to do something as work, we consulted each other. He leads and decided.... I work only household chores. My husband is a farmer”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Sandar told the researcher that her husband did not consult her related with job and her husband keeps money and as she said:

*“My husband does not consult me regarding with job. My husband does his job himself and decides himself regarding with job. In the past, he consulted me*

*regarding with job. I do household chores. Although I sell snacks, cold drinks, it is not work well. My husband holds money and keeps money”*

*(Ma Sandar, 26-years-old, 3 children)*

However, Ma Moe, and Ma Mya told that they hold money and as they said:

*“My husband earns money. I do household chores. I also hold money in my hand. My husband helped me cooking only when I got sick and during the postpartum period. At the other time, he does not help me. Now, I do not have income. I rely on my husband’s income..... My husband takes odd jobs... Now my husband is working as a construction worker. He gets 5000 kyats (US 6 \$) a day in Myanmar kyat rate. When the baby is grown up, I will work”*

*(Ma Moe, 22-years-old, 2 children)*

*“At home, I do household chores only. I do not earn income. My husband is a boat’s crew. When he is at home, he does not do any work. When fishery is stopped, he comes and takes a rest at home. Mostly, he works as a boat’s crew. My husband earns income at home. I hold money. When he got money, he gives me money. After he had given me money, he asked for money for buying cigarette and cold drinks”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Yu told the researcher her daily activities of household chores as she is a housewife and as she said:

*“For doing economy, I do not have responsibility because I have many children. At morning, I get up. I cook hta min chann (breakfast) to feed them. After cooking hta min chann (breakfast), I go shopping. I do only household chores. I do not have income. My husband is a farmer. He boils nipa juice when it is time to boil nipa juice. After boiling nipa juice, he earns by driving trailer”*

*(Ma Yu, 36-years-old, 5 children)*

In the village, villagers know each other although they live scattered in the village. According to the researcher’s observation, when a donation ceremony is celebrated at a house in the village, family members who are donors or donor’s relatives invite the whole villagers and also they invite villagers from neighbouring villages before two days or three days ago of celebrating donation. On the day of

donation ceremony, villagers came and helped at the donor's house for cooking such as some were dressing chicken, pork, fishes and vegetables while some were cooking rice. Not only villagers that donor invited but also single women and single men from the village came and helped at the donation. In the village, there is a *lu pyo gaung* (a leader of a group of single men) and there is a *apyo gaung* (a leader of a group of single women). The leader of a group of single men is a married man and the leader of a group of single women is a married woman but they (the leader of a group of single men and the leader of a group of single women) are seniors in terms of age and experiences. *Apyo gaung* and *lu pyo gaung*, they often transmit information their juniors whenever there is social occasion such as *tar yae* (festivals and donation ceremony, wedding ceremony and so on) and *nar yae* (funeral ceremony), they always take part. They (villagers and single men and women) go back their home after washing all dishes, all pots of curry and rice at donor's house. Besides, villagers go and help not only at donation ceremonies but also at wedding ceremony and funeral ceremony. That is a custom of village. It seems that there is a very strong social relationship in the village. Furthermore, according to the researcher's participant observation, people especially women came and helped postpartum mothers within the first three days after delivery of baby to help the postpartum mother for *shin ngway khan* (induced perspiration) and for taking a bath with *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and its fruits are edible fruits in bunches) with cold water). When they came and helped postpartum mothers, they always brought gifts such as baby clothes, baby powder, baby nappies, soap and soap powder and so on.

In the village, most villagers are working class whereas some are middle class in terms of occupation and education and income. There is not upper class in the village because there are no extremely wealthy rich people in the village. Villagers especially men who finished primary school or middle school work as carpenters, construction workers and masons, waged farmers and boat's crew at fishing business. The price of a carpenter, a construction worker, a mason, a waged farmer is 5000 kyat (US \$ 5) per day in Myanmar kyat rate. However, a boat's crew has to work for 9 months to 10 months per year and if they got a lot of fishes, they get more money and if they did not get a lot of fishes, they get money less. Generally, a boat's crew gets

money 700000 kyat in Myanmar kyat rate (US \$ 700) for 9 months to 10 months. This information was obtained from informal conversation with villagers who are boat's crews and boat's crew's wives. Women who finished primary school or middle school work as vendors, tailors, running tea shop, running grocery shop and so on. In these case, carpenters, construction workers, masons, waged farmers and boat's crew, vendors, tailors, running tea shop and running grocery shop can be recognized as working class. In fact, women who finished high school and graduated also sew clothes at their homes as tailor. However, people from the working class like carpenters, masons and construction workers seemed to made more money than people in the middle class like teachers because a teacher get 120000 kyat per month in Myanmar kyat rate (US \$120). The researcher obtained that information from the researcher's cousin who is a teacher. In the village, villagers are not interested in education much. Thus, there are few educated persons in the village. But now educated persons become a bit more compared to when the researcher lived in the village. Villagers who graduated especially most women works as school teachers in the village's school while others run a big grocery shop and are tailors. Most men who graduated go and work at city. School teachers, tailors and educated person can be recognized as middle class in terms of their education and occupation.

Most women in the village give birth at home. Some of the researcher's participants said that they gave birth at home because other women are also giving birth at home and their ancestors, and their mothers also gave birth home. It seemed that most women give birth at home because of social factors although their parents, husbands and mother-in-laws did not encourage them to give birth at home. Besides, pregnant women and postpartum mothers may follow cultural beliefs regarding food, because of social factors. For example, most postpartum mother avoided eating chilli because they are afraid that they will get diarrhea (postnatal diarrhea) if they eat chilli. According to the researcher's interviews, women said that if the postpartum mother eats chilli, she can suffer from diarrhea older people and neighbours say. It shows that most postpartum mothers avoided eating chilli because of social factors.

#### **4.1.9 Health and reproductive health profile (health problem, and family planning situations)**

As health problems in the study area, there are many cases of hypertension and diabetes mellitus. According to the researcher's informal conversation with health assistant, 60 years old, who is working at rural health centre at the study area, health assistant said that here are many cases of diabetes mellitus and hypertension cases too. That is, daughter (researcher), health problems are matters which are happening in the worldwide. Hypertension and diabetes mellitus are in all countries. The rest are that in children, daughter (researcher) will have to hear, there is no mortality and there is no pregnant women mortality. In addition, midwife who is a key informant told the researcher about health problems and reproductive health problems in the study village. She said in this village, commonly health problem is hypertension. Mostly, over twenty year old age have hypertension. There are cases of diabetes mellitus as well. If people who have diabetes mellitus, I refer them to health assistant (HA). From over twenty year old age to elderly people have commonly hypertension. I have not experienced maternal death at all in this village. But I have experienced neonatal death. Neonatal death is that a woman delivered triplets. After the fourth day of delivery, two newborn babies among triplets died. Then, during the researcher was staying in the field trip, one newborn died in fit after the fourth day of delivery.

Furthermore, the researcher made informal conversation with the other villagers in order to get rich information regarding health problems in the study area. The researcher found that mostly, there were many cases of hypertension according to the researcher's information conversation. 56 years old woman and 62 years old woman who are not participants for the study and as they said that:

*“I have hypertension, daughter (the researcher). I have hypertension...hypertension. Every-day I have to take medicine. It has been about five years already”*

*(56-years-old, informal conversation)*

*“I have got hypertension. I have to take medicine as English. Yes. I have. Blood pressure is always high. I have hypertension for a long time. I cannot count even years and months. I have got hypertension when I get old”*

*(62-years-old, informal conversation)*

Besides, the researcher made informal conversation with 63 years old woman who has hypertension and diabetes mellitus (DM) and as she said:

*“I have diabetes mellitus. I take medicines every day. Yes, I have to take see cho saye (anti-diabetic medications) and thwe toesay (antihypertensive drug). Yes, I have hypertension as well. I have hypertension first. Later, diabetes mellitus becomes. I have diabetes mellitus for about three years, four year”*

*(63-years-old, informal conversation)*

As family planning situations in the study area, midwife (key informant) said that:

“The postpartum mothers who delivered baby with the assistance of me are given oral contraceptive pills or injected contraceptive injection after forty five days of delivery. When I went and watched the postpartum mother for postnatal care, I told them to make family planning. After forty five days of deliver, they came to me and received contraceptive injection. When they did not come to me, I went to them and injected contraceptive injection. Now, they deliver baby as one baby in six years, or one baby in five years, or one baby in three years they deliver. One baby in three years they deliver is rare. Previous birth rate and now birth rate is very different. Previously, 3 % of women in 100% of women got pregnancy. Now, only about 1.8% women in 100% of women got pregnancy. Women use contraceptive injections and oral contraceptive pills as well. But, they use contraceptive injections more than oral contraceptive pills. For oral contraceptive pills, they miss the time and they are busy with their works, most women use contraceptive injection”

The researcher found that 6 women among 7 women used contraceptive injection more and only one woman used oral contraceptive pills as family planning situations. In addition, some women made family planning after 45 days of delivery baby although menstruation did not restart after delivery of baby or some women made family planning when menstruation restarted after delivery of baby or some women did not use family planning methods before menstruation restarted yet after delivery baby. But one woman did not need to use family planning methods after 45 days of delivery baby because her husband was not at home when she delivered baby. However, some women delivered baby by differing of 4 years between one baby and one baby and some women delivered baby by differing of 4 years, 2 years or some

differed baby 5 years, 2 years or one year between one baby and one baby and respectively in each informant.

Ma Mya (33 years old, 3 children) delivered baby by differing of 4 years between one baby and one baby and she mostly used contraceptive injections than oral contraceptive pills as family planning situations and as she said:

*“I delivered the first child when I was 20 years old. Now, the eldest child is 9 years old. The eldest child and the second child differ in four years old. The eldest child is nine years old age and the second child is five years old age. In the between the eldest child and the second child, I took oral medicines (oral contraceptive pills), and I used injection (contraceptive injection). I used more injection. When I take oral medicine, it does not like me. I used injection. When I take oral medicine, I felt that chest is hot and throat is hot. That’s why I used injection (contraceptive injection). Between the second child and the third child also, I used injection (contraceptive injection). The eldest child is 9 years old, the second child is 5 years old and the youngest child is delivered at 10. 27. 2014”*

Then, Ma Mya told the researcher that she has not used family planning methods after 45 days of delivery baby and as she explained:

*“After forty five days of delivery, I have not used injection. I had not used injection in two older children. When I delivered baby, my husband was not at home. When I delivered the first child, he went to Thailand. When I delivered my second child, he went to Yangon. When I delivered this baby (the youngest baby), he was at home. Although he was at home when I delivered this baby, now he was not at home. After I had delivered this baby, he went to Thailand. After five days of delivery, I have not used injection”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Yu (36 years old, 5 children) used contraceptive injections for family planning and she delivered baby by differing of 4 years between the first child and the second child and the rest children were delivered by differing of 2 years between one baby and one baby and as she said:

*“I got married when I was twenty two years old. After marriage, I did not use the contraceptive injection. I delivered my first baby when I was twenty three years old. After delivery of my first baby, I used the contraceptive injection for two*

*doses. Then, I got a second pregnancy. Now, the eldest child is over thirteen years old. The second child is now nine years already. After delivery, I ever used the contraceptive injection just for two doses or three doses. I did not use much the contraceptive injection. My third child is seven years old. The fourth child is five years old. I delivered the last baby in 8.4. 2014. I used the contraceptive injection only when menstruation restarted after delivery baby. In the last baby, since baby was delivered menstruation has not restarted yet. In the rest children, menstruation started after about one year of delivery”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Sandar (26 years old, 3 children) told the researcher that she used contraceptive injections for the family planning. Then, she differed only one year between the first baby and the second baby but she delivered the last baby when the second child was five years old and as she said:

*“After marriage, I used contraceptive injection for one dose. I got the first pregnancy when I was nineteen years old. After six months of the first baby delivery, I got the second pregnancy. Now, my oldest child is six years old. My second child is five years old. I did not have time to use contraception injection between my first child and second child. I did not know how I got the second pregnancy. After delivery of second child, I used contraceptive injection for five years. After five years, I took this baby. After forty five days of this baby delivery, I used contraceptive injection because midwife told me that after forty five days of delivery, whether menstruation restarted or not, use contraceptive injection”*

*(Ma Sandar, 26-years-old, 3 children)*

Only Ma Cho (33 years old, 4 children) used mostly oral contraceptive pills than contraceptive injections. However, Ma Cho married for two times. She married with the first husband and then, she aborted with two months of pregnancy. After separation with the first husband, she married with the second husband. She differed only one year between the first child and the second child, differed 5 years between the second child and the third child and now the last baby was 8 months year old age. The followings were as she said:

*“I got married when I was 22 years old. I could not unite with him much. He does not work....We united for over one month...oh, yes, after I had united with*

*him for over one month, I did not know that I got a pregnancy. After separating, I knew that I do not menstruate. At that time, I knew that I got a pregnancy. I aborted with two months...with two months of pregnancy. After I married with the second husband, I took oral medicine (oral contraceptive pills). Oral medicine (oral contraceptive pills) does not like me so I used injection (contraceptive injection). After I had used two injections, I got the first pregnancy. After I had delivered the first child, I used one injection (contraceptive injection). After I had used one injection, oldest child is 6 months years old and the second pregnancy is 3 months. The second child and the third child is far...when I used oral medicine and injection alternatively between the second child and the third child, I was okay. The oldest child is 9 years old and the second child is 8 years old. The third child is 3 years old. Now, the fourth child is 8 months years old. After forty five days of delivery this baby, I took oral medicine (oral contraceptive pills)”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Phyu is a primi-parous woman. However, she told the researcher that she miscarried seven months into the first pregnancy and she used contraceptive injection after 45 days of delivery and as she explained:

*“I got a pregnancy after three months of marriage. I did not take medicine (oral contraceptive pills) because my husband wanted baby. I miscarried seven months into the first pregnancy. After two months and five days of delivery this baby, menstruation started. But contraceptive injection was injected after forty five days of delivery. Now, contraceptive injection has been injected for three times”*

*(Ma Phyu, 28-years-old, one child)*

However, the researcher cannot mention about family planning situations of Ma Myint, two children, and Ma Moe, two children as how many year they differed between one baby and one baby because Ma Myint married for three times and Ma Moe married for two times. But, the researcher tried to mention about family planning situations of Ma Myint and Ma Moe. Ma Myint made family planning after fifty days of the second baby as using contraceptive injection and Ma Moe did not use family planning methods because menstruation has not restarted yet after delivery of the second baby. The followings were as they explained:

*“I got married when I was eighteen years old. After six months of separation with my first husband, I married with my second husband. After marriage with my second husband, we went to shan pyay (Thailand). We worked in rubber garden. After marriage with my second husband, I took oral contraceptives pills. Sometimes I forgot to take oral contraceptive pills. And so, I got a pregnant. After about one year of marriage with my second husband, I got a pregnancy. I delivered my first child when I was twenty years old. My first child was delivered at Thailand as normal vaginal delivery. Now, first child is eight years old. After delivery of my first child, I used contraceptive injection. I divorced with my second husband at village headman’s house, Myanmar. I married with my third husband when my first child is five years old. After marriage with third husband, I used contraceptive injection for one dose. Then, I stopped the use of contraceptive injection. After over one year of marriage with third husband, I got a second pregnancy. Now after fifty days of delivery this baby, menstruation restarted. My husband did not know that I used now contraceptive injection for one dose he he! I used contraceptive injection after about two months of delivery”*

*(Ma Myint, 29-years-old, 2 children)*

*“I got married when I was 16 (sixteen) years old. He was not a native of the study village. We loved each other. My parents did not agree with him. I did not understand that I needed to use contraception. I got a pregnancy after marriage. The first baby was born when I was 17 (seventeen) years old. I ran away from my husband to my mother when my husband was not at home. After that I was separate with my first husband.....Then I went to Thailand. I got married with the second husband in Mahachiang, Thailand. He is from Myanmar. I got marriage with second husband when I was eighteen (18) years old. I used the contraceptive injection after marriage with my second husband. Then I stopped the use of contraceptive injection. We arrived back to Myanmar when I was 20 years old. Then, I got the second pregnancy. Now, I have not used contraception injection. After delivery baby, menstruation has not restarted yet”*

*(Ma Moe, 22-years-old, 2 children)*

## 4.2 Meaning of birth: birth is natural

All women defined meaning of birth as natural and also they do not think birth as a disease. However, they defined meaning of birth differently and respectively in each. Some women said that every woman has to deliver baby and every woman who is married has to deliver baby. Thus, they defined meaning of birth as natural. Some women said that God created birth for women, birth is women's natural. Thus, they said birth is natural. Some women defined meaning of birth as natural in another ways. For example, only during childbirth, they had to suffer from abdominal pain and after childbirth, they did not have to suffer from abdominal pain, and disease is always painful and sick, thus they said birth is not a disease, birth is natural and then, they said birth becomes itself, sick is disease and cough is disease, thus birth is natural. Some women said that baby can be delivered from woman's vagina according to natural and baby is being delivered according to nature, thus birth is natural and birth is not a disease. The followings were as they explained:

*"I do not think birth as a disease. Why I do not think birth as a disease is that birth is natural. Why birth is natural is that woman...every woman has to give birth baby. Then birth has become natural. Birth is not disease"*

*(Ma Cho, 33-years-old, 4 children)*

*"Birth is natural. I do not think that birth as a disease. Birth is natural. Every woman who is married has to deliver baby, right. Therefore, birth is natural"*

*(Ma Sandar, 26-years-old, 3 children)*

*"Women give birth to baby is natural. Almost every woman gives birth. Birth is natural. God (the image of Buddha) created birth for women. Women who are married cannot stay without giving birth. Women have to deliver baby. Birth is women's natural. That's why giving birth is natural. Birth is not disease. Birth is natural"*

*(Ma Moe, 22-years-old, 2 children)*

*"I do not think birth is disease. After childbirth, abdomen is not painful. Only during childbirth, abdomen is painful. Disease is always painful, right. That's why birth is natural. Disease will be always painful and sick. Now, abdomen is painful only during childbirth. After childbirth, it happens nothing"*

*(Ma Mya, 29-years-old, 3 children)*

*“Birth is natural. Birth is not disease. Some delivered baby by doing operation is nowadays. In the past, it was not operation days. Birth is natural because baby can be delivered from woman’s vagina according to nature. Birth is not disease”*

*(Ma Phyu, 28-years-old, one child)*

*“Birth is natural. Birth is not disease. Birth becomes itself. Disease is that sick is disease, right. This is called disease. Now, if I have got a cough, I have got a disease which is cough disease. Natural becomes itself. Birth is natural and becomes itself”*

*(Ma Myint, 29-years-old, 2 children)*

*“Birth is natural. I do not think birth as disease. Birth is not disease. Baby... baby is delivered is that baby is being delivered according to nature. So birth is not disease. Birth is natural”*

*(Ma Yu, 36-years-old, 5 children)*

### **4.3 Meaning of home birth**

The researcher interviewed 7 rural home birth women. The researcher would like to explore how rural home birth women define meaning of home birth from their emic perspective. The followings were meaning of home birth defined by seven rural home birth women:

#### **Home birth is the most fulfilling place**

Meaning of home birth is defined as home birth is the most fulfilling place by some rural home birth women. It was confirmed by

Ma Cho told the researcher that home birth is the most fulfilling place because she had to deliver baby at her home and there are her husband and her children also at home and as she said:

*“Home is the most fulfilling place when baby is delivered at home. When I delivered baby at home, I felt very fulfilling because I delivered baby at my house. Home is the most fulfilling place. I felt free...free...free too and I felt fulfilling too when I gave birth at home. Because at my house, I can stay freely as I like and I felt fulfilling too. At home, there are my husband and my children. That’s why I felt fulfilling. Giving birth at home is fulfilling. Home is the most fulfilling place”*

*(Ma Cho, 33-years-old, 4 children)*

*“Home is the most fulfilling place to birth”*

*(Ma Phyu, 28-years-old, one child)*

Ma Sandar told the researcher that giving birth at home is the most fulfilling place when she gave birth at home and as she said:

*“Giving birth at home is the most fulfilling place. I felt fulfilling when I gave birth at home. Home is the most fulfilling place”*

*(Ma Sandar, 26-years-old, 3 children)*

### **Home birth is better for health**

In addition, Ma Cho, Ma Phyu and Ma Sandar defined meaning of home birth as giving birth at home is better for health. Ma Cho told the researcher that giving birth at home is better for health because she can do *shin ngway khan* (induced perspiration) and she can take a bath *shin yay* at home and traditional practices are not allowed at hospital and rural health centre and if *shin ngway khan* and taking a bath *shin yay* was done during postpartum period, eyes are clear when she gets old and as she explained:

*“If baby is delivered at home, health is better. Because I can do shin ngway khan (induced perspiration), I can take a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it's fruits are edible fruits in bunches) with cold water), breasts can be massaged with boiled zaw ywat (boiled herbal leaves), and body and hands can be massaged with hot brick, yes. At rural health centre, hospital, they do not allow using hot brick, they injected only say puu (antibiotics), we cannot do shin ngway khan also and we cannot take a bathshin yay. When baby is delivered at home, health is better. If we do shin ngway khan, and take a bath shin yay, eyes are clear, later...when we get old, eyes are clear. In people who delivered baby by using only medicines, having poor eyesight is fast and having blurred vision is fast. Giving birth at home is better for health”*

*(Ma Cho, 33-years-old, 4 children)*

However, Ma Phyu and Ma Sandar told the researcher that giving birth at home is better for health because they felt free and fulfilling when they gave birth at home and as they explained:

*“When baby is delivered at home, I felt fulfilling and free, so health is better for me”*

*(Ma Phyu, 28-years-old, one child)*

*“Giving birth at home is better for health because I felt fulfilling and free”*

*(Ma Sandar, 26-years-old, 3 children)*

### **Home birth is free in mind**

Ma Mee, a key informant told the researcher that she felt free in her mind when she gave birth at home and home is the freest place to birth and as she said:

*“Giving birth at home is free, in my mind. I felt free when baby is delivered at home. At hospital, I felt not free. Home is the freest place to birth”*

In addition, Ma Mee told the researcher that she thinks health is better if baby is delivered at home due to massage body with hot brick, taking a bath *shin yay*, doing *shin ngway khan* (induced perspiration) and staying beside the fire and as she explained:

*“I think that if baby is delivered at home, health is better. If baby is delivered at home, I can do nicely and freely. At my home, I can do as I like. At hospital, I felt not free. Health is better is that for example, we can massage body with hot brick, can take a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and it’s fruits are edible fruits in bunches) with cold water), and can do *shin ngway khan* (induced perspiration) too. And then we can stay beside the fire. At hospital, rural health center (RHC), we cannot do”*

*(Ma Mee, 42-years-old, 5 children)*

### **Home birth is a safe place and good for health**

Some women defined meaning of home birth as home birth is a safe place. In addition, they told the researcher that giving birth at home is good for health due to traditional practices such as staying beside the fire, doing *shin ngway khan*, and taking a bath *shin yay*. It was confirmed by:

*“Giving birth at home is good for health and safe. I do not want to deliver baby at hospital or rural health centre (RHC). I am afraid. If baby is delivered at home, I can take a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and it’s fruits are edible*

*fruits in bunches) with cold water), do shin ngway khan (induced perspiration) and then can stay beside the fire. So giving birth at home is good for health. At hospital and rural health centre (RHC), we cannot do shin ngway khan, cannot take a bath shin yay, and cannot stay beside the fire. At hospital, rural health centre (RHC) has only medicines. Giving birth at home is good for health”*

*(Ma Moe, 22-years-old, 2 children)*

*“Giving birth at home is a safe place. Safety is that I felt safe under parent’s guardianship. Then, I did shin ngway khan (induced perspiration). After doing shin ngway khan, I took a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it’s fruits are edible fruits in bunches) with cold water). Therefore, giving birth at home is good for health. In later, numbness does not happen”*

*(Ma Myint, 29-years-old, 2 children)*

### **Home birth is the safest place in mind**

There was only one woman who defined meaning of home birth as home is the safest place to birth because she delivered baby at her home. In addition, she told the researcher that giving birth at home is good for health due to taking a bath *shin yay* and doing *shin ngway khan*. It was confirmed by:

*“In my mind, I, safe...the safest place is home because I delivered baby at my home. Then giving birth at home is good for health because I can do shin ngway khan (induced perspiration) and I can take a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it’s fruits are edible fruits in bunches) with cold water) at my home”*

*(Ma Yu, 36-years-old, 5 children)*

### **Home birth is the most peaceful place**

There was only one woman who defined meaning of home birth as home birth is the most peaceful place. However, she told the researcher that she does not think health is better whether she gave birth at home or hospital and as she explained:

*“Home is the most peaceful place to birth. I do not think that giving birth at home is better for health. I do not think is that if I happens something suddenly, how to do? Suddenly...suddenly, now if I happened something, and if I suffer from mee yat thwe (blood prerssure) is high, I will have to be sent to hospital. That’s why I do not*

*think that health is better although baby is delivered baby at home. Although baby is delivered at hospital, I do not think that health is better. If I suddenly happen, how to do? Although baby is delivered at hospital, I can suffer from hypertension suddenly and if I suffer from hypertension, they (doctors) will have to treat me”*

*(Ma Mya, 29- years-old, 3 children)*

#### **4.4 Social, cultural and economic factors influence women to give birth at home**

##### **Home birth: cost less and due to financial problems**

Midwife, a key informant told the researcher her opinion regarding with why pregnant women do not come and deliver baby at rural health centre or why they did not go to hospital as the main reasons. She told the researcher that rural home birth women said hospital is money building. If they go to hospital, it cost them for travelling expenses, food expenses and medical fees. They know it does not cost them that much if baby is delivered at rural health centre. They think that although baby is delivered at rural health centre, midwife will assist them as normal vaginal delivery. This midwife will assist them giving birth. Although baby is delivered at home, this midwife comes and assists them giving birth. That’s why they do not come and deliver at rural health centre. These are the main reasons.

Ma Cho, Ma Phyu and Ma Moe told the researcher that money is the main reason when they decided to give birth at home. They mentioned that the main reason for giving birth at home is due to money. In addition, they said that giving birth at home cost them less and if they would deliver baby at hospital or rural health centre, it will cost them much, thus they gave birth at home as they are poor and they do not have money. Moreover, they said that if they have money, they will go and deliver baby at rural health centre. As they explained:

*“I gave birth at home by deciding myself. In every child too, I delivered baby at home. Also in this baby, I gave birth at home. All are because I do not have money. If I have money, I can go and deliver baby at rural health centre. I gave birth at home because I do not have money. The main reason that I do not go and deliver baby at hospital, or rural health centre is because I do not have money”*

*(Ma Cho, 33-years-old, 4 children)*

*“When I decided to give birth at home, it was because of money. At that time, my husband has not gotten contracts. In the past, my husband had to work on daily wages. Now my husband has to work as a leader at contract. The main reason for giving birth at home was that it was because of money”*

*(Ma Phyu, 28-years-old, one child)*

*“The main reason for giving birth at home is due to money. We do not have money. When the baby is delivered at home, it will cost me less. If baby will be delivered at hospital, it will cost me much”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Thein, a key informant also told the researcher that giving birth at home cost her less and she could not go and deliver baby at hospital as she is poor and she does not have money and as she said:

*“I am a poor person, so I think that it will cost me less if baby is delivered at home. Giving birth baby at home is related with money. I could not go to hospital because I do not have money”*

*(Ma Thein, 26-years-old, 2 children)*

**Home birth will be surrounded with family members (not having supporters when baby is delivered at hospital or rural health centre)**

Some women said that it is required people who will follow and watch them ever if they would deliver baby at rural health centre or hospital. That was the main reason for women to make decision for giving birth at home and not to go and deliver baby at hospital or rural health centre. It seemed that home birth might be surrounded with the family members. Ma Cho and Ma Phyu said:

*“The reason that I did not go and deliver baby at hospital or rural health centre is because of no money and there is no people who will follow and watch me at hospital or rural health centre”*

*(Ma Cho, 33-years-old, 4 children)*

*“The main reason for giving birth at home is that there are no people who will watch me ever if I will deliver baby at hospital or the rural health centre”*

*(Ma Phyu, 28-years-old, one child)*

### **Having supporters when the baby is delivered at home**

Having supporters when the baby is delivered at home was also one of the reasons when women decided to give birth at home. Some rural home birth women said that if they would deliver baby at rural health centre, their husbands will be tired as their husbands will have to send rice with tiff in carrier to them and when they deliver baby at home, their husbands could do cooking and fetch water as well at home, when they delivered baby at home there were people who will watch and help them for cooking, for taking a bath and so on and it is not specially required a person who will watch them. In addition, women said that if the baby will be delivered at rural health centre, there is only one midwife and no people to come and help them at the rural health centre and it is specially required a person who will watch and help them, thus they gave birth at home. Ma Moe and Ma Sandar said:

*“If the baby will be delivered at the rural health centre, it will be tired. If the baby was delivered at home, my husband can cook rice and fetch water at home. If the baby will be delivered at the rural health centre (RHC), my husband will have to send rice with tiffin carrier to me and then he will be very tired. Giving birth at home is good. People will come and watch me at home. If the baby is delivered at rural health centre (RHC), who will come and watch me. When the baby is delivered at home, people came and watched me and people bathed me when it was time to take a bath. People were coming and helping me. At the rural health centre (RHC), there will be only a midwife, that’s all. There are no people who will help me. When the baby was delivered at home, people came and watched me. Thus, I gave birth at home”*

*(Ma Moe, 22-years-old, 2 children)*

*“If the baby is delivered at home, people who come and watch the postpartum mother help the postpartum mother. For cooking, no need to worry. When the baby is delivered at home, a person who will watch the postpartum mother is not required specially. If the baby is delivered at the rural health centre, a person who will watch the postpartum mother is required specially. That’s why I gave birth at home”*

*(Ma Sandar, 26-years-old, 3 children)*

Midwife also supported this statement. Midwife told that rural home birth women think if the baby is delivered at home, there are people who will help them and there are no people who will help them if the baby is delivered at rural health centre. They think that if the baby is delivered at home, husband can go to work. No need to stop going to work. If they go and deliver baby at hospital, husband will have to stop going to work. They think like that. That's why they do not come and deliver at rural health centre. These are the main reasons.

### **Home birth is our cultural norm**

Giving birth at home is a cultural norm for women in the study area to make decision to give birth at home. The reasons most women decided to give birth at home were due to the other people are also giving birth at home, the whole village is also giving birth at home, their mothers also gave birth at home, and most women from the village give birth at home. In addition, women said that all pregnant women near their houses are also giving birth at home, thus they also gave birth at home and if all pregnant women are giving birth at the rural health centre, they also would deliver baby at the rural health centre. Ma Cho, Ma Moe, Ma Phyu, and Ma Myint said:

*“Every people in this lower part (the lower part of the village) gave birth at home. Yes, only one, mae yote (a woman who is her neighbour) to cut thar ee (uterus), thar ee...what...for sterilization, went and delivered baby at hospital. Some people also from upper part of the village are giving birth at home. The other people are also giving birth at home. So I also gave birth at home”*

*(Ma Cho, 33-years-old, 4 children)*

*“The reason of giving birth at home is that the other people are also giving birth at home. Most women give birth at home. That's why I decided to give birth at home”*

*Ma Moe, 22-years-old, 2 children)*

*“The pregnant women who stay near my house are also giving birth at home. They are also giving birth at home so I also gave birth at home. If all pregnant women are giving birth at the rural health centre, I also will go to the rural health centre”*

*(Ma Phyu, 28-years-old, one child)*

*“Why I gave birth at home is that my mother also gave birth at home. The whole village also gave birth at home. That’s why I gave birth at home”*

*(Ma Myint, 29-years-old, 2 children)*

**Saya ma (midwife) did not tell them to go and deliver baby at hospital**

*Saya ma (midwife) is one of the influencing factors in decision making about giving birth at home for women. Some women said that if *saya ma* said them as baby’s position in the abdomen is not good (e.g: umbilical cord is wrapping around baby’s neck or baby’s position is in transverse lie) or mother’s health is not good and if *saya ma* said them to go and deliver baby at hospital as they might not deliver baby easily at home, they would deliver baby at hospital. But, *saya ma* (midwife) did not say them nothing as they might have difficult birth, and then, *saya ma* said them that baby’s position is good and mother’s health is good, thus they gave birth at home. Ma Cho, Ma Mya, and Ma Phyu said:*

*“If *saya ma* (midwife) said me that I cannot deliver baby at home and my baby’s position is in a transverse lie or my baby is oh!, umbilical cord is wrapping around baby’s neck, and when *saya ma* said me that I will have to go to hospital, I would go to hospital. Yes, now *saya ma* did not say me anything. So I delivered baby at home”*

*(Ma Cho, 33-years-old, 4 children)*

*“*Saya ma* (midwife) did not say me to deliver baby at home and did not say me to go and deliver baby at hospital. We can deliver baby wherever we want to deliver baby. *Saya ma* (midwife) said me that baby’s position is good. That’s why I delivered baby at home. If *saya ma* (midwife) said me that in the abdomen, baby’s health is not good, and baby’s position is not good, and if *saya ma* said me to go and deliver baby at hospital, I will go and deliver baby at hospital. Now, *saya ma* (midwife) said me that baby’s position is good, and I was also in good health, so I delivered baby at home”*

*(Ma Mya, 29-years-old, 3 children)*

*“The reason of giving birth at home is that I received antenatal care weekly, midwife said nothing to me I might have difficulty in giving birth. If there might be a difficult condition in giving birth, midwives say that you will not deliver*

*your baby easily. Midwives said nothing to me that I do not have difficult condition in delivery. That's why I gave birth at home"*

*(Ma Phyu, 28-years-old, one child)*

### **Encouraging women to give birth at home by the health care provider (health assistant)**

The health assistant (HA who is health care provider) is another source of advice and influences when some women decided to give birth at home as the main reason. Women said that the main reason of giving birth at home is due to the encouragement of health assistant also. It was confirmed by

*"The main reason of giving birth at home is that say hmuu (Health Assistant) also encouraged me. Say hmuu (Health Assistant) asked me that where you would deliver baby. I said say hmuu that I will deliver at home. Then say hmuu (Health Assistant) said me that go ahead at home, the other people are also giving birth at home. It is good at home. That's why I gave birth at home"*

*(Ma Phyu, 28-years-old, one child)*

### **Home birth is a traditional practice**

Some women said that giving birth at home is a traditional practice as their ancestors gave birth at home since in the past and their mothers, and their sisters also gave birth at home conventionally as well according to ancient custom. Thus, they said they also gave birth at home. Ma Mya and Ma Yu said:

*"Since the period of ancestors, people in our village delivered at home, right. Since ancient period, people delivered baby at home. Ancestors also delivered baby at home. My mother also delivered baby at home and my sister also delivered baby at home. That's convention and baby is delivered at home conventionally. That's why I gave birth at home."*

*(Ma Mya, 29-years-old, 3 children)*

*"Since ancient period, according to ancient custom, baby was delivered at home. That's why I also gave birth at home"*

*(Ma Yu, 36-years-old, 5 children)*

**Home birth can follow traditional practices such as taking a bath *shin yay*, doing *shin ngway khan* and massage body with hot brick**

Women decided to give birth at home because they can observe traditional practices. Ma Yu and Ma Cho said they cannot follow traditional practices such as taking a bath *shin yay*, doing *shin ngway khan* and massage body with hot brick at hospital and rural health centre because modern medical practitioners (doctors, nurses) do not allow them to follow traditional practices, and they just give medicines to the postpartum mother at hospital and rural health centre. They also worried that if they don't follow traditional practices such as taking a bath *shin yay*, doing *shin ngway khan* and massage body with hot brick they would suffer from joints ache from both hands and legs in later. In addition, they said giving birth at home is good for health as they can follow traditional practices if baby is delivered at home. The followings were as they said:

*“Giving birth at home is good for health because I can do shin ngway khan (induced perspiration) and I can take a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it's fruits are edible fruits in bunches) with cold water) at my house. At hospital and rural health centre, we cannot do like that. Postpartum mothers just have to take medicines. That's why I do not want to deliver baby at hospital and rural health centre. If the baby is delivered at home, shin ngway khan can be done and body can be massaged with hot brick. If we do like that, it is good for health. If baby is delivered at hospital or rural health centre, I am worried that legs joints and hands joints will ache in later. That's why I gave birth at home”*

*(Ma Yu, 36-years-old, 5 children)*

*“The reason I did not go and deliver baby at hospital, or at rural health centre is because I cannot take a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it's fruits are edible fruits in bunches) with cold water), and cannot do shin ngway khan (induced perspiration) too at hospital, and rural health centre”*

*(Ma Cho, 33-years-old, 4 children)*

Midwife also mentioned the reason why women did not come and deliver at rural health centre is related with making the fire. Of course, they do not come and

deliver at rural health centre because they worry that they cannot make the fire which will be good for health after. They said that if we come and deliver at midwife's rural health centre, we cannot make the fire, we cannot take a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and it's fruits are edible fruits in bunches) with cold water).

#### **Mothers experienced no problems during their first home birth**

The reason women decided to give birth at home is due to home birth happened nothing since the first baby was born at home. It was confirmed by

*“Since the first born, I delivered baby at home. It happened nothing. That's why I gave birth at home”*

*(Ma Sandar, 26-years-old, 3 children)*

#### **Did not have any problems related to pregnancy**

The reason women decided to give birth at home is due to they did not have any problems or difficulty related to pregnancy as they need to go and deliver baby at hospital or rural health centre. Ma Mee, a key informant said:

*“I do not want to deliver baby at rural health centre. I want to deliver baby at home only. I did not have any difficulty to go and deliver at hospital or rural health centre. So I gave birth at home”*

*(Ma Mee, 42-years-old, 5 children)*

### **4.5 Complications during childbirth related to home birth practice**

According to the researcher's informal conversation and interviews, the researcher found that some rural home birth women in the study village had to suffer from postpartum haemorrhage during childbirth. But rural home birth women who got postpartum haemorrhage during childbirth had not to be referred to hospital because midwife can manage postpartum haemorrhage at home.

28 years old, 3 children motherhood who is not a participant for the study. She said her experiences of postpartum haemorrhage during childbirth in the last baby, but she thought that her placenta was being sticky at the back without placenta coming out after delivery of baby (in medical term: retained placenta which can be defined as lack of expulsion after delivery of the infant or delayed separation and expulsion of the

placenta after delivery of the infant) because she stayed beside the fire during pregnancy as she believed that staying beside the fire during pregnancy may lead to being sticky of placenta at the back. As she said:

*“Immediately blood flowed after childbirth. Blood flowed...blood flowed...blood flowed after childbirth. Placenta was being sticky at the back. Older people do not let the pregnant woman stay beside the fire if the pregnant woman feels cold during winter because they worry that placenta will be sticky at the back of the pregnant woman when she delivers baby. My mother also did not let me stay beside the fire during pregnancy period. If the pregnant woman stays beside the fire, placenta can be sticky at the back when she delivers baby. When I cooked rice, I stayed beside the fire during pregnancy, haa haa because I felt cold in winter. Sometimes, I noticed what my mother told me. Sometimes, I forgot what my mother told me. When I delivered baby, placenta was sticky at the back because I stayed beside the fire in winter during pregnancy period. Midwife had to strip off the placenta. It took about 10 minutes to come out the placenta from the abdomen (womb). When placenta has come out, blood flowed. At that time, I had got a postpartum haemorrhage. I knew because a lot of blood was flowing. I have not happened like that in my older children. In the last baby, giving birth was easy but it was difficult to pull placenta out. In older children, no one has happened like that, after delivery of baby placenta came out at the same time. Midwife said nothing regarding with postpartum haemorrhage and it is difficult to pull placenta out after childbirth. After placenta has come out, midwife told me that if placenta did not come from the abdomen (womb), it is needed to go to hospital to operate. When midwife has told me, I was afraid. Before midwife told me, I did not know. When midwife told me, I knew. I became afraid. I was not afraid before because I did not know. I know blood was flowing. But midwife said nothing during childbirth. After placenta has come out, midwife told me about that”*

Ma Thein (key informant, 26 years old, 2 children) also told the researcher that she got postpartum haemorrhage during childbirth of the second baby because she did not take medicines that midwife gave her when she received antenatal care and as she said:

*“I did not have postpartum haemorrhage when I delivered my first baby. I had postpartum haemorrhage when I delivered the second baby. Why I had*

*postpartum haemorrhage is that I think I had postpartum haemorrhage because I did not take medicines that midwife gave me when I received antenatal care at rural health centre. Midwife told me that if medicines that she gave are taken, bleeding is controlled during childbirth. But I did not take medicine midwife gave me in the second pregnancy. When I delivered baby, after baby has been delivered, and when I had postpartum haemorrhage I had to feel like that in my mind as I had postpartum haemorrhage because I did not take medicine that midwife gave me”*

Then, Ma Thein told the researcher about her experiences of postpartum haemorrhage during childbirth with the second pregnancy and also she told that she was not afraid that when she got postpartum haemorrhage because she trust midwife as midwife is skillful in women’s home birth delivery. The followings were as she explained:

*“After delivery of baby, it took about 30 minutes without placenta coming out. Midwife said that it is difficult to find placenta, placenta cannot be found and placenta has not been found. Midwife asked me to squeeze. Midwife asked me to squeeze also placenta like baby is squeezed. I was not afraid while it took about 30 minutes without placenta coming out. Midwife pushed down abdomen to come out placenta. Then, when placenta reached to lower part of the abdomen, when midwife pulled out the placenta, placenta came out. But I had postpartum haemorrhage. Blood was flowing also after placenta has come out. Blood was flowing also before placenta came out. Blood was flowing while placenta was being pulled out. Midwife did not tell me because she worried that I will be afraid. But I was always cautious. Midwife did not tell me that I have postpartum haemorrhage. I knew the condition that midwife was putting her hand into my vagina. When midwife was putting her hand into vagina, cotton also included. Midwife put cotton into my vagina when blood was flowing. Bleeding was blocked with cotton not to come out blood. Then, I also knew. When the first baby was delivered, a lot of cottons were not put. In this baby, a lot of cottons were put into the vagina. When cottons were pulled out, cotton has blood which was sucked by cotton. I was noticing that blood was flowing as bwet bwet bwet bwet (sounds of blood flowing). I was not afraid while I have postpartum haemorrhage. How can I say it, midwife was beside me. I thought that midwife was beside me, midwife can do, midwife is skillful than me”*

(Ma Thein, 26-years-old, 2 children, key informant)

## 4.6 Cultural beliefs and practices during pregnancy period, childbirth (intra-partum) period and postpartum period related to home birth

### 4.6.1 Cultural beliefs and practices during pregnancy period related to home birth

Cultural beliefs and practices followed by rural home birth women during pregnancy were (1) preparing *mee yat htin*, (2) dietary precautions and (3) behavioural precautions, (4) drinking *sa nwuin* (turmeric) powder for easy birth, for fart, not to feel *lay nar* (flatulence) and (5) applying *sa nwuin* (turmeric) powder on the abdomen for fart, to feel comfortable in the abdomen and (6) applying *sa nwuin* (turmeric) powder on the extremities, not to possess at the pregnant woman's body by *ma kaunn soe war* (evil-spirits) during pregnancy and (7) avoidance of taking iron supplements during pregnancy.

#### 1) Preparing *mee yat htin* (fire wood)

In the study area, according to the researcher's observation, *putting mee yat htin* (fire wood) under the ladder of the pregnant women's houses is the custom of the village. However, in one story flat type house, there is no ladder so *mee yat htin* is put beside the house. According to the researcher's informal conversation, 62 years old woman said that:

*"Fire wood cannot be put at the other places. Fire wood is put only under the ladder of the house. It is the custom and it is the custom of the village"*

5 out of 7 informants practiced preparing *mee yat htin* (fire wood) during pregnancy period.

*"Mee yat htin is prepared in every child. After five months of pregnancy, I had prepared mee yat htin. Mee yat htin is put under the ladder of the house. On the mee yat htin, sue khat (thorn branches) were put, bricks and coal tongs were also put"*

(Ma Cho, 33-years-old, 4 children)

The reason why they prepared *mee yat htin* (fire wood) since pregnancy period is to stay beside the fire after childbirth during the postpartum period and the

reason why they put *sue khats* (thorn branches) on the *mee yat htin* (fire wood) is to prevent *ma kaunn soe war* (evil-spirits) and is to free from *ma kaunn soe war* (evil-spirits) at *mee yat htin*, and coal tongs and bricks also. They believed that *ma kaunn soe war* (evil-spirits) are afraid of *sue khats* (thorn branches) and *ma kaunn soe war* dare not come near to the *mee yat htin* if *sue khats* are put on the *mee yat htin*. They believed that if they did not put *sue khat* on the *mee yat htin*, *ma kaunn soe war* will bestaying at *mee yat htin*, and when *mee yat htin* are carried onto the house to make the fire for staying beside the fire by the postpartum mother, *ma kaunn soe war* follow onto the house by staying at *mee yat htin*, when the fire is made, *ma kaunn soe war* do not stay at *mee yat htin*, *ma kaunn soe war* will possess to postpartum mother's body or baby's body, then *ma kaunn soe war* can bewitch the postpartum mother to be insane, to get ill or to die, and also *ma kaunn soe war* can bewitch baby to suffer from abdominal pain. But, according to the researcher's observation and interviews, some do not prepare bricks and tongs by putting bricks and tongs on the *mee yat htin* since pregnancy period.

According to the researcher's informal conversation, a pregnant woman in seven months, 31 years old said that:

*“Putting sue khats on the mee yat htin (fire wood) is to be free from soe mi sar (evil-spirits) at the mee yat htin”*

*(a pregnant woman in seven months, informal conversation)*

Ma Cho told the researcher that she put *sue khats* (thorn branches) on the *mee yat htin* and she put bricks and tongs as well on the *mee yat htin* during pregnancy to free from *ma kaunn soe war* (evil-spirits) at *mee yat htin*, bricks and tongs because she is afraid that if *ma kaunn soe war* was staying at *mee yat htin*, bricks and tongs, when she delivered baby *ma kaunn soe war* will possess at her body and then, *ma kaunn soe war* will bewitch her and her baby. The followings were as she said:

*“When I delivered baby, when the fire is made, ma kaunn soe war (evil-spirits) will stay at mee yat htin if sue khat (thorn branches) are not put on the mee yat htin. If ma kaunn soe war stayed at mee yat htin, when they make the fire, ma kaunn soe war did not stay at mee yat htin. Ma kaunn soe war will possess at my body. I am afraid that ma kaunn soe war will possess at my body. So I put sue khat (thorn branches) on the mee yat htin. If ma kaunn soe war possess at my body, ma kaunn soe*

*war can bewitch me to be insane. They (ma kaunn soe war) can bewitch me to get ill and to die. I am afraid that ma kaunn soe war will bewitch me and baby. So I prevented ma kaunn soe war by sue khat (thorn branches). For mee kan the (postpartum mother), mee yat htin is also useful, brick also is useful and tongs is also useful. I am afraid that ma kaunn soe war will stay at brick and coal tongs. So brick and tongs were put at the mee yat htin and then sue kaht (thorn branches) were put on the mee yat htin, brick and tongs. Materials that the postpartum mother uses are prevented from ma kauun soe war with sue khat (thorn branches). I prepared like that in every child”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Yu also explained that she put bricks on *mee yat htin* and then, she put *sue khats* (thorn branches) on the *mee yat htin* to free from *ma kaunn soe war* at *mee yat htin* and bricks. As she explained:

*“Mee yat htin was put under the ladder of the house. Sue khat (thorn branches) was put on mee yat htin. Any kind of sue khat (thorn branches) can be put on mee yat htin. I put plum thorn branches. Five for sue khat and three for bricks were put on the mee yat htin. When sue khat (thorn branches) were put on the mee yat htin, ma kaung soe war cannot stay at the mee yat htin. And then ma kaunn soe war cannot climb up onto the house. If sue khat (thorn branches) are not put on the mee yat htin, ma kaunn soe war will stay at the mee yat htin. After delivery of baby, when mee yat htin is carried onto the house to make the fire, ma kaunn soe war will possess at baby’s body and then ma kaunn soe war can bewitch baby to suffer from abdominal pain. If sue khats (thorn branches) are put on the mee yat htin, sue khats protect mee yat htin and bricks to free from ma kaunn soe war at mee yat htin and bricks. I prepared mee yat htin at about five months of pregnancy. In every child, mee yat htin was prepared by putting sue khat”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Moe, she prepared *mee yat htin* at pregnancy period by putting *sue khat* (thorn branches) on *mee yat htin*. She said she put *sue khat* on *mee yat htin* because she saw *sue khat* (thorn branches) were put on *mee yat htin* at pregnant women’s houses and as she said:

*“People say that baby can be delivered at only seven months of pregnancy. So I prepared the mee yat htin before seven months of pregnancy. At home, I prepared the mee yat htin. Also bricks were put on the mee yat htin. The mee yat htin has to be put under the ladder of the house. The mee yat htin cannot be put at the other place. The mee yat htin has to be put under the ladder of the house. Then lemon thorn branches (sue khat) were put on the mee yat htin. It is the custom of the village that the mee yat htin is put only under the ladder of the house. When I see thorn branches (sue khat) are put on the mee yat htin at the other pregnant women’s house, I also put. I do not know why thorn branches (sue khat) are put on the mee yat htin”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Phyu told the researcher that she put *mee yat htin* beside the house because her house is one story single flat house and there is no ladder. Then she did not put *sue khat* (thorn branches) and bricks on the *mee yat htin* (fire wood). But she sprinkled turmeric powder on *mee yat htin* to free from *ma kaunn soe war* (evil-spirits) at the *mee yat htin* and as she said:

*“Mee yat htin was put beside the house. Bricks and sue khat (thorn branches) were not put on the mee yat htin. According to my idea, I sprinkled some turmeric powder on mee yat htin to free from ma kaunn soe war at the mee yat htin. People say that if a pregnant woman goes out at night time, has to apply turmeric powder. Ma kaunn soe war cannot possess at the pregnant woman’s body when the pregnant woman applied turmeric powder. That’s why I sprinkled some turmeric powder on mee yat htin (fire wood). Turmeric also win ma kaunn soe war. Some older people say that when the fire is made, witches and ma kaunn soe war (evil-spirits) can follow at the mee yat htin. Witches also can bewitch baby to die and also can bewitch mother to happen something. If I did not sprinkle turmeric powder on mee yat htin when something happened I will think it is because I did not sprinkle turmeric powder on the mee yat htin. When I sprinkled turmeric powder on the mee yat htin, it is peaceful”*

*(Ma Phyu, 28-years-old, one child)*

In term of preparing *mee yat htin* practices, Ma Myint told the researcher that her mother put *sue khat* (thorn branches) on *mee yat htin* (fire wood) and also her

mother sprinkled *sa nwuin* (turmeric powder) on *mee yat htin* to free from *ma kaunn soe war* at *mee yat htin* and as she said:

*“I have seen that at the pregnant women’s houses, the fire wood is put under the ladder of the house. In my turn, my mother said us to chop the mee yat htin. That’s why my husband chopped the mee yat htin and then the mee yat htin is put under the ladder of the house. My mother went and picked sue khat (thorn branches) and then put sue khat (thorn branches) on the mee yat htin. Bricks were put on the mee yat htin. Then my mother sprinkled turmeric (sa nwuin) powder on the mee yat htin. If sue khat (thorn branches) is put on the mee yat htin, ma kaunn soe war dare not stay at the mee yat htin. Then ma kaunn soe war is afraid of turmeric (sa nwuin) powder. If sue khat (thorn branches) are not put and turmeric (sa nwuin) powder is not sprinkled on the mee yat htin, when the pregnant woman delivered baby, the fire is made, right, then ma kaunn soe war (evil-spirits) can possess at the postpartum mother and baby’s body. We cannot see that ma kaunn soe war can possess or not. We had to prevent beforehand”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Mya and Ma Sandar did not prepare *mee yat htin* at their last pregnancy. The reasons why they did not prepare *mee yat htin* at their last pregnancy were:

Ma Mya told the researcher that she had breast problem since she delivered the second baby, when she went to funeral house, and when she fried snacks breast has become swelling and then, she said the smell of burning or frying cannot expose to breast at all until now. In addition, she said that she is afraid her breast will get ill from being exposed to smells of burning and she also does not want to stay beside the fire as the staying beside is hot, thus *mee yat htin* (fire wood) was not prepared at her last pregnancy. As she said:

*“In previous children, I prepared mee yat htin. In this baby, I did not prepare mee yat htin because at first, the way that breast milk flows from the breast obstructed when I delivered the second child...the second child was about 6 months, at that time...the way that breast milk flows obstructed... by feeding breast milk to baby, obstruction of the way breast milk flows was open...when I went and fried snack at my neighbour house, breast became swelling immediately and became ache... I went to*

*hospital, and so, doctor said me that breast nothing happened... the doctor gave me oral medicine...I felt relieved from breast ache...smell of burning or frying cannot expose to breast at all until now... in later, breast cannot expose to smell of burning or frying at all... I avoided going to the funeral house, going to the postpartum mother house and frying with oil... when I went to the neighbour's funeral house, breast became swelling immediately... at that time, the second child was 3 years old already...and so, I went and saw the doctor...when the doctor injected me, breast relieved from swelling. Thus, I did not prepare mee yat htin to make the fire after delivery of baby because I was afraid that breast will get ill from being exposed to smells of burning and I also do not want to stay beside the fire as staying beside the fire is hot”*

*(Ma Mya, 29 years-old, 3 children)*

Ma Sandar told the researcher that she did not prepare *mee yat htin* in the last pregnancy due to her husband did not chop *mee yet htin* and as she said:

*“In the last pregnancy, mee yat htin (fire wood) was not prepared. In my first and second pregnancy, mee yat htin was prepared. In this baby, I did not stay beside the fire because there were no people who will help me. There was no mee yat htin. In this baby, my husband did not chop mee yat htin”*

*(Ma Sandar, 26-years-old, 3 children)*



**Figure 4.1** Preparing *mee yat htin* (fire wood) under the ladder of pregnant woman's home to stay beside the fire by the postpartum mother after childbirth



**Figure 4.2** Preparing *mee yat htin* (fire wood) under the ladder of pregnant woman's home to stay beside the fire by the postpartum mother after childbirth

## 2) Dietary precautions

The reasons of dietary precautions by rural home birth women were not to become the pregnant woman's placenta like *ba we* (octopus), not to suffer from poison in mother and baby, not to have a miscarriage, not to damage baby and not to cause fetus in the abdomen to feel hot, not to be thick the skin of the pregnant woman's amniotic sac like the skin of the elephant's amniotic sac, not to be large fetus in the womb, not to have a difficult birth for mother, not to suffer from poison for mother, not to have twin baby and not to cause baby to be sticky at the uterus or not to cause placenta to be sticky at the uterus. This study found that older people, mother and mother-in-laws were the most influential women to practice dietary precautions.

There were (9) cultural beliefs regarding dietary precautions practiced by rural home birth women during pregnancy such as avoidance of eating *ba we* (octopus), avoidance of eating *bay thee* (Turkish orange eggplant), avoidance of eating *hta min choo* (crust of cooked rice), avoidance of consumption of twin banana, avoidance of consumption of mixed salad of papaya, avoidance of eating *hta min chann* (leftover rice), avoidance of eating chilli, avoidance of eating *chin* (cockle), and avoidance of eating cassava plants potato.

These (9) cultural beliefs regarding dietary precautions are categorized into 7 categories namely dietary precaution not to harm or affect mother and baby's health and life: rural home birth women avoided eating *ba we* (octopus) and eating cassava plant's potato during pregnancy, dietary precaution not to cause a miscarriage or not to damage baby and not to cause baby to feel hot: rural home birth women avoided eating mixed salad of papaya and eating chilli during pregnancy, dietary precaution not to cause a prolonged labour for mother: rural home birth women avoided eating *bay thee* (Turkish orange eggplant) during pregnancy, dietary precaution not to be large baby in the abdomen (womb) and not to cause a difficult birth for mother: rural home birth women avoided eating *hta min chann* (leftover rice) during pregnancy, dietary precaution not to cause poison to mother: rural home birth women avoided eating *chin* (cockle) during pregnancy, dietary precaution not to deliver twin baby: rural home birth women avoided eating twin banana during pregnancy period and dietary precaution not to cause a difficult birth, not to cause

baby to be sticky at the uterus or not to cause placenta to be sticky at the uterus: rural home birth women avoided eating *hta min choo* (crust of cooked rice) during pregnancy.

Avoidance of eating *ba we* (octopus), avoidance of eating *bay thee* (Turkish orange eggplant), and avoidance of eating *hta min choo* (crust of cooked rice) were commonly practiced, avoidance of consumption of twin banana, and avoidance of consumption of mixed salad of papaya were moderately practiced, avoidance of eating *hta min chann* (leftover rice), avoidance of eating chilli, avoidance of eating *chin* (cockle), and avoidance of eating cassava plants potato were occasionally practiced by rural home birth women.

**Table 4.1 List of food beliefs at pregnancy period regarding home birth**

<b>Food</b>	<b>Cultural explanation</b>
Octopus	The pregnant woman's placenta can become like a octopus
Cassava plant's potato	Can cause poison to mother and fetus in womb
Mixed salad of papaya	Papaya is hot so baby may miscarry or fetus in the abdomen feels hot
Chilli	Fetus in the womb will feel hot
<i>Bay thee</i> (Turkish orange eggplant)	The pregnant woman's amniotic sac can become elephant's amniotic sac
<i>Hta min chann</i> (leftover rice)	Fetus in the womb will be large, so birth will be difficult
<i>Chin</i> (cockle)	Can cause poison to mother
Twin banana	If the pregnant mother ate twin banana, she can have twin baby
<i>Hta min choo</i> (crust of cooked rice)	If the pregnant woman ate <i>hta min choo</i> , When she delivers baby, baby can be sticky at the uterus, or placenta can be sticky at the uterus after delivery of baby or she may have a difficult birth

### **Dietary precaution not to harm or affect mother and baby's health and life**

Not to harm or affect mother and baby's health and life rural home birth women avoided eating *ba we* (octopus) and eating cassava plant's potato during pregnancy.

- Avoidance of eating *ba we* (octopus)

*Ba we* (octopus) is a sea creature with a soft oval body and eight tentacles. Women believed that if the pregnant woman ate *ba we*, placenta can become like *ba we* and when she delivers baby, although baby has already been delivered, placenta will not come out, placenta will be sucking at the uterus's wall or placenta like *ba we* can wrap baby or it is difficult to pull placenta out like *ba we* which is sucking at the uterus's wall and mother may die if placenta does not come out. Thus, most women avoided eating *ba we* (octopus) during pregnancy as they are afraid that they will have trouble when they delivered baby. Among 7 women, Ma Cho, Ma Mya, Ma Phyu and Ma Yu avoided eating *ba we* during their pregnancy period.

Ma Cho, Ma Mya and Ma Yu told the researcher that they avoided eating *ba we* (octopus) during pregnancy because they are afraid that placenta will become like *ba we* and placenta will be sucking at the uterus's wall without placenta coming out after delivery of baby.

*"Food that I avoided during pregnancy period is ba we. I avoided eating ba we because I am afraid that placenta will be sucking at the uterus if I eat ba we. If the pregnant woman eats ba we, placenta will become like ba we. When she delivers baby, baby has been delivered, placenta does not come out. This placenta will be sucking at the uterus's wall, yes, this placenta will be sucking at the uterus. I am afraid that placenta will be sucking at the uterus wall without placenta coming out. So I did not eat ba we during pregnancy period"*

*(Ma Cho, 33-years-old, 4 children)*

*"If the pregnant woman eats ba we, placenta becomes like ba we. When she delivers baby, after baby has been delivered, if placenta is going to come out, placenta sucks...can suck at the uterus like ba we without placenta coming out. After baby has been delivered, it is difficult to pull placenta out like ba we and placenta does not come out and placenta is sucking at the uterus. That's why older people say*

*the pregnant mothers not to eat ba we. Yes, if placenta does not come out, mother will have trouble. Then, mother may die if placenta does not come out. I did not eat ba we during pregnancy period. Avoidance of eating ba we is because I am afraid that placenta will become ba we. I prevent beforehand before happen”*

*(Ma Mya, 29-years-old, 3 children)*

*“An auxiliary midwife had told me and I had heard neighbours say. If the pregnant woman eats ba we (octopus), placenta can become ba we (octopus). When she delivers baby, although baby has been delivered, placenta did not come out. Placenta has sucked the uterus. That’s why I did not eat ba we because I was afraid”*

*(Ma Yu, 36-years-old, 5 children)*

However, Ma Phyu told the researcher that if the pregnant woman eats *ba we*, her placenta can become like *ba we* and placenta like *ba we* can wrap baby, thus she avoided eating *ba we* during pregnancy and as she explained:

*“In my second pregnancy, I saw that a neighbour who was going on the way in front of my home by hanging ba we (octopus). Then, I wanted to eat ba we. And so I looked for sellers who sell ba we but I could not find ba we seller. When I came back to my home an old woman told me that if a pregnant woman eats ba we, her placenta can become as a ba we. Eating ba we can cause placenta like ba we. Placenta like ba we can wrap baby. Later, I did not buy ba we when ba we sellers who came and sold ba we in front my home because I am afraid”*

*(Ma Phyu, 28-years-old-one child)*

Ma Thein, 26 years old, 2 children who is a key informant in this study and she told the researcher that she avoided eating *ba we* during pregnancy because she is afraid that placenta will become like *ba we* and she will have trouble when she delivered baby as placenta like *ba we* can wrap baby and as she said that:

*“My mother-in-law has told me that if the pregnant woman eats ba we (octopus), her placenta can become like ba we (octopus) and then placenta like ba we (octopus) can wrap baby. Mother can have trouble. That’s why I did not eat ba we (octopus). I am afraid that placenta will become like ba we (octopus)”*

*(Ma Thein, 26-years-old, 2 children)*

However, Ma Myint and Ma Sandar, they told the researcher that they did not avoid any food during pregnancy period and they ate all during their pregnancy period and as they said:

*“I did not avoid food during pregnancy period. I ate all”*

*(Ma Myint, 29-years-old, 2 children)*

*“During pregnancy period, I did not avoid any food. I ate all”*

*(Ma Sandar, 26-years-old, 3 children)*



**Figure 4.3 Octopus (*ba we*)**

- Avoidance of eating cassava plant's potato

Some rural home birth women believed that if the pregnant woman eats cassava plant's potato, baby in the womb can suffer from poison and baby may die, but mother does not feel from poison by eating cassava plant's potato. Thus, they avoided eating cassava plant's potato during pregnancy as they were worried baby will die from poison.

There is only one Ma Mya among 7 women followed that practice. She told the researcher that she avoided eating cassava plant's potato during pregnancy period because she is afraid baby will die from poison and baby will be dying in the womb from poison and as she said:

*“Saya ma (midwife) and older people have told me that if the pregnant woman eats cassava plant's potato, baby in the womb may die from poison. Then mother does not feel from poison and baby can feel from poison and baby may die. That's why I avoided eating cassava plant's potato. Avoidance of eating cassava plant's potato is because I am afraid that baby will die from poison and I am afraid that baby will be dying in womb. That's why I avoided eating cassava plant's potato”*

*(Ma Mya, 29-years-old, 3 children)*

However, Ma Mee, a key informant, told the researcher that if the pregnant woman eats cassava plant's potato, the pregnant mother also can suffer from poison and then, if the pregnant mother suffers from poison, baby in the womb also will suffer from poison. Thus, she avoided eating cassava plant's potato during pregnancy period as she is afraid baby in the womb will happen something and she also will suffer from poison. The followings were as she explained:

*“I avoided eating cassava plant's potato during pregnancy. If the pregnant woman eats cassava plant's potato, she can suffer from poison. If the pregnant mother suffers from poison, baby in the womb also will suffer from poison. That's why I did not eat cassava plant's potato because I am afraid that I will suffer from poison. If I eat cassava plant's potato, I am afraid that baby in the womb will happen something and I also will suffer from poison”*

*(Ma Mee, 42-years-old, 5 children)*

### **Dietary precaution not to cause a miscarriage, or not to damage baby and not to cause baby to feel hot**

Not to cause a miscarriage, or not to damage baby and not to cause baby to feel hot, some rural home birth women avoided eating mixed salad of papaya and eating chilli during pregnancy.

- Avoidance of eating mixed salad of papaya

Some rural home birth women believed that if the pregnant woman eats mixed salad of papaya, baby may miscarry or baby in womb will feel hot because

papaya is hot and papaya has hot action. Therefore, they avoided eating mixed salad of papaya during pregnancy period. Among 7 women, Ma Yu and Ma Phyu avoided eating mixed salad of papaya during pregnancy.

Ma Yu told the researcher that she avoided eating mixed salad of papaya during pregnancy because she worried baby in the abdomen (womb) will feel hot and she will miscarry into pregnancy as papaya is hot and as she said:

*“I think that a pregnant woman can eat varieties of food. But I avoided eating mixed salad of papaya. If mixed salad of papaya is eaten, abdomen is hot. Papaya is hot. When papaya is mixed with chili, it is so hot. I was worried that baby in the abdomen (womb) will feel hot when I ate mixed salad of papaya. At every pregnancy, mixed salad of papaya was avoided. When mixed salad of papaya is eaten, baby will feel hot and then baby may miscarry”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Phyu, she had a miscarriage into the first pregnancy with seven months. She told the researcher that she had a miscarriage is due to eating mixed salad of papaya in the previous pregnancy. Thus, she told that she avoided eating mixed salad of papaya in the second baby’s pregnancy as she was obsessing that she had a miscarriage in the first pregnancy due to eating mixed salad of papaya and as she said:

*“I did not eat papaya at all because I was obsessing that previously I had a miscarriage is due to eating mixed salad of papaya. Papaya is hot. In previously pregnancy, I always ate mixed salad of papaya. I ate mixed salad of papaya as every-day. That’s why in this baby’s pregnancy, I did not eat mixed salad of papaya. In the previous pregnancy, I did not understand and I did not avoid eating papaya. My mother-in-law told me that if ther pregnant mother eats papaya at the first months of pregnancy, baby may miscarry. In this baby’s pregnancy, I avoided”*

*(Ma Phyu, 28-years-old, one child)*

Ma Mee, she is a key informant. She said that she did not eat mixed salad of papaya during pregnancy period. She said papaya has hot action and she is afraid that baby will be damaged if she eats mixed salad of papaya and as she explained:

*“I did not eat mixed salad of papaya during pregnancy period. If papaya is eaten, it is hot. Papaya has hot action. Chilli is also hot. Some women miscarried into the pregnancy when they ate mixed salad of papaya because it is so hot. A woman*

*who is my neighbour, she eats a lot of mixed salad of papaya with pregnancy is term. She eats chillies very much. This woman delivered baby as death baby. That's why I am afraid that my baby will be damaged. So I avoided eating mixed salad of papaya"*

*(Ma Mee, 42-years-old, 5 children)*

- Avoidance of eating chilli

Some women avoided eating chilli during pregnancy because they believed that baby in the womb eats foods that mother ate, so that if the pregnant woman eats chilli, baby in the womb also eats chilli mother ate, then baby in the womb will feel hot and baby in the womb will do obeisance to mother as they feel hot in terms of apologizing to mother not to eat spicy food (chilli). Thus women avoided eating chilli during pregnancy. The reason they avoided eating chilli during pregnancy is not to feel hot in baby.

There is only one woman, Ma Phyu among 7 home birth women avoided eating spicy food (chilli) since she got pregnancy is not to feel hot in fetus in the womb and as she explained:

*"Spicy food (chilli) was avoided since I got a pregnancy. Older people say that if the pregnant mother eats spicy food, baby also feels hot"*

*(Ma Phyy, 28-years-old, one child)*

However, there is only one Ma Mya who ate spicy food (chilli) by reducing amount of chilli during pregnancy period. She told the researcher that she is worried baby in the abdomen (womb) will feel hot and then, baby will do obeisance to mother in terms of apologizing to mother not to eat chilli as baby felt hot and as she explained:

*"When I got a pregnancy, I did not eat spicy food much and I ate a little bit chilli. I ate chilli by reducing amount of chilli which is put into like pounded fish paste (which is pounded by chili), ngapi phyor (pounded fish paste is mixed by nipa juice). Older people told me that when the pregnant woman eats spicy food...spicy food, baby in the womb will do obeisance to mother not to eat spicy food. If the pregnant mother eats food, baby in the womb also eats food that the pregnant mother ate. Then, baby also has to eat spicy food. If I eat spicy food, baby also eats. So I did not eat spicy food that much. Baby in the abdomen (womb) does obeisance is that baby*

*apologizes to mother not to eat spicy food. That's why I ate chilli by reducing the amount of chilli because I am worried that baby in the abdomen (womb) will feel hot"*

*(Ma Mya, 29-years-old, 3 children)*

Ma Mee, she is a key informant, she told the researcher that she avoided eating spicy food (chilli) during pregnancy period because she is worried that baby will be born hairless if she eats chilli and then, baby will be damaged and baby also will do obeisance to mother as baby in the abdomen (womb) feels hot and as she explained:

*"I avoided eating spicy food during pregnancy period. Eating chilli was avoided. I did not eat chilli. I did not eat chilli at all during pregnancy period. People say that when the pregnant mother eats chilli, baby in the abdomen (womb) does obeisance (with palms raised together on the forehead) to mother because baby in the abdomen (womb) feels hot. That's why I did not eat chilli. I am worried that my baby will be damaged. In my mind, I was worried that if I eat chilli, my baby will be hairless. That's why I avoided eating chilli"*

*(Ma Mee, 42-years-old, 5 children)*

### **Dietary precaution not to cause a prolonged labor for mother**

Not to cause a prolonged labour for mother, some rural home birth women avoided eating *bay thee* (Turkish orange eggplant) during pregnancy.

- Avoidance of eating *bay thee* (Turkish orange eggplant)

Some rural home birth women believed that if the pregnant woman ate *bay thee* (Turkish orange eggplant), the pregnant woman's amniotic sac can become elephant's amniotic sac and then, they believed that the skin of the elephant's amniotic sac is thick, so that pregnant woman's amniotic sac's skin is thick as the pregnant woman's amniotic sac became the elephant's amniotic sac because they believed that the skin of *bay thee* is thick, so the skin of the pregnant woman's amniotic sac becomes thick like the skin of the elephant's amniotic sac. Thus, they believed that if the pregnant woman ate *bay thee*, the pregnant woman's amniotic sac can become like elephant's amniotic sac. Then they believed that when the pregnant woman delivers baby, her amniotic sac does not rupture moderately and it takes time to rupture because the skin of her amniotic sac is thick like the skin of the elephant's amniotic sac, only when the pregnant woman's amniotic sac ruptures she will relieve from

labour pain and she can deliver baby, and then, if the pregnant woman's amniotic sac took time to rupture for a long time, she will be in labour for a long time and she will suffer from labour pain for a long time. Hence, women avoided eating *bay thee* during pregnancy because they are afraid that their amniotic sac will become like elephant's amniotic sac and they are afraid they will be in labour for a long time as the duration of labour pain is long due to amniotic sac takes time to rupture and they will suffer from labour pain for a long time.

Among 7 women, Ma Cho, Ma Yu and Ma Mya avoided eating *bay thee* during pregnancy period and as they explained:

*"I avoided eating bay thee too during pregnancy period. Why I avoided eating bay thee is because I am afraid that amniotic sac will become elephant's amniotic sac. When the pregnant woman ate bay thee, her amniotic sac can become elephant's amniotic sac. The skin of bay thee is thick, right. Elephant's amniotic sac skin is thick. Then, when the pregnant woman delivers baby, her amniotic sac does not rupture. If the skin of amniotic sac is thick, it takes time to rupture, right. Then, pregnant woman will be in labour for a long time. Yes, I did not eat bay thee because I am afraid I will be in labour for a long time".*

*"My mother told me that if the pregnant woman ate bay thee, the skin of amniotic sac will be thick. If the skin of amniotic sac is thick, when she delivers baby, amniotic sac takes time to rupture. If amniotic sac takes time to rupture, the duration of labour pain will be long. Only when the skin of amniotic sac ruptures, she will relieve from labour pain. That's why my mother did not let me eat bay thee"*

*(Ma Cho, 33-years-old, 4 children)*

*"I did not eat bay thee during pregnancy. I avoided eating it. Because neighbours told me that the pregnant woman cannot eat bay thee, if she eats bay thee, her amniotic sac can become elephant amniotic sac, elephant's amniotic sac is that the skin of the elephant amniotic sac is thick, then when the pregnant woman delivers baby, her amniotic sac like the elephant amniotic sac does not rupture moderately. If the pregnant woman's amniotic sac like the elephant amniotic sac does not rupture, she will be in in labour for long. So I avoided eating bay thee because I am afraid"*

*(Ma Yu, 36-years-old, 5 children)*

Ma Mya, she told the researcher that she avoided eating *bay thee* during pregnancy period as she is afraid that her amniotic sac will become like elephant amniotic sac. But she told that she only knows the pregnant woman's amniotic sac can become elephant's amniotic sac when the pregnant woman ate *bay thee* and she told that she does not know what is elephant's amniotic sac?... and as she said:

*“If the pregnant woman ate bay thee, what...placenta...if the pregnant woman ate bay thee, what happen....pregnant woman's amniotic sac can become like elephant amniotic sac. Older people do not let the pregnant mothers eat bay thee. I do not eat bay thee because I have heard that older people say the pregnant women not to eat bay thee. I know that the pregnant woman's amniotic sac can become elephant amniotic sac if the pregnant woman ate bay thee. I do not know that what is elephant amniotic sac? I only know the pregnant woman's amniotic sac can become elephant amniotic sac if the pregnant woman ate bay thee. I did not eat bay thee because I am afraid that elephant amniotic sac will happen”*

*(Ma Mya, 29-years-old, 3children)*

Ma Thein, 26 years old, 2 children who is a key informants in this study. She avoided eating *bay thee* (Turkish orange eggplant) during pregnancy period because she is afraid that her amniotic sac will become elephant's amniotic sac and as she explained:

*“During pregnancy, I did not avoid food during pregnancy period. I did not avoid. I ate all. But the foods that I did not eat during pregnancy period were bay thee (Turkish orange eggplant) and ba we (octopus). I did not eat that food. I did not eat that food in two children. My-mother-in-law had told me that if the pregnant woman ate bay thee (Turkish orange eggplant), the pregnant woman's amniotic sac can become elephant amniotic sac. When the pregnant woman delivers baby, her amniotic sac takes time to rupture as the skin of her amniotic sac is thick like the skin of the elephant's amniotic is thick. I avoided eating bay thee during pregnancy period. I am afraid that amniotic sac will become elephant amniotic sac”*

*(Ma Thein, 26-years-old, 2 children)*



**Figure 4.4 Turkish orange eggplant**

**Dietary precaution not to be large baby in the abdomen (womb) and not to cause a difficult birth for mother**

Not to be large baby in the abdomen (womb) and not to cause a difficult birth for mother, some rural home birth women avoided eating *hta min chann* (leftover rice) during pregnancy.

- Avoidance of eating *hta min chann* (leftover rice)

Some women avoided eating *hta min chann* during pregnancy period. The reason of avoidance of eating *hta min chann* (leftover rice) during pregnancy period is not to have a difficult birth when they delivered baby. They believed that if the pregnant woman eats *hta min chann*, baby in the abdomen (womb) is large and if the baby is large in the abdomen (womb), giving birth is difficult. Among 7 informants, only Ma Cho followed and avoided eating *hta min chan* during pregnancy period and as she said:

*“Phwarr khit (a grandmother who is her neighbour) always told me that if the pregnant woman eats hta min chann, baby in the abdomen (womb) can be large. She told me not to eat hta min chann and birth can be difficult. She asked me like that if the baby in the abdomen (womb) is large, when birth is difficult, you have money to*

*go to hospital. Then I did not eat hta min chann because I am afraid. If the baby in the abdomen (womb) is large, birth will be difficult. Then I do not have money. If birth is difficult, I will have to go to hospital. That's why I dared not eat hta min chann"*

*(Ma Cho, 33-years-old, 4 children)*

### **Dietary precaution not to cause poison to mother**

Not to cause poison to mother, some rural home birth women avoided eating *chin* (cockle) during pregnancy.

- Avoidance of eating *chin* (cockle)

Some rural home birth women believed that if the pregnant woman eats *chin* (cockle), *chin* can cause poison to the pregnant mother, and then, the pregnant woman cannot be injected when she suffered from poison as there is a fetus in the womb. Thus, they avoided eating *chin* (cockle) during pregnancy. Among 7 women, there was only one Ma Moe avoided eating *chin* (cockle) during pregnancy period. Ma Moe explained as follows:

*"In the last pregnancy, I bought cockle from the market. When my relative visited to me, I said her about I bought cockle from the market. She said a pregnant woman cannot eat cockle which can cause poisoning. I am afraid because people say that cockle can cause poisoning. A grandmother who is my neighbour always said me that a pregnant woman cannot eat cockle which can cause poisoning. If a pregnant woman got poison, a pregnant woman cannot be injected because there is baby in the abdomen (womb). That's why I dared not eat cockle. So I did not eat cockle"*

*(Ma Moe, 22-years-old, 2 children)*

### **Dietary precaution not to deliver twin baby**

Not to deliver twin baby, some rural home birth women avoided eating twin banana during pregnancy period.

- Avoidance of eating twin banana

Some rural home birth women avoided eating twin banana. They believed that if the pregnant woman ate twin banana, she would deliver twin baby. In addition, they believed that the pregnant woman cannot eat not only twin banana but also any twin fruits, she would deliver twin baby. The reason that women avoided eating twin banana during pregnancy period is not to have twin baby. Ma Cho and Ma Yu among

7 women avoided eating twin banana during pregnancy as they were afraid that they would deliver twin baby. The followings were as they explained:

*“Older people say that ooh...that is...a pregnant woman...at one month, two months of pregnancy, cannot eat twin banana and any twin fruits and the pregnant woman cannot eat twin mango too because twin baby can be delivered. Then I am poor, so I cannot deliver twin baby. Older people say the pregnant women not to eat twin fruits. So I did not eat twin fruits. No, I do not want twin baby. I am afraid”*

*(Ma Cho, 33-years-old, 4 children)*

*“I did not eat twin banana and the other twin fruits. If the pregnant woman eats twin fruits, she delivers twins. Since the first born, older people and my mother told me that if there are twin banana, you do not eat twin banana... treat your husband... if the pregnant woman eats twin banana, she will deliver twin baby. That’s why I dared not eat twin banana because I was afraid that I will deliver twin baby”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Mee, a key informant told the researcher that she avoided eating twin banana during pregnancy because she is afraid she will deliver twin baby. But she told that she thinks eating twin banana is not related to giving birth to twin baby and as she explained:

*“I avoided eating twin banana during pregnancy period because I am afraid that I will deliver twin baby. I think that eating twin banana is not related to giving birth to twin baby. But I avoided eating twin banana during pregnancy period. Older people told me that hey! do not eat twin fruits during pregnancy period... baby can be delivered as twin baby. Hee hee I felt like I am afraid that I will deliver twin baby”*

*(Ma Mee, 42-years-old, 5 children)*

**Dietary precaution not to cause a difficult birth, not to cause baby to be sticky at the uterus or not to cause placenta to be sticky at the uterus**

Not to cause a difficult birth, not to cause baby to be sticky at the uterus or not to cause placenta to be sticky at the uterus, most rural home birth women avoided eating *hta min choo* (crust of cooked rice) during pregnancy.

- Avoidance of eating *hta min choo* (crust of cooked rice)

Most rural home birth women believed that if the pregnant woman eats *hta min choo* (crust of cooked rice), when she delivers baby birth can be difficult or placenta can be sticky at the uterus like *hta min choo* (which is sticky at the bottom of rice cooker and can be seen at the bottom of the rice cooker) without placenta coming out after baby has been delivered or when she delivers baby, baby can be sticky at the uterus without baby coming out from the uterus. Therefore, they avoided eating *hta min choo* (crust of cooked rice) during pregnancy not to have a difficult birth, not to be sticky placenta at the uterus or not to be sticky baby at the uterus. Ma Cho, Ma Moe, Ma Phyu, and Ma Yu avoided eating *hta min choo* during their pregnancy period.

Ma Cho and Ma Moe told the researcher that they avoided eating *hta min choo* during pregnancy period because they are afraid that placenta will be sticky at the womb when they deliver baby and as they explained:

*“I avoided eating hta min choo during pregnancy period because I am afraid that je (uterus) will be sticky...oh...I am afraid that placenta will be sticky. If the pregnant woman eats hta min choo, placenta can be sticky at the uterus. If placenta is sticky when she delivers baby, placenta does not come out although she has delivered baby. Placenta takes time to come out because placenta is sticky at the uterus like hta min choo which is sticky at the bottom of the rice cooker. Placenta is being sticky at the uterus. If placenta is being sticky at the uterus, if placenta is being sticky at the uterus, only when saya ma (midwife) pulls placenta out, the placenta will come out. When I eat hta min choo, mae yote (neighbour) told me not to eat hta min choo, and the pregnant woman cannot eat hta min choo, je (uterus) will be sticky...oh...placenta will be sticky at the uterus. Then I dared not eat hta min choo”*

*(Ma Cho, 33-years-old, 4 children)*

*“The pregnant woman cannot eat hta min choo. When placenta is sticky, placenta will be without placenta coming out after baby has been delivered. Yes, placenta is sticky at the womb. Yes, placenta is sticky at the womb like hta min choo which is sticky at the bottom of the rice cooker. People say that if the pregnant woman eats hta min choo, placenta can be sticky at the womb. I did not eat hta min choo, yes because I am afraid that placenta will be sticky at the womb”*

*(Ma Moe, 22-years-old, 2 children)*

However, Ma Phyu told the researcher that she avoided eating *hta min choo* (crust of cooked rice) because she was afraid birth will be difficult and as she said that:

*“When I got my second pregnancy, I visited to a house. There were many people eating hta min choo at that house. And so I also joined with them. When a school teacher saw me that I was eating hta min choo, she told me that you, a pregnant woman should not eat htamin choo and she told me not to eat hta min choo. She told me that if a pregnant woman ate hta min choo, giving birth will be difficult. Then I stopped eating hta min choo as I was afraid that birth will be difficult”*

*(Ma Phyu, 28-years-old, one child)*

In addition, Ma Yu told the researcher differently from others that she did not eat *hta min choo* because she is afraid that baby will be sticky at the uterus when she delivers baby and as she explained:

*“Older people say that if the pregnant woman eats hta min choo, when she delivers baby baby can be sticky at the uterus without baby coming out from the abdomen (womb). Since the first born, I did not eat hta min choo. I followed them because I am afraid that baby will be sticky at the uterus and I want to deliver baby easily”*

*(Ma Yu, 36-years-old, 5 children)*



**Figure 4.5** *Hta min choo* (crust of cooked rice)



**Figure 4.6 Scratching out *hta min choo* (crust of cooked rice) which is sticky at the bottom of the pan with the spoon**

### **3) Behavioural precautions**

The reasons of behavioural precautions by rural home birth women were not to have a difficult birth for mother, not to be large fetus in the womb, not to close woman's vagina like woman's vagina is sewed, not to bewitch the pregnant woman to be ill and to have a difficult birth by *ma kaunn soe war* (evil-spirits), not to possess at the pregnant woman's body by *ma kaunn soe war* (evil-spirits), not to deliver a stupid baby, not to miscarry into pregnancy and not to damage baby and not to result baby in death. This study found that mostly the pregnant women's neighbours, the pregnant women's mothers and older people were influential to suggest women to practice behavioural precautions.

There were (10) cultural beliefs regarding behavioural precautions practiced by rural home birth women during pregnancy period such as avoidance of preparing nappies, clothes and baby stuff for unborn baby, avoidance of having sex, attaching safety pin at clothes when the pregnant woman goes out in the evening, avoidance of sleeping at the afternoon, avoidance of putting hair down without tying hair at the evening, avoidance of doing rigorous activities, avoidance of telling lie to others by pregnant woman, avoidance of hair cutting during pregnancy period, avoidance of sitting at the entrance of the door during pregnancy and avoidance of sewing pillow during pregnancy. Avoidance of preparing nappies, clothes and baby

stuff for unborn baby, avoidance of having sex and attaching safety pin at clothes when the pregnant woman goes out in the evening were commonly practiced by rural home birth women during pregnancy period. Avoidance of sleeping at the afternoon, avoidance of putting hair down without tying hair at the evening and avoidance of doing rigorous activities were moderately practiced by rural home birth women during pregnancy period. Avoidance of telling lie to others by pregnant women, avoidance of hair cutting during pregnancy period, avoidance of sitting at the entrance of the door during pregnancy and avoidance of sewing pillow during pregnancy period were occasionally practiced by rural home birth women.

These (10) cultural beliefs of behavioural precautions are categorized into 5 categories namely; behavioural precautions not to have a difficult birth for mother, behavioural precautions not to bewitch the pregnant woman to be ill, to have a difficult birth by *ma kaunn soe war* (evil-spirits) and not to possess at the pregnant woman's body by *ma kaunn soe war* (evil –spirits), behavioural precautions not to deliver a stupid baby, behavioural precaution not to miscarry into pregnancy and not to injure baby, and behavioural precaution not to miscarry into pregnancy or not to result baby in death when baby is delivered.

**(a) Behavioural precautions not to have a difficult birth for mother**

Not to have a difficult birth for mother, rural home birth women avoided telling lie to others during pregnancy, avoided sitting at the entrance of the door during pregnancy, avoided sewing pillow during pregnancy, and avoided sleeping at the afternoon during pregnancy.

- Avoidance of telling lie to others by the pregnant woman

The beliefs hold by some rural home birth women were that if the pregnant woman told lies to others during pregnancy, when she delivers baby, baby will be obstructing at the entrance of woman's vagina. So the pregnant woman may face a difficult birth. Therefore, women avoided telling lie to others during their pregnant period.

According to the researcher's informal conversation, 81 years old woman said that if the pregnant woman told lies to others during pregnancy period, when she delivers baby, baby will be obstructing at the entrance of woman's vagina. 81 years old woman said:

*“When the pregnant woman delivers baby, baby will be obstructing at the entrance of woman’s vagina. Yes, yes, because she lied to others during pregnancy period. Like I lie you as saying something which is not true. Yes, because she told lies and she told lots of lies”*

There is only one woman, Ma Cho who has belief related with telling lie to others people by the pregnant woman and she told the researcher that when she delivered the last baby, she has experienced as baby was obstructing at the entrance of woman’s vagina due to she has lied to others when she sold pork at the last pregnancy and as she explained:

*“The pregnant woman cannot lie. When she delivers baby, baby will be obstructing at the entrance of woman’s vagina if the pregnant woman lied to the other people, yes. When I delivered this baby (the last baby), baby was obstructing at the entrance of vagina because I lied to the other people when I sold phwar khit’s (an old lady who is her neighbour) pork. In the previous children, baby did not obstruct at the entrance of the vagina. In this baby (the last baby), baby was obstructing at the entrance of vagina when I delivered this baby because I lied to the other people.”*

*“After I had delivered this baby, my sister told me that when you delivered baby, baby was obstructing at the entrance of your vagina because you has lied to the other people. Then, I said oh...that’s right. When I sold phwar khit’s pork, her pig is wit nar (wit nar is that pig died because pig’s health is not good). Pig died because pig could not pass faeces. When buyers asked me that pig is wit nar? I lied them that pig is not wit nar. That’s why I had to feel that when I delivered baby, baby was obstructing at the entrance of vagina. In previous pregnancy, I had not lied to the other people”*

*(Ma Cho, 33-years-old, 4 children)*

- Avoidance of sitting at the entrance of the door during pregnancy

The beliefs hold by some rural home birth women were that if the pregnant woman sat at the entrance of the door and at the base of a staircase during pregnancy, when she delivers baby, baby will be obstructing at the entrance of woman’s vagina without baby coming out from the abdomen. Hence, the pregnant woman may face difficult birth. Therefore, some rural home birth women avoided sitting at the entrance of the door and at the base of a staircase during pregnancy not to have a difficult birth.

Ma Thein, a key informant told the researcher that older people has told her not to sit at the base of a staircase and at the entrance of the door during pregnancy, if the pregnant woman sat at the base of a staircase and at the entrance of the door, when she delivers baby, baby will be obstructing at the vagina without baby coming out from the abdomen, thus she avoided sitting at the base of a staircase and at the entrance of the door during pregnancy not to have a difficult birth and as she said:

*“Older people has told me that the pregnant woman cannot sit at the base of a staircase and cannot sit like that at the entrance of the door. Sometimes when older people saw me that I was sitting at the entrance of the door, they told me not to sit at the entrance of the door. They said that when baby is delivered, baby can be obstructing at the entrance of vagina without baby coming out. That’s why I also did not sit at the entrance of the door at the next times because I listened to them. Older people told me because I did not understand. So I had to listen to them”*

*(Ma Thein, 26-year-old, 2 children)*

Among 7 women, there is only one, Ma Sandar avoided sitting at the entrance of the door during her pregnancy period because she was afraid that baby will be obstructing at the entrance of the vagina when she delivers baby and as she explained:

*“Mae own mya (her neighbour) has told me not to sit at the entrance of the door during pregnancy period, baby may obstruct at the entrance of vagina when I deliver baby. Then I did not sit because I am afraid. I am afraid that baby will be obstructing at the entrance of vagina when I deliver baby”*

*(Ma Sandar, 26-years-old, 3 children)*

- Avoidance of sewing pillow during pregnancy period

Some rural home birth women believed that if the pregnant women sewed pillows, and mended things that are broken like *hta mein* (sarong which is nether garment worn by Myanmar women), and clothes that have holes, when she delivers baby, she may have a difficult birth due to the hole of woman vagina is closing for delivery of baby. For example, they believed that if the pregnant woman sews pillows, she has to put cottons into the pillow, after putting cottons into the pillow she has to re-sew pillow’s hole, and when she delivers baby, the hole of woman vagina will be closing like woman’s vagina is sewed and closed due to she sewed and closed the

pillow when she sewed the pillow during pregnancy and thus, she may have a difficult birth or she cannot deliver baby. Hence, some rural home birth women avoided sewing pillows and sewing things that are broken during pregnancy not to have a difficult birth when they deliver baby.

Among 7 women, only one Ma Cho avoided sewing pillow and she dared not sew anything during pregnancy period because she was afraid that her vagina will be closing when she delivers baby and as she explained:

*“People say that the pregnant woman cannot sew pillow. If the pregnant woman sews pillow, when she delivers baby, the pregnant woman cannot deliver baby as pregnant woman sewed and closed pillow’s hole. People say that the hole of the pregnant woman’s vagina also will close when she delivers baby as pregnant woman sewed pillow. Then I dared not sew pillow and I did not mend the holes. When I got a pregnancy, I did not sew anything. I avoided sewing. I did not sew is because I am afraid that vagina will close. That’s why I dared not sew”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Mee, a key informant told the researcher that her mother did not let her sew pillows during pregnancy because her mother was worried for her that she won’t deliver baby easily as vagina is sewed and closed when she delivers baby and as she said:

*“My mother told me not to sew pillows during pregnancy period. My mother worried for me that I won’t deliver baby easily. When pillow is sewed, pillow has to be sewed and closed by putting cotton into the pillow. If I sewed pillows, when I deliver baby, baby cannot be delivered like vagina is sewed and closed. That’s why my mother did not let me sew pillows during pregnancy period”*

*(Ma Mee, 42-years-old, 5 children)*

According to the researcher’s informal conversation regarding with avoidance of sewing pillow during pregnancy period, a pregnant woman, 29 years old, 2 children mother told the researcher that she has to follow ancient older people’s beliefs as older people say that if the pregnant woman mended things that are broken like clothes and *hta mein* (sarong which is nether garment worn by Myanmar women) which have holes and if the pregnant woman sewed like pillows during pregnancy, when she delivers baby her vagina is not open and will be closing as her vagina is

sewed and closed. Thus, she followed older people say as she is afraid that her vagina will be closing when she delivers baby and as she said:

*“The pregnant woman is very important. If that people say like that, I have to follow them and this people say like that, I have to follow them. Older people say that pregnant women cannot mend like hta mein (sarong which is nether garment worn by Myanmar women), and clothes that have holes. That is said by older people. The pregnant women cannot mend things that are broken. Like pillows, cottons are put into the pillow, right? After putting cottons into the pillow, like that holes are re-sewed, right? They say that the pregnant woman cannot sew pillows. That is older people’s beliefs. They say that when the pregnant woman delivers baby, vagina is like vagina is not open, yes, yes, vagina is like vagina is sewed. They say the pregnant woman may face as she could not deliver baby. That is ancient people’s beliefs. According to ancient people say, I have to follow them because I am afraid that vagina will be closing when I deliver baby”*

- Avoidance of sleeping at afternoon during pregnancy

The reason for avoidance of sleeping at afternoon during pregnancy period by rural home birth women is not to have a difficult birth. Women believed that if the pregnant woman sleeps at the afternoon during pregnancy period, baby in the abdomen (womb) will be large, if the baby in the abdomen (womb) is large, birth is difficult.

There were only two women, Ma Cho and Ma Phyu avoided sleeping at the afternoon during their pregnancy period because they were afraid that the baby in the abdomen (womb) will become large and birth will be difficult. The followings were as they explained:

*“People say that when the pregnant woman sleeps at the afternoon, baby is large in the abdomen (womb), if the baby is large, birth is difficult. Then I dared not sleep. At the afternoon time, I dared not sleep when I got a pregnancy. When I do not have a pregnancy, I sleep. When people say, I dared not sleep because I am afraid that if the baby is large, birth will be difficult”*

*(Ma Cho, 33-years-old, 4 children)*

*“I have heard that if the pregnant woman sleeps at the afternoon, the baby in the abdomen (womb) is large and if the baby is large, giving birth is difficult. I did*

*not sleep and I avoided. Yes, I am afraid that the baby in the abdomen (womb) will be large. At the other people house, while they are sleeping at the afternoon, I was visiting because I want to sleep when I was sitting. I did not visit to neighbours houses moderately. I visited to hoo! Ma May Kyi Oo (her first cousin sister) and I visited to friends who live in Kyauk Taung (village name)”*

*(Ma Phyu, 28-years-old, one child)*

**(b) Behavioural precautions not to bewitch the pregnant woman to be ill, to have a difficult birth by *ma kaunn soe war* (evil-spirits) and not to possess at the pregnant woman’s body by *ma kaunn soe war* (evil –spirits)**

Not to bewitch the pregnant women to be ill, to have a difficult birth by *ma kaunn soe war* (evil-spirits) and not to possess at the pregnant woman’s body by *ma kaunn soe war* (evil –spirits), rural home birth women practiced attaching safety pin at clothes when they went out in the evening during pregnancy period and avoided putting hair down without tying hair in the evening during pregnancy.

- Attaching safety pin at clothes when the pregnant woman goes out in the evening during pregnancy period

Some rural home birth women practiced attaching safety pin at their clothes when they went out in the evening during pregnancy period. The reasons they followed that practice are not to bewitch them to have a difficult birth and not to dare possess at their body to bewitch them by *ma kaunn soe war* (evil-spirits). Women believed that if the pregnant woman goes out in the evening time, *ma kaunn soe war* (evil-spirits) see the pregnant woman like flowers, so *ma kaunn soe war* can bewitch the pregnant woman to have a difficult birth or *ma kaunn soe war* can possess at the pregnant woman’s body to bewitch the pregnant woman. In addition, women believed that *ma kaunn soe war* are afraid of like *sue* (thorn), needle, safety pin and dagger, so that if the pregnant woman attaches safety pin or needle or *sue* (thorn) at her clothes or carries a small dagger when she goes out in the evening, *ma kaunn soe war* cannot bewitch the pregnant woman and dare not possess at the pregnant woman’s body to bewitch the pregnant woman as *ma kaunn soe war* are afraid of *sue* (thorn), safety pin, needle and daggers. Hence, some rural home birth women attached safety pin at their clothes when they went out in the evening time during pregnancy period not to bewitch them by *ma kaunn soe war*.

Among 7 women, Ma Cho, Ma Moe and Ma Yu followed that practice when they went out in the evening during pregnancy period. The reason of attaching safety pin at their clothes when they went out in the evening during pregnancy period is not to bewitch them by *ma kaunn soe war* (evil-spirits). In fact, the pregnant women need to attach safety pin or needle or sue at their clothes or need to carry a small dagger when they go out in the evening time only. But, Ma Cho told the researcher that she always attached a safety pin at her clothes at day time, at night time, at afternoon time and at evening time in order not to bewitch her by *ma kaunn soe war*. The followings were as she said:

*“When I got a pregnancy, I attached a safety pin per clothe because I am afraid of ma kaunn soe war (evil-spirits). Whenever I went out, I always attached a safety pin at clothes. Why a safety pin is attached at clothes is that ma kaunn soe war seethe pregnant woman like a flower. They (ma kaunn soe war) are afraid of sue (thorn). When they (ma kaunn soe war) see the pregnant woman like flower, they (ma kaunn soe war) will bewitch the pregnant woman. They can bewitch the pregnant woman to have a difficult birth too. Then the pregnant woman will have trouble. That’s why I went to wherever in the evening during pregnancy, I attached a safety pin at clothes not to bewitch me by ma kauun soe war. At me, I always attached a safety pin at clothes at day time, at night time, at evening time and at the afternoon time too. In fact, it is need to attach a safety pin at clothes in the evening time only. At around 5:00pm in the evening, they (ma kaunn soe war) go out (ma kaunn soe war is going on the street)”*

*“My mother told me that when the pregnant woman goes out in the evening, attach a safety pin at clothes, even a safety pin is not attached at clothes, carry a small dagger and even a small dagger is not carried, take a needle. If the pregnant woman does not attach a safety pin at clothes, ma kaunn soe war seethe pregnant woman like flower. That’s why I attached a safety pin at clothes because I am afraid that ma kaunn soe war will bewitch me”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Moe and Ma Yu told the researcher that they attached safety pin at their clothes when they went out in the evening during pregnancy as they were afraid that *ma kaunn soe war* will bewitch them and as they said:

*“I attached safety pin at my clothes during pregnancy period. I always attached a safety pin when I went out in the evening because I am afraid that ma kaunn soe war would bewitch me. People say that the pregnant woman has to attach safety pin at clothes or has to take thorn (sue) when she goes out in the evening because ma kaunn soe war (evil-spirits) can bewitch the pregnant woman. I believe that if the pregnant woman did not attach safety pin at the clothes when she goes out in the evening, ma kaunn soe war can bewitch the pregnant woman because people are saying”*

*(Ma Moe, 22-years-old, 2 children)*

*“Older people told me that when the pregnant woman goes out at sunset time or at late afternoon time, has to go out by attaching safety pin at clothes, if safety pin is not attached at clothes, ma kaunn soe war (evil-spirits) will follow you. I followed them because I was afraid. Ma kaunn soe war is afraid of safety pin. If the pregnant woman attached safety pin at clothes, ma kaunn soe wars are afraid of safety pin. They dare not possess at pregnant woman’s body. They can bewitch the pregnant women”*

*(Ma Yu, 36-years-old, 5 children)*

According to the researcher’s informal conversation with 29 years old, a pregnant woman, 2 child mother and 31 years old, a pregnant woman, one child mother, they told the researcher that the pregnant woman’s fortune is lower so they attach safety pin at their clothes because they are afraid that witches will bewitch them. However, their beliefs were different from informant’s beliefs because they attached safety pin at their clothes as they were afraid that witches would bewitch them. According to the researcher’s observation, 29 years old pregnant woman attached a safety pin at her clothes but 31 years old pregnant woman is different from others because she attached a safety pin at brassiere as she feels shy to attach a safety pin at the clothes. They attached safety pin although they stayed at home. They explained as follows:

*“People who are not clean (people who are witches) can bewitch the pregnant women, aren’t they? People who are not clean (people who are witches) bewitch the pregnant women. That’s why I attach a safety pin. When I stay at home too, I attached a safety pin at my clothes”*

*(29-years-old pregnant woman, 2 children)*

*“I attach a safety pin, here I always attach. Because I am afraid that fortune will be lower. In the pregnant woman, fortune is lower, isn't it? Off course, I always attach a safety pin at brassiere. I do not attach a safety pin outside because I am shy. I always attach a safety pin inside. At brassiere, I always attach a safety pin. The pregnant woman's fortune is lower. In the pregnant women, they (pregnant women) happen something when witches bewitch them. Yes, I attach a safety pin because I am afraid”*

*(31-years-old pregnant woman, one child)*

- Avoidance of putting hair down without tying hair at the evening during pregnancy

Some rural home birth women avoided putting hair down without tying hair when they went out in the evening during pregnancy period. The reason they avoided putting hair down without tying hair in the evening is not to possess at their body and not to bewitch them to be ill and to have a difficult birth by *ma kaunn soe war* (evil-spirits). They believed that if the pregnant woman goes out in the evening by putting hair down without tying hair, *ma kaunn soe war* (evil-spirits) can follow at the end portion of hair and then *ma kaunn soe war* can possess at the pregnant woman's body because the pregnant woman's fortune is lower and then, *ma kaunn soe war* can bewitch the pregnant woman or *ma kaunn soe war* can follow the pregnant woman when *ma kaunn soe war* smell the end portion of hair and then *ma kaunn soe war* can bewitch the pregnant woman to be ill or to have a difficult birth. Some women believed that when the pregnant woman goes out whenever in the evening or in the afternoon, the pregnant woman cannot put hair down without tying hair, *ma kaunn soe war* can bewitch the pregnant woman.

Among 7 women, Ma Sandar and Ma Moe followed that practice during pregnancy period. The followings were as they said:

*“When the pregnant woman goes out, whenever in the evening or in the afternoon, the pregnant woman cannot put hair down. Ma kaunn soe war (evil-spirits) can follow the pregnant woman when they smell the end portion of hair. Ma Kaunn soe war can bewitch, yes, the pregnant woman. When they want to bewitch, they will bewitch the pregnant woman to be ill. Then when they want to bewitch, they will*

*bewitch the pregnant woman as baby cannot be delivered. I followed that. I am so afraid that. If I could not deliver baby, how to do. So I did not go out by putting hair down without tying hair”*

*(Ma Sandar, 26-years-old, 3 children)*

Ma Moe told the researcher that even she went out in the evening by tying her hair, people shouted at her not to put hair down by tying hair back and to go out in the evening by making hair knot and as she said:

*“I did not understand during pregnancy period. People were shouting at me when they saw me I was going out at the evening. A man from there was always shouting at me as the pregnant woman cannot go out by putting hair down, at the evening the pregnant woman has to go out by making hair knot. That man shouted at me when I went out in the evening by putting my hair down as I tied my hair back because the pregnant mother’s fortune is at a lower state so ma kaunn soe war (evil-spirits) can follow at the end portion of hair and then ma kaunn soe war can possess at the pregnant woman’s body. That’s why I followed and went out by making hair knot”*

*(Ma Moe, 22-years-old, 2 children)*

According to the researcher’s informal conversation regarding with putting hair down without tying hair in the evening by pregnant women, 29 years old, a pregnant woman, 2 children, she is not a native of the study village but she has been staying in the study village for about two years already. She told the researcher that the pregnant woman’s fortune is lower so that *soe mi sar* (evil-spirits: ghosts) can easily possess at the pregnant woman’s body to bewitch the pregnant woman, thus she avoided putting hair down without tying hair in the evening and as she said:

*“People say that the pregnant women cannot put hair down without tying hair in the evening. I tie my hair with like that a small hair clip. I avoid putting hair down without tying hair. The pregnant woman has to avoid. My fortune is being lower. People say that in the pregnant women, fortune is lower and soe mi sar (evil-spirits: ghosts) can possess at the pregnant woman’s body easily”*

### **(c) Behavioural precaution not to deliver a stupid baby**

Not to deliver a stupid baby, behavioural precaution was avoidance of hair cutting during pregnancy period.

- Avoidance of hair cutting during pregnancy period

Some rural home women believed that if the pregnant woman had hair cutting during pregnancy, she would deliver a stupid baby as baby brain is stupid and baby is not sharp-witted, thus they avoided hair cutting during pregnancy. There was only one Ma Yu who followed that practice during pregnancy as she was afraid that she would deliver a stupid baby as baby's brain is stupid and as she said:

*“Older people told me not to cut hair when I got a pregnancy. If the pregnant woman has hair cut, in baby, brain is not good, brain is stupid and baby is nitwit and brain is not sharp-witted too. I did not cut hair. I am afraid that baby's brain will be stupid, so I did not cut hair”*

*(Ma Yu, 36-years-old, 5 children)*

**(d) Behavioural precautions not to miscarry into pregnancy and not to injure baby**

Not to miscarry into pregnancy and not to injure baby, rural home birth women avoided doing rigorous activities and avoided having sex during pregnancy period.

- Avoidance of doing rigorous activities during pregnancy period

Some women avoided doing rigorous activities during pregnancy period. They see rigorous activities as harmful to pregnancy, as these may lead to injure baby and to a miscarriage. These activities include lifting heavy objects (i.e. fetching water). In addition, riding a motorbike is seen as a rigorous activity as these may also cause a miscarriage. Besides, women worried that if they lift heavy things, they will slip and fall, and then, they will miscarry into pregnancy or baby will injure, and then, women put on footwear like slipper during pregnancy as they take care of themselves in order not to slip and fall, not to have a miscarriage or not to injure baby.

Among 7 women, only two women, Ma Mya and Ma Phyu avoided lifting heavy things like fetching water during pregnancy because they worried that they will slip and fall and then, they will miscarry into pregnancy or baby will injure. The followings were as they explained:

*“Saya ma (midwives) has told me not to lift heavy things during pregnancy period. I think that they did not let me lift heavy things is because they worry I will have a miscarriage. When the pregnant mother lifts heavy things, she can slip and fall.*

*Yes, I avoided lifting heavy things because I am afraid that I will slip and fall and I worry that baby will injure”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Phyu who had a miscarriage into the first pregnancy told the researcher that she avoided lifting heavy objects like fetching water during pregnancy because she was afraid that she will miscarry into pregnancy. In addition, she told the researcher that she was worried that she will slip and fall when she walks and then, she will miscarry into pregnancy so she put on footwear like slipper in order not to slip and fall. Furthermore, she avoided riding a motorbike because she worried that she will miscarry into pregnancy as riding a motorbike jumps.

*“Since one month and eight days of pregnancy, I did not fetch water because I am afraid that I will miscarry into pregnancy and previously I had miscarried into pregnancy. I am afraid that I will miscarry and I will slip and fall when I walk, so I put on footwear by taking care of myself. Yes, I put on footwear like slipper. I was taking care of myself. I did not ride motorbike also. Why I did not take motorbike is because I am afraid that motorbike will jump. If motorbike jumps, I am afraid that baby will miscarry”*

*(Ma Phyu, 28-years-old, one child)*

However, Ma Yu told the researcher that she did not avoid lifting heavy things during pregnancy. She told that she rode motorbike herself until 9 months of pregnancy, and although neighbours told her not to ride motorbike with the pregnancy she rode motorbike and she told that she rode motor-bike in the previous pregnancies also, it nothing happened, she is not afraid that she will miscarry into pregnancy and then she told that if she miscarries into pregnancy, she will go to hospital to take out residue from the womb. The followings were as she said:

*“During pregnancy period, I did not avoid anything. I did all. I lifted heavy things. I fetched water until pregnancy was term. I rode motorbike myself until pregnancy was term. I still rode motorbike until pregnancy was nine months. Before about five days of delivery, I stopped riding motorbike. I knew that I am going to deliver baby so I stopped riding motorbike. Neighbours told me not to ride motorbike at every pregnancy. They told me not to ride motorbike with pregnancy, if the baby happened something, how to do and baby in the abdomen (womb) is not comfortable. I*

*rode motorbike, it nothing happened. Since the previous pregnancy, I rode motorbike. It nothing happened. I was not worried that I will miscarry into pregnancy. Also I was not afraid if I miscarried, residue is just taken out by going to hospital”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Moe, Ma Myint and Ma Sandar told the researcher that they did household chores during pregnancy period as usual they did before pregnancy period. Ma Moe told the researcher that she fetched water during pregnancy because she does not need to fetch a lot of water and for avoidance of doing heavy things, she does not have any job to do, she has to do only cooking and fetching water at home and as she said:

*“People say that the pregnant woman cannot carry heavy things. When I got a pregnancy, I was fetching water because I do not need to fetch a lot of water. For avoidance of doing heavy things, I do not have any job. At home, I have to do cooking and fetching water. That’s all I have to do”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Myint told the researcher that she did household chores as usual during pregnancy and she fetched water until pregnancy was term and as she said:

*“During pregnancy period, I fetched water and cooked rice. I fetched water until pregnancy is term. I fetched water and cooked rice as usual”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Sandar also told the researcher that during pregnancy period, she did household chores as usual and she did not specially take care of going and coming herself not to have a miscarriage and as she said:

*“During pregnancy period, as household chores, fetching water and washing clothes were usually done. I did not specially take care of going and coming myself not to have a miscarriage into pregnancy”*

*(Ma Sandar, 26-years-old, 3 children)*

Ma Cho, she told the researcher that she carried heavy things during pregnancy period according to her financial problems and she did not avoid lifting heavy things during pregnancy also. She told that as outside work, she carried rice and paddy on her head when the other people hired her. In addition, she told that during pregnancy, the pregnant woman needs to avoid lifting and carrying heavy things and if

the pregnant woman carries heavy things, she will slip and fall and then she may have a miscarriage but she carried and lifted heavy things when the other people hired her because she has no money and as she said:

*“During pregnancy period, I did not avoid household chores. I did all such as cooking rice, fetching water, sweeping the floor. As outside work such as I carried rice on my head and I carried paddy on my head when other people hired me. Other people who have money avoid doing heavy things. To me, I do not have money. How to avoid doing heavy things? In fact, when I got a pregnancy, I need to avoid doing heavy things. If the pregnancy woman carries heavy things, when she slips and falls, baby can miscarry. If I did not do household chores, who will do my house’s household chores. When other people hired me as wages, I did because I do not have money. I did household chores too”*

*(Ma Cho, 33years-old, 4 children)*

- Avoidance of having sex during pregnancy period

Some women avoided sexual intercourse when pregnancy was about six months and some avoided sexual intercourse when pregnancy was about eight months. But, in avoidance of having sexual intercourse, some women’s husbands avoided sexual intercourse because they worried that baby will injure and some women avoided sexual intercourse themselves as well because they worried that baby will injure due to sexual intercourse.

Among 7 women, Ma Cho and Ma Phyu avoided sexual intercourse during pregnancy period. But, Ma Cho, 4 children told the researcher that it is needed to avoid sexual intercourse during pregnancy because she felt painful inside of the uterus when they had sexual intercourse. However, she said that her husband did not avoid sexual intercourse in three previous pregnancies and her husband avoided sexual intercourse in the last pregnancy only when pregnancy was about six months because her husband worried that baby will injure due to sexual intercourse and as she said:

*“During pregnancy period, it is needed to avoid having sex because when we had sex, I felt painful inside. Woman’s vagina is not painful. Inside of the uterus is painful. My husband did not avoid having sex in three previous pregnancies. In this baby’s pregnancy, he avoided having sex. At about seven months of pregnancy...oh...at about six months of pregnancy, he avoided having sex. He avoided*

*having sex in this baby's pregnancy because he worried that baby will injure. In previous prgnancy, he did not avoid having sex"*

*(Ma Cho, 33-years-old, 4 children)*

Ma Phyu told the researcher that she felt painful like having sex touched baby when they had sexual intercourse. She told that she thinks if she has sexual intercourse continuously, baby will injure. Thus, she avoided sexual intercourse when pregnancy was about 8 months as she worried baby will injure and as she said:

*"When we had sex during pregnancy period, I felt a little bit painful. I did not felt very painful. Vagina was not painful. I felt painful like having sex touches baby. I felt like having sex touches baby. Yes, in my mind I felt painful. If we will have sexual intercourse continuously, I think that baby will injure. At about eight months of pregnancy, we avoided having sexual intercourse. Yes, I worried that baby will injure"*

*(Ma Phyu, 28-years-old, one child)*

On the other hand, Ma Moe and Ma Myint avoided sexual intercourse during pregnancy. But, the reason they avoided sexual intercourse is not because baby will injure. They told that they do not know and understand when they had sexual intercourse, having sexual intercourse can injure baby. Ma Moe told that she avoided sexual intercourse when she knows that she got a pregnancy and Ma Mya told that she avoided sexual intercourse when pregnancy was about 8 months due to she does not want to have sexual intercourse with pregnancy. The followings were they said:

*"When I knew that I have got a pregnancy, I avoided...avoided having sexual intercourse. Avoidance of having sexual intercourse is not because baby will injure. I do not know that baby will injure if we have sexual intercourse. I do not understand too that baby will injure if we have sexual intercourse. When I got a pregnancy, having sexual intercourse was avoided"*

*(Ma Moe, 22-years-old, 2 children)*

*"When I got a pregnancy, I do not want having sexual intercourse. In this baby's pregnancy, my husband was at home. The rest children's pregnancy, he was not at home. When pregnancy is term, we avoided having sexual intercourse. When pregnancy is about 8 months, 9 months, we avoided having sexual intercourse. I do not think that having sexual intercourse during pregnancy period can injure baby. I do*

*not want to have sexual intercourse when I got a pregnancy. I do not know that having sexual intercourse during pregnancy can injure baby”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Myint and Ma Sandar told the researcher that it is not needed to avoid sexual intercourse during pregnancy period. Ma Myint and Ma Sandar said that they did not avoid sexual intercourse during pregnancy and as they explained:

*“I did not avoid having sexual intercourse during pregnancy period. During pregnancy period, it is not needed to avoid having sexual intercourse”*

*(Ma Myint, 29-years-old, 2 children)*

*“Sexual intercourse is not needed to avoid during pregnancy period. We did not avoid having sexual intercourse during pregnancy period. I knew that sexual intercourse is not needed to avoid during pregnancy period”*

*(Ma Sandar, 26-years-old, 3 children)*

Ma Yu, she told the researcher that although sexual intercourse is not needed to avoid during pregnancy, she told that her husband was embarrassing her as she got a pregnancy so her husband avoided having sexual intercourse when pregnancy was at around 6 months and as she explained as follows:

*“My husband avoided having sexual intercourse when pregnancy is about four months, five months and six months. Husband was embarrassed me because I got a pregnancy. During pregnancy period, it is not needed to avoid having sexual intercourse”*

*(Ma Yu, 36-years-old, 5 children)*

**(e) Behavioral precaution not to miscarry into pregnancy or not to result baby in death when baby is delivered**

Not to miscarry into pregnancy or not to result baby in death when baby is delivered, rural home birth women avoided of preparing nappies, clothes and baby stuff for unborn baby during pregnancy.

- Avoidance of preparing nappies, clothes and baby stuff for unborn baby

Some rural home birth women believed that if they prepared baby stuff like nappies, clothes, baby’s bassinet and pillow and so on for unborn baby, they will miscarry into pregnancy or baby will result in death when they deliver baby. Thus, some rural home birth women avoided preparing baby things at all like nappies,

clothes, pillow, baby's bassinet and so on during pregnancy because they were worried that baby will miscarry or baby will result in death when they deliver baby.

Among 7 women, Ma Cho and Ma Moe did not prepare any baby's stuff for unborn baby during pregnancy because they were worried that they will miscarry into pregnancy or baby will result in death when they deliver baby and as they explained:

*“If pillow, nappies and baby's bassinet for unborn baby are prepared, baby can miscarry or baby will result in death when baby is delivered. That's why I dared not prepare. My mother has told me that if pillow, bassinet and nappies for unborn baby are prepared...are prepared beforehand, baby will result in death or baby can miscarry too. That's why I dared not prepare beforehand”*

*(Ma Cho, 33-years-old, 4 children)*

*“I did not prepare nappies during pregnancy period. But I asked for long gyi (nether garment worn by Myanmar men) from the other people. But I did not tear long gyi. After baby has been delivered, long gyi was tore as nappies. People say preparing nappies is not good. I believe that if nappies are prepared for unborn baby, baby will result in death. I did not prepare nappies for unborn baby because I have heard people say. I did not prepare anything because I believe. I have heard there is a woman there. She prepared nappies and clothes which have been washed for her first unborn baby. When she delivers her baby, the baby was born as death baby”*

*(Ma Moe, 22-years-old, 2 children)*

However, some rural home birth women prepared nappies for unborn baby. They told that nappies were needed immediately to wrap baby after delivery of baby. They believed that if they prepared nappies for unborn baby, it happens nothing but they have beliefs that if they prepared other baby's stuff like clothes, pillow and bassinet and so on for unborn baby, baby can miscarry or baby will be delivered as death baby (baby will result in death) or baby will not be alive after delivery of baby. Thus they avoided preparing clothes, pillow, and bassinet and so on for unborn baby because they were worried that baby will miscarry or baby will result in death. Ma Myint, Ma Yu and Ma Sandar prepared nappies, but they did not prepare baby's clothes and the other baby's stuff as they were afraid that they will miscarry into

pregnancy or baby will result in death when they deliver baby or baby will happen something and as they explained:

*“In my second pregnancy, three pairs, four pairs of nappies were prepared. Immediately after delivery of baby, it is needed to wrap baby. But older people say that the whole one set cannot be prepared for unborn baby. One set is that baby clothes, socks for hands and legs. Only nappies can be prepared. I do not understand. I said in front of older people (neighbours) as I will buy one pair of baby clothes. Then older people told me not to buy. So I did not buy baby clothes. Older people told me that one set of baby clothes cannot be bought for unborn baby. If one set clothes are prepared, it is not good. If clothes are prepared, it is not good. Older people told me that if clothes are prepared, baby will not be alive when the baby was delivered. Clothes for unborn baby should not be prepared. And so I did not buy them. I believe that because older people are saying like that”*

*(Ma Myint, 29-years-old, 2 children)*

*“Nappies were prepared at every child. When the baby is delivered, nappies are needed to wrap baby. Some women say that nappies can be prepared and baby clothes cannot be prepared for unborn baby. People say that if baby clothes, baby net and pillow are prepared for unborn baby, baby can miscarry or baby will result in death when the baby is delivered. I am afraid so I did not prepare. After baby has been delivered, I can buy baby stuff from shop. So I did not prepare”*

*(Ma Yu, 36-years-old, 5 children)*

*“During pregnancy period, nappies were prepared at every child. I do not know which days baby will be delivered. When baby is delivered, nappies are needed to wrap baby. But I did not prepare baby clothes. I did not prepare the other things. I just only prepared nappies. People say that baby clothes cannot be prepared before delivery, baby will happen something. I follow that because I was afraid that baby will happen something”*

*(Ma Sandar, 26-years-old, 3 children)*

However, some women prepared all things such as nappies, clothes, pillow, baby stocking cap and so for unborn baby. Although they knew that if baby's stuff were prepared, baby will result in death or they may have a miscarriage as older people say, they told that's ancient beliefs, nowadays every people prepare all baby's

stuff for unborn baby. They told they do not have beliefs as older people say and then, they neglected older people's beliefs and they prepared all baby's stuff. In addition, they told that after childbirth, immediately *saya ma* (midwife) asks for nappies, if nappies were not prepared, midwife will scold them. Ma Mya and Ma Phyu prepared all such as nappies, pillow, baby clothes, baby stocking, cap and socks. They explained as follows:

*“Older people say that nappies, pillow and baby clothes for unborn baby cannot be prepared. If all are prepared, baby can miscarry or baby may die after baby has been delivered too. That's ancient's beliefs. Nowadays, every people prepare all things. Since I got the first pregnancy, I prepared all and I bought all. I do not have beliefs as older people say. After childbirth, saya ma (midwife) asks for nappies, how to do? If nappies are not prepared, she will scold me. That's why I prepared”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Phyu, Burma race told the researcher that she prepared all baby's stuff for unborn baby as her mother who is running baby stuff shop suggested her to prepare all baby's things and as she said:

*“Nappies were prepared since seven months of pregnancy. From my mother's shop, I brought all, all. Nappies, bassinet, mosquito net, hoo! baby's clothes, baby stocking cap, and socks were complete. Some people say that nappies cannot be prepared for unborn baby and baby can miscarry. Some people say that only Mon race has beliefs not to prepare nappies for unborn baby and Burma people can prepare nappies. I thought Oh! that's right. My mother also said me oh! Nowadays, it is better when all were ready, if you did not prepare nappies you will have to find them when you deliver baby. She said me to take all from her shop. That's why I brought all from my mother's shop”*

*(Ma Phyu, 28-years-old, one child)*

Ma Thein, a key informant told the researcher that she prepared all baby's stuff for unborn baby. She told that she does not have beliefs as older people say if all baby's stuff were prepared, baby will not come into human society which means baby will result in death when baby is delivered or baby can miscarry. She told that she knows baby's health condition in the abdomen and nowadays, there are no like that beliefs. The followings were as she said:

*“I prepared nappies when pregnancy was about six months, seven months of pregnancy to be ready after delivery of baby. Some people say that if nappies for unborn baby are prepared, baby how can I say it, for example: baby will result in death and baby will not come into human society. But I do not have beliefs. I do not have beliefs. And then, I am knowing baby’s health condition in the abdomen. That’s why I do not have beliefs. I prepared all to be ready. I do not believe like that. That’s a custom of the olden days. Only people from the olden days have beliefs. Nowadays, there is no belief”*

*(Ma Thein, 26-years-old, 2 children)*

**4) Drinking *sa nwuin* (turmeric) powder for easy birth, for fart, not to feel *lay nar* (flatulence) during pregnancy regarding home birth**

Some rural home birth women drank *sa nwuin* (turmeric) powder during pregnancy. How they drank *sa nwuin* (turmeric) powder was that some women made turmeric powder into small balls and then they drank turmeric powder which has already made into small balls at every night like they take medicines or some women mixed salt and *pyarr yay* (honey) into the *sa nwuin* (turmeric) powder and they balled *sa nwuin* (turmeric) powder into small balls, after that they leave small balls to dry in the air and then they drank *sa nwuin* (turmeric) small balls like they take medicines. The reason they drank *sa nwuin* (turmeric) powder during pregnancy is for easy birth, for fart and not to feel *lay nar* (flatulence) when they deliver baby. They believed that if the pregnant woman drinks *sa nwuin* (turmeric) powder, she farts and then, air is less in the abdomen and then she feels comfortable in the abdomen and then, when she delivers baby birth is easy. In addition, they believed that if the pregnant woman does not drink *sa nwuin* powder, she does not fart and there will have a lot of airs in the abdomen and then when she started labour pain she will feel *lay nar* (flatulence) first which is sharp labour pain due to a lot of airs in the abdomen and which is not real labour pain and then she will be in labour pain for a long time, and she will start real labour pain when all airs in the abdomen are clear. It is found that women followed that practice due to suggestions of neighbours, mother-in-law and older people.

Ma Cho, Ma Myint, and Ma Yu drank *sa nwuin* powder during pregnancy period for easy birth, for fart and not to feel *lay nar* when they started labour pain and as they explained:

*“In this baby’s pregnancy, I drank turmeric powder. Since about five months of pregnancy, I drank turmeric powder. When I started labour pain, not to have lay nar...I made turmeric powder...turmeric powder as small balls and then I kept them in a bottle. When pregnancy was about five months, I started drinking turmeric powder”*

*(Ma Cho, 33-years-old, 4 children)*

*“I drank turmeric (sa nwuin) powder to fart during second pregnancy period. Older people let me drink turmeric (sa nwuin) powder. When I got my first pregnancy, I drank turmeric (sa nwuin) powder. Older people told me that drinking sa nwuin makes easy birth. That’s why I drank turmeric (sa nwuin) powder for easy birth. If turmeric (sa nwuin) powder is drunk, air is less, air is less in the abdomen. If a lot of airs in the abdomen, birth is difficult. If a lot of airs in the abdomen, some women were in labour pain for about seven days. If turmeric (sa nwuin) powder is drunk, abdomen is comfortable. If abdomen is comfortable, birth is easy. I believe that if the pregnant woman drinks turmeric (sa nwuin) powder, birth is easy. I drank turmeric (sa nwuin) powde. I drank turmeric (sa nwuin) powder to deliver baby easily. I drank turmeric (sa nwuin) powder at night time”*

*(Ma Myint, 29-years-old, 2 children)*

*“In my previous pregnancy, I drank sa nwuin (turmeric) powder. Also I drank sa nwuin (turmeric) powder in the last pregnancy for easy birth and not to feel lay nar. Lay nar is that when the pregnant woman started labour pain for delivery, she feels sharp pain. Then the duration of labour pain is long. If she feels sharp labour pain, it is because there are airs in the abdomen. Sa nwuin powder, salt and pyarr yay (honey) were mixed and then balled them into small ball. After that leave sa nwuin powder small balls to dry in the air and then I drank them. When pregnancy was about five months, sa nwuin powder small ball was drunk daily at every pregnancy”*

*“Neighbours and my-mother-in-law told me that if there is air in the abdomen, labour pain is sharp when labour pain started, drink sa nwuin powder after making sa nwuin powder into small balls. I followed and drank sa nwuin powder because I am afraid that I will feel sharp labour pain”*

*(Ma Yu, 36-years-old, 5 children)*

**5) Applying *sa nwuin* (turmeric) powder on the abdomen for fart, to feel comfortable in the abdomen during pregnancy regarding home birth**

On the other hand, some rural home birth women applied *sa nwuin* powder on the abdomen during pregnancy to feel comfortable in the abdomen and for fart. Ma Moe told the researcher that she applied *sa nwuin* powder on her abdomen to feel comfortable in the abdomen and for fart as well and as she said:

*“In my first pregnancy I applied sa nwuin powder on my abdomen. People say applying sa nwuin powder make feel comfortable in the abdomen. I applied in the second pregnancy too for also farting. I applied sa nwuin powder on the abdomen at the bed time and then I slept”*

*(Ma Moe, 22-years-old, 2 children)*

**6) Applying *sa nwuin* (turmeric) powder on the extremities, not to possess at the pregnant woman’s body by *ma kaunn soe war*(evil-spirits) during pregnancy regarding home birth**

Ma Phyu is different from others. She told the researcher that she applied *sa nwuin* powder on the extremities of her hands and legs when she went out at night time during pregnancy not to possess at her body by *ma kaunn soe war* (evil-spirits) as older people say and as she explained:

*“People say that if a pregnant woman goes out at night time, has to apply turmeric powder. Ma kaunn soe war cannot possess at the pregnant woman’s body when the pregnant woman applied turmeric powder. I, when I went out at night time turmeric powder was applied on my extremities from both hands and legs. I believe that a pregnant woman requires applying turmeric powder on her body when she goes out at night time. I cannot say that ma kaunn soe war will not possess atmy body because my house is near bush”*

*(Ma Phyu, 28-years-old, one child)*

Ma Thein, a key informant also told the researcher that she applied *sa nwuin* powder on her extremities when she went out in the evening during pregnancy because she was afraid that *ma kaunn soe war*(evil-spirits) will bewitch her to have a difficult birth. She told that she cannot see *ma kaunn soe war* who are going at outside, and in the mind of *ma kaunn soe war*, the pregnant woman smells sweet like the smell

of flowers, at that time if the pregnant woman did not apply *sa nwuin* powder, *ma kaunn soe war* can bewitch the pregnant woman and as she said:

*“I applied sa nwuin (turmeric) powder on the extremities during pregnancy period. I applied sa nwuin (turmeric) powder when I went out in the evening. People say that at the evening time, the pregnant woman is being aromatic like the smell of flowers in ma kaunn soe war’s mind. We cannot see ma kaunn soe war. When we go outside the house, there might be ma kaunn soe war on the road. Older people say that when the pregnant woman cross beside ma kaunn soe war, the pregnant woman is so fragrant in ma kaunn soe war’s mind. In ma kaunn soe war’s mind, the pregnant woman smells sweet like the smell of flowers. At that time, if the pregnant woman did not apply sa nwuin (turmeric) powder, the pregnant woman is fragrant in ma kaunn soe war’s mind. Then ma kaunn soe war can bewitch the pregnant woman. I followed because I am afraid that giving birth will be difficult when I deliver baby”*

*(Ma Thein, 26-years-old, 2 children)*

Midwife, a key informant told the researcher her experiences regarding applying *sa nwuin* powder by the pregnant women. She told that at the beginning of she was posted in the study area, the pregnant women applied *sa nwuin* powder on their body when pregnancy is over 36 weeks of gestation to relieve of body ache and now applying *sa nwuin* powder on their body becomes less and less because she scolded the pregnant women. The followings were as she said:

*“At the beginning of I was posted here, the pregnant women applied sa nwuin powder on their body when pregnancy is over 36 weeks of gestation. When they came to rural health centre, they came to rural health centre by applying sa nwuin powder over the whole body. When I saw them I told them that we cannot look at what disease have you got. We cannot look at your skin is yellowing? or you have oedema? That’s why applying sa nwuin powder on their body becomes less and less. They say that applying sa nwuin (turmeric) powder relieves body ache”*

### **7) Avoidance of taking iron supplements during pregnancy by rural home birth women**

When rural home birth women received antenatal care during pregnancy, midwife gave them iron and the other medicines. But, most rural home birth women

took only the other medicines and they did not take iron as the smell of iron is smelly. In addition, they did not know iron prevents anemia for the pregnant mothers. They called iron as *arr say*. Furthermore, they expressed that when they took *arr say*, they felt so sleepy, so they believed that if they slept much, baby in the abdomen (womb) will be large and if baby in the abdomen (womb) is large, birth will be difficult and then, they feared that midwife will scold them if birth is difficult. Thus, they did not take *arr say* because they worried that birth will be difficult as baby in the abdomen (womb) is large and as *arr say* is smelly. Some rural home birth women know that iron can help the pregnant woman to have a full supply of blood, but they did not take iron due to the smell of iron is smelly and also they were afraid to take medicine. Some rural home birth women did not take iron and also the other medicines that midwife gave them when they received antenatal care due to influence of women who have home birth delivery experiences. This study found that most rural home birth women did not take iron during pregnancy were due to iron is smelly, due to the influence of women who have home birth delivery experiences and also their misbeliefs as they believed if they take iron, baby in the uterus will be larger and then birth will be difficult.

- **Iron has effects to be large baby in the womb and then, birth will be difficult**

Ma Cho, Ma Sanar did not take *arr say* at all during pregnancy because they believed that if they took iron, fetus in the uterus will be large and birth will be difficult. The followings were:

Ma Cho told the researcher that when she received antenatal care during pregnancy, she did not take *arr say* (iron) and also she did not know that *arr say* prevents anemia for the pregnant mother. The reasons why she did not take *arr say* were that she expressed that after she has taken *arr say*, she felt so sleepy, so she believed that if she slept much, baby in the abdomen (womb) will be large and if baby in the abdomen (womb) is large, birth will be difficult as fetus is large and she told that *arr say* is smelly so she did not take *arr say*. The following was as she explained:

*“When I went to rural health centre, they (midwives) weighed me. They touched my abdomen a little bit. They (midwives) did not tell me anything that if I have blood pressure drop (hypotension), I have blood pressure drop and if I have*

*hypertension, I have hypertension also. They (midwives) did not give me any health education. When pregnancy was term, they gave me medicines and arr say. I took the other medicines. I did not take this arr say (she showed the researcher arr say which is kept by Ma Cho without taking arr say and in fact, arr say is FERUP SOFTULES (iron) in which includes Ferrous Fumarate, Zinc Sulphate, Vitamin B12, and Folic Acid). This arr say is very smelly. I did not take arr say because it is very smelly and baby will be large and I am afraid that baby in the abdomen (womb) will be large. After taking this arr say, I felt so sleepy. When I took this arr say, it is so smelly. I am worried that baby in the abdomen (womb) will be large. Then I felt so sleepy, I felt so sleepy after taking this arr say. If I felt sleepy, when I slept much, baby in the abdomen (womb) is large, right. If baby is large, birth is difficult. That's why I did not take arr say and I did not take arr say because it is smelly too"*

*(Ma Cho, 33-years-old, 4 children)*

Ma Sandar also did not take iron during pregnancy period and she did not know that taking iron can prevent anemia for the pregnant mother. When she received antenatal care, the midwife gave her medicines but she took only tonic medicines and she did not take medicine which has effects to be large baby in the abdomen (womb) and she said that medicine which has effects to be large baby in the abdomen (womb) is iron. The reason she did not take iron is that she believed that if she took iron (which has effects to be large baby in the abdomen (womb) she says), baby in the abdomen (womb) will be large and birth will be difficult and she thought that baby in the abdomen no need to be large, after delivery of baby let the baby large because she was afraid that if the baby in the abdomen (womb) is large, birth will be difficult and as she said:

*"When I received antenatal care, I took medicines (tonic) that midwife gave me. But medicines that have effects to be large baby were not taken. Because in my mind, I thought that baby in the abdomen no need to be large. When the baby reached outside, let baby be large. I was afraid that givin birth would be difficult when the baby in the abdomen is large. That's why I did not take medicine that has effects to be large baby. In every child, I did not take medicine that has effects baby to be large. Medicine that has effects to be large baby is called iron. Small medicines are called iron by the midwife. That medicine was not taken"*

*(Ma Sandar, 26-years-old, 3 children)*

Ma Moe also told the researcher that when she received antenatal care, the midwife gave her *arr say*(iron).But, she told that sometimes she took *arr say* midwife gave her and sometimes she did not take *arr say*. Then, she told that after taking *arr say*, she felt so sleepy at the day time also and she ate a lot, thus she worried that baby in the abdomen (womb) will be large and birth will be difficult. Hence, she took *arr say* for two days only when the midwife gave her *arr say* for one week and the rest *arr say* for five days was not taken as she worried that baby in the womb will be large and then, birth will be difficult and as she explained:

*“When I received antenatal care, the midwife gave me arr say. Then I did not know what medicine, so smelly. So sometimes I took arr say midwife gave me. When I received antenatal care, sometimes I took arr say midwife gave me. I felt sleepy when I took arr say. After taking arr say, I wanted to sleep very much at night time and also at the daytime. When I wanted to sleep ever, I dared not take arr say midwife gave me. I took arr say for two days when the midwife gave me arr say for one week. When I took this arr say, I eat a lot and want to sleep ever. So I was afraid that the baby will be large in the abdomen (womb). People say when all arr say midwife gave are taken the baby in the abdomen (womb) will be large if the baby is large, birth is difficult, when birth is difficult midwife scolds that pregnant woman”*

*(Ma Moe, 22-years-old, 2 children)*

**• Some rural home birth women did not take iron during pregnancy due to the influence of women who have home birth delivery experiences**

Ma Myint among 7 rural home birth women did not take iron and also the other medicines that midwife gave her when she received antenatal care due to the influence of women who have home birth delivery experiences.Ma Myint told the researcher that when she received antenatal care during pregnancy, midwife gave her medicines including *arr say*, but she told that she never took *arr say* and also the other medicines midwife gave her. She told that she drank only *sa nwuin* (turmeric) powder only during pregnancy for easy birth. The reason she did not take medicines midwife gave her is due to influence of women who have home birth experiences. She told the researcher that women who have home birth experiences told her that when they got pregnancy, they never took medicines midwife gave them, medicines midwife gave

them are English medicines and taking traditional medicine like *sa nwuin* (turmeric) powder is better for easy birth. Thus, she told that she did not take medicines midwife gave her and she took only *sa nwuin* (turmeric) powder for easy birth. The following was as she said:

*“When I got a pregnancy, I took only turmeric (sa nwuin) powder. When I went to the rural health centre, the midwife gave me medicines. But I did not take medicine at all that midwife gave me. People told me that why medicine has to be taken, medicines that midwife gave are only English medicines, taking traditional medicines is better, and when turmeric (sa nwuin) powder is taken, giving birth is easy. That’s why I did not take medicine that midwife gave me. Women who have home birth delivery experiences told me that when they got pregnancy, they did not take medicine that midwife gave. And so I also did not take medicine that midwife gave. I took only turmeric (sa nwuin) powder. Medicines that they gave me are also including arr say, midwife gave me arr say. I never took that medicine”*

*(Ma Myint, 29-years-old, 2 children)*

**• Some rural home birth women know that iron can help the pregnant woman to have a full supply of blood, but they did not take iron due to the smell of iron is smelly and also they were afraid to take medicine**

Ma Mya knows that taking iron can help the pregnant woman to have a full supply of blood. But she did not take medicines including iron during pregnancy because she was afraid that she has to take medicines and then, she did not take iron also due to iron is smelly. She just took medicines including iron midwife gave her for about two days, three days and there were many medicines still left without taking medicines midwife gave her. The reasons she did not take iron are because iron is smelly and she was afraid to take medicines as well and as she said:

*“I am afraid that I will have to take medicine. So I received antenatal care when pregnancy was 6 months. I am afraid of all medicines. I took medicines midwife gave me for about two days, three days. There are many medicines still left. I ate food which has energy. I did not take medicine. Saya ma (midwife) gave me iron. Iron is so smelly. Taking iron can help the pregnant woman to have a full supply of blood. I did not take iron because it is so smelly and I am afraid to take medicine as well”*

*(Ma Mya, 29-years-old, 3 children)*

Auxiliary midwife, a key informant told the researcher that some pregnant women did not take iron because iron is smelly. In addition, they believed that if they took iron, baby in the abdomen (womb) will be large and if baby in the abdomen (womb) is large, birth is difficult, thus they did not take iron and as auxiliary midwife said:

*“Some pregnant women do not take medicines that midwives give. Yes, midwives give iron to pregnant women, right. Iron 200 tablets...arr...108 tablets has to be taken until delivery. Then they (pregnant women) do not take iron because iron is smelly. Then they think that if they take iron, baby in the abdomen (womb) will be large, if baby in the abdomen (womb) is large, birth is difficult. In fact, iron is for mothers and iron is not for baby. Iron is for mothers. They think that baby is large if they take this iron. Some pregnant women throw iron because iron is smelly. I tell them that when you deliver baby, if you have a postpartum haemorrhage, it is good for you by taking this iron”*

#### **4.6.2 Cultural beliefs and practices during childbirth period (intra-partum period) related to home birth**

During the field trip, the researcher tried to observe and to participate in women's childbirth practices during childbirth. Unfortunately, the researcher did not get a chance to observe and to participate in women's child birth practices because during the field trip, all patients in maternity gave birth at night time. However, the researcher got information regarding women's home birth practices during childbirth according to the researcher's interview. As rural home birth women's childbirth practices, when a pregnant woman started labour pain, neighbours, older people and also family members such as the pregnant woman's mother, mother-in-law helped the pregnant woman who is in labour. In the study area, most husbands do not enter into the labour room because they are shy to enter into the labour room and giving birth is considered as women's business. Then, if husband was at home, husband gets the midwife. If the pregnant woman who is in labour had a difficult birth or in case of prolonged labour, older people who are neighbours and the pregnant woman's mother or mother in-law practiced many various ways of their cultural beliefs for easy birth

according to their customs. In some case, even the pregnant woman who is in labour did not have a difficult birth, older people, neighbours, and mother or mother-in-law wanted the pregnant woman to deliver baby easily. So, they practiced many various ways of their cultural beliefs based on their customs for easy birth during labour before midwife come to the pregnant woman's home and then, sometimes they practiced their cultural beliefs during childbirth for easy birth in front of midwife too. In some cases, the pregnant woman who was in labour also wanted to have an easy birth, so she practiced some cultural beliefs herself for easy birth during labour pain.

This study found five cultural beliefs practiced by rural home birth women during childbirth for easy birth such as drinking *yay mum* (water over which mantras have been recited for easy birth effect) during labour pain, crossing over (*chay kyaw let kyaw*) pregnant woman's body by the pregnant woman's husband or mother during childbirth, pouring water to *shin kee* (*Nat* who is looking after the house or looking after the village) during labour pain, wearing of *hta mein* (nether garment worn by Myanmar women) of mother or the other woman who have delivered baby easily by the pregnant woman during childbirth or during pregnancy and childbirth, and opening the doors and windows during childbirth. In addition, rural home birth women expressed religious beliefs to home birth.

**Drinking *yay mum* (water over which mantras have been recited for easy birth effect) during labour pain: for easy birth**

*Yay mum* is that older people or monks recited mantras like *thazingothout* (mantra) or *in ku li mar la thout* (mantra) water over for easy birth effect. Then, water has become *yay mum*. Especially, older people or monks recite *in ku li mar la thout* (mantra) water over to become *yay mum* for easy birth effects, particularly for the pregnant women who are in labour to deliver baby easily. There has been a history in our Buddhism since the reign of God (Buddha) as birth is easy if *in ku li mar la thout* (mantra) is recited during labour pain.

In the study area, most of the houses have *yay mum*, which was used to put on the altar. When the pregnant woman started labour pain, the pregnant woman drinks *yay mum* as her mother-in-law let her drink *yay mum* or older people or the pregnant woman's mothers feed the pregnant woman who is in labour to deliver baby easily and smoothly. If there was no *yay mum* at pregnant woman's house, the

pregnant woman's husband go and ask the monk to recite mantras water over to become *yay mum* by taking a bottle of water or older people who can recite mantras water over recite mantras water over and then, let the pregnant woman who is in labour drink *yay mum* to deliver baby easily or feed *yay mum* the pregnant woman who was in labour for easy birth and in some cases, they sprinkle *yay mum* on the pregnant woman's body who is in labour to run away *ma kaunn soe war* (evil-spirits) from the pregnant woman's body if *ma kaunn soe war* were possessing at the pregnant woman's body. They believed that when the pregnant woman started labour pain, witches and *ma kaunn soe war* (evil-spirits) can bewitch the pregnant woman who is in labour and they think that witches and *ma kaunn soe war* can possess at the pregnant woman's body who is in labour to bewitch the pregnant woman to have a difficult birth. They believed that if the pregnant woman who is in labour is fed on *yay mum* which has been recited by mantras, the pregnant woman who is in labour will deliver baby easily and if they sprinkled *yay mum* on the pregnant woman's body who is in labour, witches and *ma kaunn soe war* who were possessing at the pregnant woman's body will run away from the pregnant woman's body and then, they think that birth will be easy. The reason of drinking *yay mum* by the pregnant woman who is in labour is to deliver baby easily. Drinking *yay mum* (water over which mantras have been recited for easy birth) was mostly practiced when the pregnant woman started labour pain.

Among 7 women, Ma Cho, Ma Phyu, Ma Myint, and Ma Yu drank *yay mum* when they were in labour pain to deliver baby easily. But in case of Ma Cho, Ma Phyu and Ma Myint, older people and their mothers fed them on *yay mum* to deliver baby easily and in case of Ma Yu, her mother-in-law let her drink *yay mum* to deliver baby easily. They explained as follows:

*"In this baby, I had to drink yay mum, yay mum. Phoe ba saw (a grandfather who is her neighbour) fed me yay mum while I was in labour. He recited water. After he recited water, he fed me yay mum. He fed me yay mum while labour pain is so painful. He recited water himself. He went to near altar with a cup of water and he recited water. Recite...after reciting water, he fed me yay mum. I had not drunk yay mum in previous children. He fed me yay mum is to deliver baby easily and then, witches from my body are to go away if witches possess at my body, and if witches*

*possess at my body... when witches go away from body, is to deliver easily baby. He fed me yay mum is not because I had a difficult birth. He fed me yay mum is that he wants me to deliver baby easily and he does not want to see me as I am suffering from labour pain. Phoe ba saw (a grandfather who is her neighbour) said me that I feel overwrought as you are in labour pain, drink this yay mum”*

*(Ma Cho, 33-years-old, 4 children)*

*“During labour, my husband went and took yay mun from the monk. My husband went and asked monk to recite water at the monastery. Older women fed me yay mum and they sprinkled yay mum on my body. When they fed me yay mum, I took yay mum. My mind did not concentrate to yay mum because abdomen was painful. When they fed me yay mum, I took. They fed me yay mum is that there are some pregnant women who could not deliver baby because of ma kaunn soe war (evil-spirits) and witches. I think like that. I think they fed me yay mum because they worried that I will be as I could not deliver baby if ma kaunn soe war (evil-spirits) and witches were possessing at my body. As I am a Buddhist, I believe God (image of Buddha). If I drink yay mum, ma kauun soe war (evil-spirits) and witches will go out from my body and there are no ma kaunn soe war and witches at my body”*

*(Ma Phyu, 28-years-old, one child)*

*“During labour, my mother fed me yay mum to free from danger. To free from danger is to deliver baby easily. I believe if the pregnant woman is fed yay mum during labour, birth is easy. I believe is that during labour, ma kaunn soe war (evil-spirits) can possess at the pregnant woman’s body and ma kaunn soe war will run away when the pregnant woman is fed yay mum. We cannot see that ma kaunn soe war are possessing at the pregnant woman’s body. Witches also can bewitch the pregnant woman. So, during labour, I dared not let witches hear. Also some the pregnant women who were in labour dared not let witches hear. I also did not let witches hear and even I was in labour pain, I shouted slowly. I did not shout loudly. If witches hear, they bewitch. They can bewitch the pregnant woman not to deliver baby. Drinking yay mum is to run away witches and ma kaung soe war (evil-spirits) if witches and ma kaunn soe war possessed at the pregnant woman’s body. Yes, drinking yay mum is to deliver baby easily”*

*(Ma Myint, 29-years-old, 2 children)*

*“While I was in labour, I drank yay mum myself to deliver baby easily. I drank yay mum myself in every child. Yay mum is always at home. I always keep yay mum at home. When I started labour pain, I drank yay mum myself. My mother-in-law told me that drink yay mum, if yay mum is at your home and birth is easy if yay mum is drunk. Then I drink yay mum to deliver baby easily. When I drink yay mum, I concentrated to God from my mind as look after me to deliver baby easily, Ashin Pha Yarrn (image of Buddha), look after me to deliver baby smoothly”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Thein, a key informant also told the researcher that during labour, she was fed on yay mum by older people and then they rubbed on her body from head to toe with their hands which are wet with yay mum for easy birth and as she said:

*“During labour pain, I was fed yay mum. When I was fed yay mum, I cannot drink yay mum. Older people told me to open my mouth and then they fed me yay mum with spoon. They fed me yay mum to deliver baby easily. They fed me yay mum for three drops. And then they rubbed my body from head to toe with their hands which are wet with yay mum”*

*(Ma Thein, 26-years-old, 2 children)*

An auxiliary midwife, a key informant, 49 years old told the researcher her experiences regarding yay mum as she is an auxiliary midwife in women's home birth delivery. She told that they (older people, the pregnant woman's mother or the pregnant woman's mother-in-law) feed the pregnant woman who is in labour yay mum by asking a person who can recite inn ku li mar la tote (mantra) water over to become yay mum for easy birth and as she said:

*“During labour, they recite water by reciting inn ku li mar la tote (which is mantra makes easy birth) and then feed the pregnant woman who is in labour yay mum. After calling a person who can recite water to become yay mum, they ask him to recite water and then feed the pregnant woman. They do like this too. They say that they feed the pregnant woman yay mum is to deliver baby easily.”*

*(Auxiliary midwife, 49 years old)*

Midwife, 29 years old, a key informant. She is working at rural health centre in the study village and she has experiences being as a midwife in women's home birth delivery for seven years already in the study area. She told the researcher

her experiences regarding with drinking *yay mum* by the pregnant woman during labour. She told that almost every house has *yay mum* and *yay mum* was put at the altar and then, some women took *yay mum* from the monastery before they started labour, when they started labour pain they drink *yay mum* for easy birth and if there was no *yay mum* at their home when the pregnant woman started labour pain, one of the pregnant woman's family member goes to the monastery and asks a monk to recite water by reciting mantras for easy birth. The following was as she said:

*“During labour, they take a bottle of water and go to the monastery and ask a monk to recite water by reciting mantras for easy birth effect. Then water bottle which has been yay mum are taken back and feed the pregnant woman who is in labour. Some took yay mum from the monastery before labour pain. Yay mum was put at the altar. If you do not believe, you look. You will see yay mum at every house”*

In addition, the midwife told the researcher about her opinion regarding taking *yay mum*. She told that the pregnant woman who is in labour drank *yay mum* for easy birth and then, she also believed that practice because she is a Buddhist and as she said:

*“Drinking yay mum during labour pain is that some people recited thazingathout (mantra) water over and some people recited in ku li mar la thout (mantra) water over. After reciting mantras like that, the water they drink is called yay mum. Yes, they drink yay mum for easy birth. How can I say it, since the reign of God (the image of Buddha), there is in ku li mar la thout (mantra), right as giving birth is easy when in ku li mar la thout is recited (mantra). I believe that because I am a pure Buddhist. I have to believe hee hee hee hee. I cannot say them regarding drinking yay mum. I also always recite in ku li mar la thout (mantra). Also now, I recite. When I arrived to their houses to assist them for delivery, I recited”*

*(Midwife, key informant)*

**Crossing over (*chay kyaw let kyaw*) the pregnant woman's body by the pregnant woman's husband or mother during childbirth: for easy birth**

Crossing over (*chay kyaw let kyaw*) is that crossing over a pregnant woman's body who was in labour by the pregnant woman's husband or the pregnant woman's mother or the pregnant woman's elder brother or elder sister. The reason of crossing over the pregnant woman's body who was in labour is to deliver baby easily.

When they did *chay kyaw let kyaw* is that the pregnant woman who is in labour, and woman's uterine canal has already opened but she has not delivered yet baby and it takes time to deliver baby, at that time, they (husband, mother or elder brother or sister) did *chay kyaw let kyaw*. When the pregnant woman could not deliver baby and it took time to deliver baby, they think it is because the pregnant woman had sin as the pregnant woman had sworn her husband or her parents or her elder brothers or her elder sisters before, thus she was in labour for a long time and she has a difficult birth as she could not deliver baby. They believed that if the pregnant woman's body who is in labour is crossed over by husband of the pregnant woman who is in labour or parents or elder sister or her elder brother of the pregnant woman who is in labour, sin that she had sworn her husband or her parents or her elder sisters or her elder brothers disappears and the pregnant woman will deliver baby easily. Mostly, the pregnant woman's husband or the pregnant woman's mother crossed over the pregnant woman's body to deliver baby easily in case of prolonged labour and in case of a difficult birth. In some cases, although the pregnant woman has no a difficult birth, the pregnant woman's mother or the pregnant woman's husband crossed over the pregnant woman's body for easy birth. Crossing over (*chay kyaw let kayw*) the pregnant woman's body during childbirth was mostly practiced. Among 7 women, Ma Cho, Ma Phyu and Ma Myint told the researcher that their mothers, their husbands crossed over their body during their labour to deliver baby easily and as they said:

Ma Cho told the researcher that when she started labour pain, midwife has not yet come to her home and at that time, a grandmother who is her neighbour asked her (Ma Cho) husband to cross over her (Ma Cho) body for easy birth because her uterine canal re-closed after her uterine canal has already open. The reason why the grandmother asked her (Ma Cho) husband to cross over her (Ma Cho) body was that the grandmother thinks that after her uterine canal has opened and then uterine cannal reclosed is due to she (Ma Cho) has sin that she (Ma Cho) swore her husband before. Ma Cho told that the grandmother believed if her (Ma Cho) husband crossed over her (Ma Cho) body, sin she (Ma Cho) has will disappear, then birth will be easy for her. The followings were as she said:

*"I was in labour pain...come out...oh! saya ma (midwife) has not come yet, my husband crossed over me. Older people asked my husband to cross over my*

*body. When I got the first pregnancy, I swore my husband very much and my husband did not have to cross over me. In this baby, my husband had to cross over my body. The wife of Phoe ba saw (a grandmother who is her neighbour) let my husband crossed over me. She asked my husband to cross over my body, if my husband does not cross over my body, I won't deliver baby. After baby has come out, baby re-entered inside. After baby has come out, baby re-entered inside is that after uterine canal has opened, uterine canal re-closed. Yes, at that time, the wife of phoe ba saw said that she thinks I have sin. Then she asked my husband to cross over my body. My husband crossed over my body for three times. I had to apologize to my husband as if I have sin I swore you, forgive me. My husband said me that I forgive you and deliver baby easily”*

*“My husband crossed over my body because I swore my husband when I got pregnancy. If my husband crosses over my body, when I apologize to my husband, it is like sin that I swore my husband disappears. If sin that I swore my husband disappear, it is like birth is easy. Older people asked my husband to cross over my body. After my husband has crossed over my body, it did not take time for long. Saya ma (midwife) also arrived and I delivered baby. I believe in this baby that if the pregnant woman who is in labour is crossed over, birth is easy. Because my husband did not have to cross over me in previous pregnancy and in this baby, he had to cross over my body...after he crossed over my body, I did not have to feel labour pain for long that much...baby was delivered”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Phyu also told the researcher that while she was in labour, older people asked her husband to cross over her body for easy birth because older people believed that if she has sin that she swore her husband before, birth will be difficult for her and when her husband did crossing over her body, sin she had will disappear and birth will be easy for her. Thus, older people asked her husband to cross over her body for easy birth and as she said:

*“My husband crossed over (chay kyaw let kyaw) my body while I was in labour. My husband was laughing when he crossed on my body. I said my husband not to laugh, and to say forgive me because people said that if wife swore on her husband, giving birth may be difficult. That's why older people asked my husband to cross over*

*my body. Crossing over the pregnant woman's body by husband is to disappear sin. Sometimes, there will be times that I swore on my husband. Then sin that I have disappears when my husband crossed over my body. My husband said me that he forgives me. Older people beside me asked my husband to cross over on my body. My husband was crossing over on my abdomen. That is their (older people) beliefs that if sin I have disappears, giving birth will be easy"*

*(Ma Phyu, 28-years-old, one child)*

Ma Myint also told the researcher that although she has no a difficultl birth her mother crossed over her body for easy birth during labour because her mother worried for her and as she said:

*"During labour, my mother fed me yay mum (water over which mantras have been recited for therapeutic effect) to free from danger. To free from danger is to deliver baby easily. Then if some who could not deliver baby, parents are crossing (chay kyaw let kyaw) over the pregnant woman who is in labour to deliver baby easily. I was also crossed by my mother to deliver baby easily and smoothly. I had no difficulty in childbirth. During childbirth, my mother crossed over my body because she worried. I believe that if the pregnant woman who is in labour is crossed, birth is easy because my mother told me that if the pregnant woman is crossed during labour, birth is easy. After crossing, amniotic sac ruptured and immediately I delivered baby when I squeezed. My mother fed me yay mum first and then my mother crossed me to deliver baby easily during labour"*

*(Ma Myint, 29-years-old, 2 children)*

As a key informant, an auxiliary midwife, 49 years old, told the researcher her experiences regarding crossing over the pregnant woman's body during childbirth. She told that she has seen most people do crossing over the pregnant woman's body during childbirth for easy birth when the pregnant woman was in labour for a little bit long (in case of prolonged labour) and as she said:

*"When the pregnant woman is in labour for a little bit long, they (older people, neighbours and the pregnant woman's mother or mother-in-law) say that pregnant woman is in labour for a long time, how is happening and this and that. As our (auxiliary midwife) view, although we know that she has not delivered baby because it is not time yet to deliver baby and she has not delivered yet baby because*

*uterine canal has not yet opened. They will do various ways of their cultural beliefs and practices. They say that you (pregnant woman) could not deliver baby because you have sin and you lie down quickly and they ask the pregnant woman's husband to cross over the pregnant woman's body. They ask the pregnant woman's parents too to cross over the pregnant woman's body. If husband or parents crosses over the pregnant woman's body, it is like sin that the pregnant woman has disappear. If the pregnant woman's sin disappears, it is like birth will be easy. I have seen most people do chay kyaw let kyaw (crossing over the pregnant woman's body). Only when it takes time to deliver baby, chay kyaw let kyaw is done"*

*(Auxiliary midwife, a key informant)*

As a key informant, midwife, 29 years old, told the researcher her experiences regarding crossing over the pregnant woman's body during labour. She told that she has seen five pregnant women among ten pregnant women who are in labour are crossed over by their husbands or their mothers for easy birth and she said:

*"I have seen that five pregnant women among ten pregnant women who are in labour are crossed over. The pregnant woman's waist is crossed over. When they cross over, they had to cross over the pregnant woman's body for three times. Her mother or her husband crosses over the pregnant woman's body who is in labour. I cannot say when they do like that, how to say that? They have their own beliefs"*

*"For example: if I say my mother as I got angry with my mother, I apologize to mother, forgive me, right? Here is also like that. Perhaps the pregnant woman will swear her husband. As wife re-apologizes to her husband by saying husband forgive me during labour, husband cross over her wife's waist by saying I forgive you if you have sin. If they cross over the pregnant woman's body, the pregnant woman is free from sin. If the pregnant woman is free from sin, it is like birth is easy. That is they have their own beliefs"*

*(Midwife, a key informant)*

In addition, the midwife told the researcher that in which situation they did *chay kyaw let kyaw*. She told that when she checks woman's uterine canal, uterine canal has opened but it took time a little to deliver baby, at that time the pregnant woman's husband or the pregnant woman's mother crossed over the pregnant

woman's body for easy birth and sometimes they crossed over the pregnant woman before she arrived to the pregnant woman's house and sometimes they crossed over the pregnant woman's body in front of her. As she said:

*“When I check woman's uterine canal, uterine canal has already opened. But baby has not been delivered and it took time a little. At that time, they do chay kyaw let kyaw (crossing over). They are crossing over the pregnant woman's body themselves. Sometimes, before I arrived to their home, they have crossed over the pregnant woman's body, ha ha ha. If they have not crossed over at all and also the baby has not been delivered yet, they cross over the pregnant woman's body in front of me. If they have crossed over, father has been asked to cross over and also mother has been asked to cross over their pregnant woman's body. The voice appears like that”*

*(Midwife, a key informant)*

### **Pouring water to *shin kee* during labour pain: for easy birth**

Pouring water to *shin kee* (who is *Nat* and is looking after the house or the village and *Nat* is a general term for all spirits in Myanmar) during labour pain is apologizing to *shin kee* to look after the pregnant woman who is in labour to deliver baby easily. The reason of pouring water to *shin kee* is to deliver baby easily. When the pregnant woman started labour pain, the pregnant woman's mother-in-law or older people or neighbours who came and watched the pregnant woman who was in labour want the pregnant woman to deliver baby easily and smoothly whether the pregnant woman who was in labour has difficult birth or not. Then, the pregnant woman's mother-in-law or older people or neighbours take a cup of water and a candle which is used by some and which is not used by some and they go down onto the ground where it is in front of the pregnant woman's house and then, they invited *shin kee* who is looking after the village and who stays in *shin kee eei* (*Nat*'s house which is made up of bricks and roofed by tin plate under the cashew nut trees and where it is outside of the village). Then, they poured water onto the ground by saying as *phoe phoe shin kee* (grandfather *Nat*), look after the pregnant woman who is in labor to deliver baby easily. This is called pouring water to *shin kee*, which means apologizing to *shin kee*. They believed that if they poured water to *shin kee*, the pregnant woman who was in labour will deliver baby easily. Some poured water to *shin kee* (who is *Nat* and stays inside the coconut which is hung at the base of the pillar where it is at the corner of the

house and who is looking after the house) for easy birth. This is also called pouring water to *shin kee* (means apologizing to *shin kee*) for easy birth. They poured water at the base of the pillar which has hung coconut and that pillar is in the corner of the house. In some cases, the pregnant woman who is in labour herself pour water to *shin kee (Nat)* at the base of the pillar (*Nat* who stays inside the coconut which is hung at the base of the pillar in the corner of the house and who is looking after the house) for easy birth. Pouring water to *shin kee* is mostly practiced during labour pain.

If water was poured to *shin kee* (who is *Nat* and is looking after the village) during labour pain, *shin kee phyay* (feeding food to *Nat* means giving food gift to *Nat*) was done after 3 days or 7 days of delivery baby or within 45 days of delivery baby or after 45 days of delivery baby and if water was poured to *shin kee* at the base of the pillar (means if *Nat* who is looking after the house and stays inside the coconut which is hung at the base of the pillar where it is at the corner of the house) *ohnn thee swe* (a new coconut) has to be changed after delivery of baby. The researcher will explain about of *shin kee phyay* and changing a new coconut in the practices of the postpartum period regarding home birth.

Among 7 women, Ma Cho, Ma Phyu, Ma Myint and Ma Yu told the researcher that when they were in labour pain, water was poured to *shin kee* for easy birth. Ma Phyu, Ma Myint and Ma Yu told that when they were in labour pain, their mother-in-laws or older people poured water to *shin kee* (who is *Nat* and is looking after the village) but Ma Cho told that she poured water to *shin kee* who is looking after the house herself when she was in labour pain. The followings were as they explained:

*“Since I started labour pain, I poured water to shin kee. Shin kee is not from village (shin kee who is not looking after village). Shin kee is from my home (shin kee who is looking after my house). When I started labour pain, at the afternoon, I poured water to shin kee. After I carried a cup of water, I entered inside the house near to the pillar that coconut is hung. I said to shin kee that phoe (grandfather who is Nat), phoe phoe (grandfather who is Nat) is seeing that myee (granddaughter is Ma Cho) is in labour pain, do not let me feel painful for a long time and myee (granddaughter) feels debilitating and I have no energy and phoe phoe (grandfather who is Nat) helps me to deliver baby easily. After saying like that, a cup of water was poured at the base of the pillar that coconut is hung. This is called pouring water to*

*shin kee (who is Nat and is looking after the house). In my mind, I felt like birth is a little bit easy when I poured water to shin kee who is looking after the house. In this part (which is the lower part of the village), everybody informs to shin kee (who is Nat and is looking after the house) when they started labour pain. When shin kee (who is Nat and looking after the home) is informed, I can deliver baby easily. Informing to shin kee (Nat who is looking after the home) is that phoe (grandfather who is Nat), myee (granddaughter) is in labour and let me deliver baby easily, phoe phoe (grandfather who is Nat) is also seeing me that I am in labour, do not leave me feel painful for a long time, do not make me as I need to go to hospital phoe phoe (grandfather who is Nat) and after delivery baby, I will give you pwe (a new coconut). In fact, a new coconut has to be changed after delivery of baby”*

*(Ma Cho, 33-years-old, 4 children)*

*“Water was poured to shin kee in front of the house while I was in labour with my second baby. Pouring water to shin kee is for easy birth. Older people poured water to shin kee to deliver baby easily for me”*

*(Ma Myint, 29-years-old, 2 children)*

*“Pouring water to shin kee is that labour pain started and when labour pain becomes painful, water is poured to shin kee. In every child, water is poured to shin kee. Water has to be poured to shin kee whether birth is difficult or easy. When I started labour pain, my mother-in-law apologized to shin kee as shin kee shin myat (Nat is called as respectfully), look after the pregnant woman who is in labour to deliver baby easily and then she poured water to shin kee (who is Nat and is looking after the village). In front of the house, my mother-in-law poured water to shin kee by taking a cup of water and lighting a candle”*

*(Ma Yu, 36 years-old, 5 children)*

Ma Phyu, she is an informant for the study but, she is not a native of the study village. She does not know well about pouring water to *shin kee*. She told the researcher that she thinks pouring water to *shin kee* is that apologizing to *Nat* who is looking after house and the village and as she said:

*“Water was poured to shin kee while I was in labour. People say that if water was poured to shin kee during labour, after delivery it is needed to do shin kee phyay. While I was in labour, I did not know who poured water to shin kee. Older*

*people were pouring water. After delivery of baby, an old woman came and did shin kee phya (feeding food to Nat). I did not know where they poured water to shin kee. Is it here? I think it is the entrance of the ladder.....I did not hear what are they saying to shin kee when they poured water because I was in labour. I just heard that pour water to shin kee. Pouring water to shin kee is the country's custom and village's custom. I think pouring water to shin kee is that Nat who is looking after the house and the village are apologized. I also do not understand. Although my native village is not city, I see only modern way. So I do not understand that. I here delivered baby at home. At my native village, all women deliver baby at hospital"*

*(Ma Phyu, 28-years-old, one child)*

A key informant, midwife told the researcher her experiences regarding pouring water to *shin kee* during labour when she went to the patient in maternity house. She told that if the pregnant woman is in labour for a little bit long (in case of prolonged labour), they (neighbours, the pregnant woman's family members and older people) worship all *Nats* as much as they know and they pour water to the pillar which has *Nat* who is looking after the house and also they pour water on the ground. They called that practice as pouring water to *shin kee* but she told that she does not exactly know what are they doing and as she said:

*"Some come and call me when labour pain is getting so painful. Some come and call me when they started labour pain. Some, they are in labour for long time and then baby has not been delivered yet. At that time, they worship all. They worship all Nats (Nat is a general term for all spirits in Myanmar) as much as they know. Outside the house, I do not exactly know what they worship. They are doing with candle, water, rice and dried fish. I do not exactly know that what they are worshiping. They do during labour pain"*

*"Labour pain is that every woman has to feel labour pain. But they are not like that. If they started labour pain at six o' clock in the morning, they want to deliver baby at six o' clock in the evening. Everyone wants to deliver like that. How can I say it? They do not know that is false labour pain or true labour pain. Some do not know that is lay nar (flatulence: abdomen is painful is due to air if there is air in the abdomen), or that is what pain? Then since they started labour pain in the morning, they come and call me at around 4:00pm in the evening. They said that the pregnant*

*woman started labour since morning and baby has not been delivered yet. Water is poured at the base of the pillar which has Nat of the house. This is called pouring water to shin kee. They pour water at the base of the pillar on the house and also they pour water on the ground. I also do not know exactly what they are doing. They are saying as if there is a mistake, forgive us”*

In addition, the midwife told the researcher her opinion regarding pouring water to *shin kee* during labour and as she said:

*“Most people do pouring water to shin kee (Nat). Among ten houses, eight houses do pouring water to shin kee. I think that saying to shin kee as if there are mistakes, forgive us is to deliver baby easily. Yes, they apologize to Nat who is looking after the house to deliver baby easily”*

*(Midwife, a key informant)*

A key informant, an auxiliary midwife also told the researcher her experiences regarding pouring water to *shin kee* during labour when she went to the patient in maternity house. She told that when she went to the patient in maternity house, they pour water to *shin kee* for easy birth whether the patient in maternity has a difficult birth or not and pouring water to *shin kee* is their custom and as she said:

*“When the pregnant woman started labour pain, and when they came and called me, I went. According to their custom, they poured water to shin kee (Nat who is looking after the village) for delivery baby easily. Pouring water to shin kee is that they apologize to shin kee. I also have not poured water to shin kee. I saw they are pouring water to shin kee. They pour water to shin kee when the pregnant women started labour pain. Some pour water to shin kee when I arrived to their house. Pouring water to shin kee is their customs whether birth is difficult or not”*

*(Auxiliary midwife, a key informant)*

### **Opening the doors and windows during childbirth: for easy birth**

During childbirth, the pregnant women's mothers opened the doors, windows and opened the doors of cupboard for easy birth. That belief is a very symbolic belief and also that is an ancient custom. Older people believed that if the doors and windows are open during childbirth, the pregnant woman's vagina will be opening, then the pregnant woman can deliver baby easily. Thus, the pregnant women's mothers opened the doors and windows while their daughter is giving birth

for easy birth. Opening the doors and windows during childbirth was occasionally practiced.

There was only one Ma Mya who told the researcher that she did not know and notice that doors and windows have to be opened during childbirth for easy birth. She told the researcher that she knew in the last baby as the doors and windows have to be opened during childbirth for easy birth because her mother opened the doors and windows during her childbirth for easy birth and as she said:

*“While I was in labour, my mother opened the doors and the windows. That is to open vagina. Yes, to open woman’s vagina and to deliver baby easily. In previous children, I did not notice. In this baby, I knew when my mother told me. After childbirth, my mother told me. She (her mother) told me at tomorrow morning as she opened all the doors and windows. At that time, I knew that the doors and windows have to be opened when baby is delivered”*

*(Ma Mya, 29-years-old, 3 children)*

Then, the researcher made informal conversation with Ma Mya’s mother to get rich information regarding with opening doors and windows during her daughter childbirth. Ma Mya’s mother’s said that:

*“When my daughter delivered baby, I opened the doors of cupboard, the doors and the windows to deliver baby easily. Opening the doors and windows is to open woman’s vagina and for easy birth. That is ancient beliefs”*

*(Informal conversation with Ma Mya’s mother)*

**Wearing of *hta mein* (nether garment worn by Myanmar women) of mother or the other woman who has delivered baby easily by the pregnant woman during childbirth or during pregnancy and childbirth: for easy birth**

The reason why the pregnant woman wears *hta mein* (nether garment worn by Myanmar women) of her mother who delivered baby easily or *hta mein* of the other woman who delivered baby easily during childbirth or during pregnancy and childbirth is to deliver baby easily for her. That belief is a very symbolic belief. Most rural home birth women wore *hta mein* of their mothers who delivered baby easily during childbirth for easy birth as their mothers or their neighbours let them wear when they started labour pain. Older people and rural home birth women believed that during childbirth, if the pregnant woman wears *hta mein* (nether garment worn by

Myanmar women) of her mother who delivered baby easily or *hta mein* of the other woman who delivered baby easily, the pregnant woman who wears *hta mein* of her mother or *hta mein* of the other woman who delivered baby delivers baby easily too. Therefore, when the pregnant woman started labour pain, the pregnant woman wore *hta mein* of her mother who delivered baby easily for easy birth as her mother let her wear or her neighbours let her wear. Some rural home birth women wore *hta mein* of her mother-in-law who delivered baby easily during pregnancy and also during childbirth for easy birth. Wearing of *hta mein* (nether garment worn by Myanmar women) of mother or the other woman who have delivered baby easily by the pregnant woman during childbirth or during pregnancy and childbirth was moderately practiced.

Among 7 women, Ma Phyu and Ma Myint wore *hta mein* of their mothers as their neighbours or their mothers let them wear for easy birth and as they said:

*“Neighbours who came and watched me during labour let me wear my mother’s hta mein (nether garment worn by Myanmar women). I was also following as they let me wear my mother’s hta mein for delivery baby easily. They let me wear my mother’s hta mein is to be like sin I swore on my parents disappears and like I am free from harm”*

*(Ma Phyu, 28-years-old, one child)*

*“I wore my mother’s hta mein (nether garment worn by Myanmar women) while I was in labour. After delivery of baby, that hta mein was thrown because hta mein stained with blood. When my mother delivered my younger brothers, I had seen that my mother wore hta mein of a woman who delivered baby easily. My mother let me wear her hta mein when I started labour pain. Older people saying that if a pregnant woman wears a woman’s hta mein delivered easily baby, she also delivers baby easily. Wearing hta mein of a woman who delivered easily baby has been handed down generation by generation. I also believed if a pregnant woman wears a woman’s hta mein delivered easily baby, she also delivers baby easily because the other women are also wearing a woman’s hta mein delivered easily baby”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Mee, a key informant told the researcher that she also wore her mother's *hta mein* in every child for easy birth when she started labour pain as her mother let her wear and as she said:

*“I wore my mother’s hta mein. I wore in every child. My mother let me wear. My mother said me to wear her hta mein, if I wear her hta mein, she said she delivered baby easily, I also will deliver baby easily. Since the first baby, my mother let me wear her hta mein. I still have my mother’s hta mein until now. I wore my mother’s hta mein in every child. When I am going to deliver baby, I wore my mother’s hta mein. I wore my mother hta mein to delivery baby easily when I went into labour. During pregnancy period, I did not wear. When baby is going to be delivered, I wore my mother’s hta mein. My mother gave me her hta mein by saying as wear my hta mein when baby is delivered...you will deliver baby easily. That’s why I wore my mother’s hta mein to deliver baby easily”*

*(Ma Mee, 42-years-old, 5 children)*

There was only one Ma Yu, 5 children mother who wore *hta mein* of her mother-in-law during pregnancy and childbirth with the second pregnancy because her neighbours suggested her to wear *hta mein* of a woman who delivered baby easily for easy birth. But, she told the researcher that she did not wear in the rest children's pregnancies because she does not believe that easy birth is not related to wearing *hta mein* of a woman who delivered baby easily and then she told that she has delivered her first baby easily so she thought the next babies will be easily delivered. The following was as she said:

*“Neighbours told me to wear hta mein (nether garment worn by Myanmar women) for easy birth after asking for a woman’s hta mein delivered baby easily. I have never asked for hta mein from the other women who delivered baby easily and then I had never worn. In the second pregnancy, I slept by wearing my mother-in-law’s hta mein at night time. Tomorrow morning, I retake off my mother-in-law’s hta mein. Neighbours told me to wear so I wore my mother-in-law’s hta mein. I asked for my mother-in-law’s hta mein myself and then I wore. Then I wore my mother-in-law’s hta mein during labour. I wore my mother-in-law’s hta mein in only second pregnancy. At the rest children, I wore only my hta mein because I do not believe. I had delivered my first baby easily. I thought that next children will be*

*delivered easily. That's why I did not wear a woman's hta mein delivered baby easily. I think that it is not related to wearing a woman's hta mein delivered baby easily. In the next pregnancies, when I was in labour I did not wear a woman's hta mein delivered baby easily"*

*(Ma Yu, 36-years-old, 5 children)*

### **Religious beliefs to home birth during childbirth**

Some rural home birth women did not concentrate on God (image of Buddha) at all during labour pain due to labour pain and they concentrated on only labour pain. It was confirmed by:

*"While I was in labour, I wished to God as God, God. My concentration did not reach to God exactly. I say openly. My mind did not concentrate on God and I was trembling because I felt painful. I concentrated on only labour pain"*

*(Ma Phyu, 28-years-old, one child)*

*"During labour, I did not concentrate on God. I concentrated on only labour pain"*

*(Ma Myint, 29-years-old, 2 children)*

Some rural home birth women said that they did not have time to concentrate on God (image of Buddha) during labour pain because they felt that abdominal was painful. It was confirmed by:

*"When I delivered baby, there is no time to pray to God (image of Buddha) sister because I felt that abdomen is painful"*

*(Ma Moe, 22-years-old, 2 children)*

Some rural home birth women could not concentrate on God (image of Buddha) while labour pain was very painful but they concentrated on God when they felt a little bit relieved from labour pain. However, they concentrated on God differently in each. For example, when the pregnant woman felt a little bit relieved from labour pain, she concentrated on God, and thought that if she will die during childbirth, God also cannot save her and if she dies, it is her fate and if she did not die during childbirth, it is her fate too or when the pregnant woman felt a little bit relieved from labour pain, she concentrated on God to look after her to deliver easily baby. It was confirmed by:

*“During labour pain was very painful, I could not concentrate on God (image of Buddha). When I felt that labour pain was a little bit painful, I thought. How I thought was that now, if today is that I will have to die, God also cannot save me. Also God has to die. Yes, I thought like that. If I die, it is my fate and if I survive, it is my fate. Yes, I thought like that”*

*(Ma Cho, 33-years-old, 4 children)*

*“While I was in labour, I concentrated on only labour pain. I could not concentrate on God. When I started labour pain, I concentrated on labour pain. When I felt a little bit relieved from labour pain, I prayed to God as Ashin Pha Yarrn (image of Buddha) look after me to deliver baby easily”*

*(Ma Yu, 36- years-old, 5 children)*

Ma Mya told the researcher that if she had postpartum haemorrhage during childbirth, God (image of Buddha) also cannot save her and she perceived that's her fate and as she said:

*“When I deliver baby, if something happens, God also cannot save me. When I deliver baby, if I occur like postpartum haemorrhage, God cannot save me. That's fate. Yes, it is my fate. If I have fate, if I will happen like that at that time, it is my fate”*

*(Ma Mya, 29-years-old, 3 children)*

There was only one woman who told the researcher that she did not concentrate on God at all during childbirth, but she had prayed to God during pregnancy to deliver baby easily at home as no need to go to anywhere (e.g; hospital). It was confirmed by

*“During childbirth, I did not concentrate to God at all. During pregnancy period, I have prayed to God as have an easy birth to deliver baby at home only as I no need to go to anywhere (e.g; hospital). That's all from my mind prayed at God”*

*(Ma Sandar, 26-years-old, 3 children)*

#### **4.6.3 Cultural beliefs and practices during postpartum period regarding home birth**

In the study area, postpartum period is called *mee dwin*. The duration of postpartum period is 45 days. There were 12 reported cultural beliefs performed by

rural home birth women during postpartum period such as food restriction, sex abstinence, avoidance of cold and wind, resting, avoidance of lifting heavy objects, taking a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and it's fruits are edible fruits in bunches) with cold water), to fall baby's umbilical cord quickly and also for umbilical wound healing: putting gravy of thin pepper soup, saliva, ash, baked brick's powder, *say tot phat* and mat's ash and *je thar kho* (like small anthill which can be seen at the walls of home) into baby's umbilicus and singeing the postpartum mother's palm and sole at the fire, *shin ngway khan* (induced perspiration), massage the postpartum mother's body with hot brick, *shin kee phyay*, staying beside the fire, and beliefs function of uterus: massaging abdomen with hot brick and pushing uterus up with hot brick.

Food restriction, sex abstinence, avoidance of cold and wind, resting, avoidance of lifting heavy objects, taking a bath *shin yay*, and to fall baby's umbilical cord quickly and also for umbilical wound healing: putting gravy of thin pepper soup, saliva, *je thar kho* (like small anthill which can be seen at the walls of home), ash, baked brick's powder, *say tot phat* and mat's ash into baby's umbilicus and singeing the postpartum mother's palm and sole at the fire were commonly practiced by rural home birth women during postpartum period. *Shin ngway khan*, massage the postpartum mother's body with hot brick, *shin kee phyay*, staying beside the fire, and beliefs function of uterus were mostly practiced by rural home birth women during postpartum period.

### **Food restriction**

During postpartum period, most rural home birth women consumed fried chicken, fried water convolvulus, thin water convolvulus soup, thin pepper soup, fried egg, fried cabbage, fried long bean, fried cauliflower, chicken's giblet and boiled egg as being suitable food to consume for the postpartum mother. The researcher will explain some cultural explanation of food beliefs hold by rural home birth women as being suitable food to consume for the postpartum mother during the postpartum period such as thin pepper soup, fried water convolvulus, thin water convolvulus soup, fried chicken, and chicken's giblet.

**Table 4.2 List of being suitable food to consume for the postpartum mother**

Food	Cultural explanation
Thin pepper soup	To increase breast milk production, to get heat in body and for involution of uterus
Fried water convolvulus	To increase breast milk production, to get energy for the postpartum mother
Thin water convolvulus soup	To increase breast milk production
Fried chicken	To increase breast milk production, it is good for energy for the postpartum mother
Chicken's gilet	For involution of <i>je</i> (uterus)

- **Thin pepper soup**

Most rural home birth women drank thin pepper soup during postpartum period to increase breast milk production. Some rural home birth women drank thin pepper soup which was cooked with chicken to become chicken soup (chicken soup is cooked by putting pepper into the chicken soup) to increase breast milk production. But, they drank thin pepper soup with the duration varying from about 2 days to 45 days. In addition, some rural home birth women drank thin pepper soup to get heat in body also and to flow lochia (the material eliminated from the uterus through the vagian after the completion of labour) and for involution of uterus as well because they believed that pepper is hot and pepper has hot action. But, there was only one woman who did not drink thin pepper soup by putting a lot of pepper in thin pepper soup because she was worried that she will suffer from hypertension if she drank thin pepper soup with a lot of pepper and but she drank thin pepper soup for about ten days by reducing amount of pepper in thin pepper soup.

Ma Thein, a key informant told the researcher that she drank thin pepper soup to increase breast milk production during postpartum period. Then, she told that pepper is hot and if the postpartum mother drinks thin pepper soup, *je yay* (lochia) also flows and aslo *je* (uterus) is involutinal and as she said:

*“Pepper in the thin pepper soup has hot action, right. Pepper is hot. If the postpartum mother drinks thin pepper soup as nice and hot, je yay (lochia) flows. Je (uterus) is involutinal. I drank thin pepper soup to increase breast milk production”*

*(Ma Thein, 26-years-old, 2 children)*

Ma Moe, and Ma Myint, told the researcher that they drank thin pepper soup during postpartum period to increase breast milk production and as they explained:

*“I drank thin pepper soup to increase a lot of milk production from the breasts. If the postpartum mother drinks thin pepper soup, a lot of milk comes out. The postpartum mother cannot stay without drinking thin pepper soup. The postpartum mother has to drink thin pepper soup”*

*(Ma Moe, 22-years-old, 2 children)*

*“Drinking thin pepper soup is to increase breast milk production. I did not drink thin pepper soup for forty five days. Thin pepper soup was drunk for about thirty days after delivery of baby”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Yu, she drank thin pepper soup to increase breast milk production and also to get heat in body. But, she drank thin pepper soup which was cooked with chicken to become chicken soup and as she said:

*“Older people say that if the postpartum mother drinks thin pepper soup, breast milk production increases. I drank thin pepper soup to increase breast milk production and to get heat in body also. I drank chicken soup with a little pepper. If the postpartum mother drinks chicken soup with a little pepper, breast milk production increases. I drank chicken soup with a little pepper to increase a lot of milk production from the breasts for forty five days”*

*(Ma Yu, 36-years-old, 5 children)*

Some rural home birth women drank thin pepper soup to increase breast milk production. However, they had to drink thin pepper soup for only two days because they felt dizzy and found confusing after three days of delivery baby. So the midwife let them stop drinking thin pepper soup. It was confirmed by

*“I drank ovaltine and also I drank thin pepper soup to increase milk production from the breasts. Mee kan the (postpartum mother) has to drink thin pepper soup. Every mee kan the (postpartum mother) drinks thin pepper soup. Yes, the postpartum mothers also who delivered baby at hospital and when they were discharged from hospital, they drink thin pepper soup at home. I believe that if the*

*postpartum mother drinks thin pepper soup, breast milk production increases. But, I drank thin pepper soup for only two days because I felt dizzy and found confusing after three days of delivery. That's why the midwife told me not to drink thin pepper soup. So I did not drink thin pepper soup continuously.*

*(Ma Phyu, 28-years-old, one child)*

There was only one woman who told the researcher that she did not drink a lot of thin pepper soup during postpartum period and if the postpartum mother drinks thin pepper soup with a lot of pepper, the postpartum mother may suffer from hypertension. But she drank thin pepper soup for about ten days. It was confirmed by:

*"I did not drink a lot of thin pepper soup because my breasts have milk. I drank thin pepper soup but I drank a little. I did not drink thin pepper soup for forty five days. I drank thin pepper soup for about ten days. If the postpartum mother drinks thin pepper soup with a lot of pepper, she suffers from hypertension. That's why I dared not drink thin pepper soup with a lot of pepper. I drank thin pepper soup on alternate days. I drank thin pepper soup by reducing amount of pepper when thin pepper soup was cooked"*

*(Ma Cho, 33-years-old, 4 children)*

Midwife, a key informant told the researcher her experiences regarding with drinking thin pepper soup by rural home birth women during postpartum period. She told that in the past, the postpartum mothers drank thin pepper soup very much and the postpartum mother had to suffer from hypertension. Hence, she told the postpartum mothers not to drink a lot of thin pepper soup, to stop drinking thin pepper soup as the postpartum mother suffered from hypertension due to drinking thin pepper soup and to drink ovaltine to increase breast milk production. So now, they drink thin pepper soup by reducing amount of pepper in thin pepper soup. But, midwife told the researcher that every postpartum drinks thin pepper soup to increase breast milk production until now and as midwife said:

*"In the past, the postpartum mothers drank thin pepper soup very much. Then blood pressure is high very much. If the postpartum mother's blood was being high, when I went and opened pot curry, they cooked thin pepper soup by putting a lot of pepper. Then I had to say them not to drink a lot of thin pepper soup and blood pressure is being high. I had to say them to drink a lot of ovaltine and to drink a lot of*

*condensed milk and then breast milk production will increase. Now, putting amount of pepper into the thin pepper soup is getting less. Every postpartum mother drinks thin pepper soup to increase breast milk production. Mostly they eat chicken during mee dwin (postpartum period). Most postpartum mothers eat chicken. Then they drink thin pepper soup. I have to let them stop drinking thin pepper soup because they got hypertension. At about first day, the second day after delivery of baby, it is indiscernible much that blood pressure is being high. After about the third day of delivery, blood pressure is 140/90mmHg, or 150/90mmHg or 150/100mmHg like that when I took the postpartum mother's blood pressure. It is because they drank thin pepper soup. Blood pressure is not high in all postpartum mothers. I found that about three postpartum mothers got hypertension among ten postpartum mothers. If the postpartum mother has hypertension previously, blood pressure is getting high when she drank thin pepper soup during mee dwin (postpartum period)''*

In addition, midwife told the researcher her opinion regarding drinking thin pepper soup by rural home birth women during postpartum period. She told that drinking thin pepper soup does not make to increase breast milk production and if they drink thin pepper soup, they felt thirsty and then, they drink water and when they drink water, breast milk production increases. Midwife told the researcher that although she told them not to drink thin pepper soup, rural home birth women are still drinking thin pepper soup until now and as she said:

*''In my opinion, drinking thin pepper soup does not make to increase milk production from the breasts. If thin pepper soup is drunk, it is so thirsty. They drink thin pepper soup to increase breast milk production. I will have to say that they drink thin pepper soup to increase breast milk production because they do not understand. In fact, if thin pepper soup is drunk, breast milk production does not increase. If thin pepper soup is drunk, it is thirsty. When the postpartum mother is thirsty, she drinks water. When she drinks water breast milk production increases, ha ha ha. I also told them not to drink thin pepper soup. I could not be able. But until now they are still drinking thin pepper soup continuously''*

*(Midwife, a key informant)*

There was only one Ma Sandar who told the researcher that she drank warm water to increase breast milk production while the other home birth women drank thin pepper soup to increase breast milk production and as she explained:

*“To increase a lot of milk production from the breasts, older people let me drink warm water. I, to increase breast milk production, I drank warm water during postpartum period”*

*(Ma Sandar, 26-years-old, 3 children)*

- **Fried water convolvulus**

Some rural home birth women ate fried water convolvulus during postpartum period to increase breast milk production. It was confirmed by

*“In vegetables, I ate fried water convolvulus and then thin centella asiatica soup with pepper. That’s all I ate. If the postpartum mother eats fried water convolvulus, milk production increases”*

*(Ma Cho, 33-years-old, 4 children)*

*“Older people told me to eat fried water convolvulus and to drink thin water convolvulus soup to increase breast milk production. That’s why I ate fried water convolvulus and drank thin water convolvulus soup. I believe that if fried water convolvulus is eaten and thin water convolvulus soup is drunk, breast milk production increases. Breast milk comes out very much”*

*(Ma Mya, 29-years-old, 3 children)*

However, some rural home birth women ate fried water convolvulus to get energy for the postpartum moter. It was confirmed by

*“At the postpartum period, I ate fried cabbage and fried water convolvulus to get energy”*

*(Ma Moe, 22-years-old, 2 children)*

- **Thin water convolvulus soup**

There was only one Ma Mya who drank thin pepper soup during postpartum period to increase breast milk production. She believed that if the postpartum mothr drinks thin water convolvulus, breast milk production increases and as she said:

*“Older people told me to eat fried water convolvulus and to drink thin water convolvulus soup to increase breast milk production. That’s why I ate fried*

*water convolvulus and drank thin water convolvulus soup. I believe that if fried water convolvulus is eaten and thin water convolvulus soup is drunk, breast milk production increases. Breast milk comes out very much”*

*(Ma Mya, 29-years-old, 3 children)*

- **Fried chicken**

Some rural home birth women told the researcher that if the postpartum mother eats fried chicken, the postpartum mother gets energy but some rural home birth women told the researcher that if the postpartum mother eats fried chicken, breast milk production increases. It was confirmed by

*“During postpartum period, if the postpartum mother eats fried chicken, she gets energy”*

*(Ma Cho, 33-years-old, 4 children)*

*“Older people say that if the postpartum mother drinks warm water and eats fried chicken, breast milk production increases”.*

*(Ma Snadar, 26-years-old, 3 children)*

- **Chicken’s giblets**

There was only one woman who ate fried chicken’s giblets during postpartum period for involution of uterus because she believed that if the postpartum mother eats chicken’s giblets, it helps for involution of uterus. It was confirmed by

*“I ate fried chicken’s giblets for involution of je (uterus)”*

*(Ma Cho, 33-years-old, 4 children)*

The reasons of food restrictions are not to suffer from hypertension, not to get itchy woman’s vagina, not to get dizzy, not to get a headache, not to suffer from *arr sayt* (cannot open mouth like lockjaw), not to get *mee yat chay luu* (postnatal diarrhea) in mother and also baby, not to feel hot in the abdomen of the mother and baby, not to get cold in mother and not to get stiffness in the neck or back of mother. Foods included in food restrictions are roselle, *pa lar tue* (kind of mackerel), chilli, fish, pork and pork’s fat, cocke and prawn, cococunt milk, watermelon and eggplant. This study found that older people and mother-in-law are the most influential rural home birth women to suggest food restrictions practices during postpartum period.

The followings were some cultural explanation of foods included in food restriction during postpartum period hold by rural home birth women.

**Table 4.3 List of some cultural explanation of foods included in food restriction during postpartum period hold by rural home birth women**

<b>Food</b>	<b>Cultural explanation</b>
Roselle	Can cause hypertension, vagina can be itchy, the postpartum's mouth cannot be opened like lockjaw after eating roselle
<i>Pa lar tue</i> (kind of mackerel)	Can cause hypertension, dizziness and headache, vagina can be itchy
Chilli	Can cause <i>mee yat chay luu</i> (postnatal diarrhea) in mother, and also baby can get diarrhea via mother's breast milk
Eggplant	Woman's vagina can be itchy and woman can suffer from stiffness in the neck or back
Prawn	Woman's vagina can be itchy
Pork	Can cause hypertension
Pork's fat	Postpartum mother can get diarrhoea
Rays	Woman's vagina can be itchy
Coconut milk	Postpartum mother can suffer from hypertension
Watermelon	Postpartum mother can get cold
Cockle	Woman's vagina can be itchy

- **Roselle**

The beliefs hold by most rural home birth women regarding eating roselle were that if the postpartum mother eats roselle, she can suffer from hypertension because eating roselle can cause hypertension. In addition, some rural home birth woman believed that the postpartum mother may die from hypertension immediately if blood pressure is getting high suddenly due to eating roselle. Thus, they avoided eating roselle during postpartum period. It was confirmed by

Ma Mya, Ma Yu and Ma Sandar told the researcher that the postpartum mother cannot eat roselle and if the postpartum mother eats roselle, blood pressure will be getting high and she can suffer from hypertension. Thus they avoided eating roselle during postpartum period and as they explained:

*“There are many foods that the postpartum mother cannot eat. The postpartum mother cannot eat roselle. Eating roselle can cause hypertension”*

*(Ma Mya, 29-years-old, 3 children)*

*“The postpartum mother cannot eat roselle. If she eats it, she can suffer from hypertension”*

*(Ma Yu, 36-years-old, 5 children)*

*“During postpartum period, I avoided food as much as I can. I dared not eat variety of food because I was afraid. I avoided eating roselle and pa lar tue (kind of mackerel). After eating roselle and pa lar tue (kind of mackerel), blood pressure can become high.”*

*(Ma Sandar, 26-years-old, 3 children)*

Ma Cho and Ma Myint told the researcher that if the postpartum mother eats roselle, her blood pressure may become high suddenly and then, she may die from hypertension and as they explained:

*“If the postpartum mother eats roselle, she may die immediately. I did not eat roselle. If mee kan the (postpartum mother) eats roselle, she may die after she suffers from hypertension”*

*(Ma Cho, 33-years-old, 4 children)*

*“The postpartum mother cannot eat roselle during postpartum period. If roselle is eaten, the postpartum mother can suffer from mee yat thwe tit (blood pressure will be getting high suddenly). The postpartum mother has to avoid food. Older people say that the postpartum mother cannot eat roselle. Eating roselle can cause mee yat thwe tit. If the postpartum mother’s blood pressure is high suddenly, the postpartum mother may die. That’s why I avoided eating roselle. I was afraid that I would suffer from mee yat thwe tit”*

*(Ma Myint, 29-years-old-2 children)*

Key informants, Ma Thein and Ma Mee told the researcher that they did not eat roselle during postpartum period. They told that eating roselle can cause hypertension so that they avoided eating roselle during postpartum period and if the postpartum mother eats roselle, she will suffer from hypertension and when she suffers from hypertension her face and eyes will become swollen and as they explained:

*“I did not eat roselle and pa lar tue (kind of mackerel) during postpartum period. Oder people say that If the postpartum mother eats roselle, she may suffer from hypertension. When blood pressure is getting high, face and eyes can become swollen”*

*(Ma Thein, 26-years-old- 2 children)*

*“I did not eat pa lar tue (kind of mackerel) and roselle during postpartum period. I am afraid that I will suffer from hypertension”*

*(Ma Mee, 42-years-old- 5 children)*

However, some rural home birth women’s cultural beliefs regarding eating roselle during postpartum period were different from the other rural home birth women’s cultural beliefs. It was confirmed by

Ma Moe told the researcher that if the postpartum mother eats roselle, she can suffer from *arr sayt* (cannot open her mouth like lockjaw) and as she explained:

*“The postpartum mother cannot eat roselle. People say if roselle is eaten by the postpartum mother, the postpartum mother will suffer from arr sayt (cannot open mouth like lockjaw)”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Phyu told the researcher that normally, she eats everything what she wants to eat but she told the researcher that there was a little difference between normal food and food she eats during postpartum period. She told that she avoided eating roselle during postpartum period not to get vagina itchy and as she said:

*“There was a little difference between normal food and food that I ate during postpartum period. Normally, I eat ngapi hpyor (which is made by mixing fish paste into nipa juice acidity), tot zayar (vegetable eaten with ngapi hpyor) and everything. I can eat whatever I like. Then I eat roselle thin soup normally. Now, the postpartum mother cannot eat roselle. When the postpartum mother ate roselle, if the postpartum mother has wound, the wound will be itchy. That’s why I did not eat roselle. During postpartum period, it is needed to avoid eating roselle because the main is that vagin maybe itchy”*

*(Ma Phyu, 28-years-old, one child)*

- ***Pa lar tue (kind of mackerel)***

Most rural home birth women avoided eating *pa lar tue* during postpartum period because they were afraid that they will suffer from hypertension. They said that the postpartum mother cannot eat *pa lar tue* and if the postpartum mother eats *pa lar tue*, she can suffer from hypertension. It was confirmed by

*“Mee kan the (the postpartum mother) cannot eat pa lar tue (kind of mackerel) too, blood pressure can become high”*

*(Ma Cho, 33-years-old, 4 children)*

*“The postpartum mother cannot eat pa lar tue (kind of mackerel) too. Pa lar tue (kind of mackerel) can cause hypertension”*

*(Ma Mya, 29-years-old, 3 children)*

*“During postpartum period, I avoided food as much as I can. I dared not eat variety of food because I was afraid. I avoided eating roselle and pa lar tue (kind of mackerel). After eating roselle and pa lar tue (kind of mackerel), blood pressure can become high.”*

*(Ma Sandar. 26-years-old, 3 children)*

Ma Thein and Ma Mee also told the researcher that during postpartum period they did not eat *pa lar tue* because they were afraid that they will suffer from hypertension and as they said:

*“I did not eat pa la tue (kind of mackerel). Older people say that if the postpartum mother eats pa lar tue (kind of mackekre) during postpartum period, she can suffer from hypertension like eating roselle”*

*(Ma Thein, 26-years-old, 2 children)*

*“I did not eat pa lar tue (kind of mackerel) and roselle during postpartum period. I am afraid that I will suffer from hypertension”*

*(Ma Mee, 42- years-old, 5 children)*

In addition, some rural home birth women said that if the postpartum mother eats *pa lar tue*, she can suffer from hypertension and also she can suffer from dizziness and headache as well. Even at normal period, they could not eat *pa lar tue* because they suffered from hypertension. Thus, they avoided eating *pa lar tue* during postpartum period. It was confirmed by

*“During postpartum period, the postpartum mother cannot eat pa lar tue(kind of mackerel). If she eats it, she can get dizzy and can suffer from a headache and hypertension. Even when I do not have a pregnancy, I could not eat roselle and pa lar tue (kind of mackerel) because I suffered from hypertension. Older people, neighbours and my mother-in-law also told me that the postpartum mother cannot eat roselle and pa lar tue. That’s why I avoided eating roselle and pa lar tue during postpartum period”*

*(Ma Yu, 33-years-old, 5 children)*

However, some rural home birth women told the researcher that if the postpartum mother eats *pa lar tue*, woman’s vagina can be itchy and also she can suffer from headache and as they explained:

*“In fishes, pa lar tue (kind of mackerel) cannot be eaten by the postpartum mother. After eating pa lar tue (kind of mackerel), the postpartum mother’s vagina can be itchy”*

*(Ma Moe, 22-years-old, 2 children)*

*“If the postpartum mother eats pa lar tue, vaginal is itchy and she can suffer from headache”*

*(Ma Myint, 29-years-old, 2 children)*

- **Chilli**

Most rural home birth women avoided eating chilli during postpartum period. They avoided eating chilli during postpartum period is not to get *mee yat chay luu* (postnatal diarrhoea). They believed that if the postpartum mother eats chilli during the postpartum period, she can get diarrhoea and if she got diarrhoea during postpartum period due to eating chilli, she will have to get diarrhea again and ever even she eats chilli after postpartum period. In addition, they believed that even if the postpartum mother got diarrhoea for one time only during postpartum period, diarrhoea cannot be cured completely and if she eats chilli again after postpartum period, she gets diarrhoea again and diarrhoea is not completely cured. It was confirmed by

*“Mee kan the (the postpartum mother) cannot eat chilli. She will suffer from mee yat chay luu (postnatal diarrhoea). Within forty five days, if the postpartum mother eats chilli, she will suffer from mee yat chay luu (postnatal diarrhoea). I did*

*not eat. I did not eat chilli at all. Older people did not let me eat chilli. The postpartum mother cannot eat chilli. If the postpartum mother eats chilli, she may suffer from diarrhoea (the postnatal diarrhoea). Mee yat chay luu cannot be cured completely. After postpartum period, if she eats chilli, she will have diarrhoea again. If the postpartum mother eats chilli within forty five days, she will suffer from diarrhoea. If she re-eats chilli after over forty five days too, she gets diarrhoea again”*

*(Ma Cho, 33-years-old, 4 children)*

*“I did not eat chilli during postpartum period. The reason that I did not eat chilli during postpartum period is because I am afraid that I will suffer from mee yat chay luu (postnatal diarrhoea)”*

*(Ma Yu, 36-years-old, 5 children)*

*“Older people say that do not let the postpartum mother get diarrhoea during postpartum period, if the postpartum mother got diarrhoea during postpartum period, she can get ever diarrhoea and diarrhoea is not completely cured and when the postpartum mother eats spicy food during postpartum period, she can get diarrhoea. That’s why I also avoided eating chilli during postpartum period because I was afraid that I will get diarrhoea”*

*(Ma Sandar, 26-years-old, 3 children)*

Ma Mee, a key informant told the researcher that she did not eat chilli within 45 days of postpartum period because she was afraid that she will get diarrhoea and as she said:

*“Eating chilli was avoided during postpartum period. I am afraid that I will get diarrhoea. People say that if the postpartum mother got diarrhoea for one time during postpartum period, she may suffer from diarrhoea ever. That’s why I avoided eating chilli. I did not eat chilli at all. Within forty five days of postpartum period, eating chilli was avoided. I did not eat”*

*(Ma Mee, 42-years-old, 5 children)*

However, Ma Mya told the researcher that if the postpartum mother got diarrhoea during postpartum period due to eating chilli, when she delivers the next baby in the next three years or four years or five years, in some cases postnatal diarrhea is completely cured and in some cases postnatal diarrhoea is not completely

cured. Thus, she told that she avoided eating chilli during postpartum period because she was afraid that she will get diarrhoea and as she said:

*“If the postpartum mother eats chilli during postpartum period, she may suffer from diarrhoea. Although postpartum period is over, she can get diarrhoea and when she eats chilli, she can get diarrhoea. She cannot eat spicy food at all. Until three, four, five years after delivery of baby, she cannot eat spicy food. Some people say that if she delivers next baby, in some, postnatal diarrhoea is completely cured and in some, postnatal diarrhoea is not completely cured. So, I avoided eating spicy food because I was afraid that I will get diarrhoea. Spicy food is chilli”*

*(Ma Mya, 29-years-old, 3 children)*

There was only one woman who told the researcher that if the postpartum mother eats chilli during postpartum period, she can get diarrhoea and also baby can get diarrhoea from the mother’s breast milk, thus she avoided eating chilli during postpartum period as she was afraid that she will get diarrhoea during postpartum period. It was confirmed by

*“During postpartum period, I avoided food. Chilli cannot be eaten. Eating chilli can cause mee yat chay luu (postnatal diarrhoea). If the postpartum mother eats chilli, mother and also baby can get diarrhoea via breast milk. I avoided eating chilli because I was afraid that I would get diarrhoea. People say that if the postpartum mother got diarrhoea during postpartum period, it cannot be cured. Whenever she eats chilli, she always gets diarrhoea. If she eats chilli, she gets diarrhea again”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Phyu also avoided eating chilli during postpartum period. But she avoided eating chilli is not because she was afraid that she will get diarrhoea. She avoided eating chilli for her and her baby because if she eats chilli, her abdomen is hot and also baby’s abdomen is hot via breast milk and as she said that:

*“During postpartum period, eating chilli was avoided. Chilli was avoided for baby and mother because abdomen is hot”*

*(Ma Phyu, 28-years-old, one child)*

- **Fish**

Some rural home birth women avoided eating fish during postpartum period as not being suitable food to consume for the postpartum mother. They said that

the postpartum mother cannot eat fish and they are afraid that something will happen due to eating fish. It was confirmed by:

*“I did not eat fish. The postpartum mother cannot eat fish”*

*(Ma Yu, 36-years-old, 5 children)*

*“Older people said me that what fish can be eaten, cannot be eaten by the postpartum mother. I dared not eat fish. If something happens, I will have to suffer”*

*(Ma Moe, 22-years-old, 2 children)*

But, Ma Cho told the researcher that she ate snapper during postpartum period and the postpartum mother cannot eat the other fishes. She told that she was afraid she will suffer from hypertension and as she explained:

*“In fish, I ate snapper. The postpartum mother cannot eat the other fishes. If I eat the other fish, I am afraid that mee yat thwe (blood pressure) will be high”*

*(Ma Cho, 33-years-old, 4 children)*

- **Pork and pork’s fat**

There was only one woman who did not eat pork during postpartum period. She told the researcher that if the postpartum mother eats pork, pork can cause hypertension. Hence, she was afraid that she will suffer from hypertension. It was confirmed by

*“The postpartum mother cannot eat pork too. If the postpartum mother eats pork, she can suffer from hypertension. Some people say that the postpartum mother cannot eat pork. Some people say that the postpartum mother can eat pork. I did not eat pork because I am afraid that I will suffer from hypertension”*

*(Ma Mya, 29-years-old, 3 children)*

However, Ma Yu ate pork during postpartum period but she did not eat pork’s fat because she is afraid that she will get diarrhoea. She told the researcher that if the postpartum mother got diarrhoea due to eating pork’s fat, even she eats pork’s fat after postpartum period she gets diarrhoea again and diarrhoea which happened in the postpartum period cannot be cured completely and as she said:

*“I ate pork during postpartum period. But I did not eat pork’s fat because I am afraid that I will get diarrhoea if I eat pork’s fat. If the postpartum mother gets diarrhoea during postpartum period, it is not completely cured. After postpartum period, if she eats pork once again, she gets diarrhoea. If the postpartum mother got*

*diarrhoea during postpartum due to she eats pork's fat, she gets diarrhoea again whenever she eats pork's fat"*

*(Ma Yu, 36-years-old, 5 children)*

- **Cockle and prawn**

There was only one woman who avoided eating cockle and prawn during postpartum period not to get itchy vagina. She told the researcher that if the postpartum mother eats cockle and prawn, woman's vagina that tore during childbirth will get itchy. It was confirmed by

*"Mee kan the (the postpartum mother) cannot eat cockle and prawn, woman's vagina is itchy. I did not eat. Mee kan the (the postpartum mother) cannot eat cockle and cannot eat prawn. Woman's vagina that tore is itchy"*

*(Ma Cho, 33-years-old, 4 children)*

Ma Thein, a key informant also told the researcher that she did not eat prawn during postpartum period as she was afraid that vagina will be itchy and as she said:

*"The postpartum mother cannot eat eggplant, vagina is itchy. I did not eat like eggplant and prawn because I am afraid that vagina will be itchy"*

*(Ma Thein, 26-years-old, 2 children)*

- **Coconut milk**

There was only one woman who avoided eating coconut milk during postpartum period because she is afraid that she will suffer from hypertension. It was confirmed by

*"During postpartum period, coconut milk was avoided because I am afraid that I will suffer from hypertension"*

*(Ma Phyu, 28-years-old, one child)*

- **Watermelon**

There was only one woman who did not eat watermelon during postpartum period. She told the researcher that she wanted to eat watermelon during postpartum period but she dared not eat it because she is afraid that her abdomen will get cold if she eats watermelon and then, she is worried that she will get cold. It was confirmed by

*“During mee dwin (postpartum period), I wanted to eat watermelon. But I dared not eat watermelon because I am afraid that abdomen will become cold. If watermelon is eaten, abdomen is cold. If abdomen is cold, the postpartum mother will get cold”*

*(Ma Mya, 29-years-old, 3 children)*

- **Eggplant**

There was only one woman who avoided eating eggplants during postpartum period. She told the researcher that if the postpartum mother eats eggplant, vagina will be itchy and she can suffer from stiffness in the neck or back and then, she told that even normal people eat eggplant, they may suffer from stiffness in the neck or back. It was confirmed by

*“Eating eggplant can cause vagina itchy and can cause stiffness in the neck or back. Eggplant does not like even some people who are normal. I avoided eating eggplant during mee dwin (postpartum period)”*

*(Ma Phyu, 28-years-old, one child)*

Ma Mee, a key informant told the researcher that her mother did not feed her rays and also eggplant during postpartum period as her mother worried for her that vagian will get itchy. She told that if the postpartum eats eggplant, vagina can be itchy, so that she avoided eating eggplant during postpartum period and as she said:

*“My mother did not feed me rays. She worried that my vagina will be itchy. She did not feed me eggplant too. I did not eat egg plant. Yes, woman’s vagina can be itchy. If the postpartum mother eats eggplant, woman’s vagina can be itchy”*

*(Ma Mee, 42-years-old- 5 children)*

- **Sex abstinence**

Among 7 rural home birth women, there was only one Ma Mya who no needs to avoid sexual intercourse during postpartum period because her husband was not at home in every child during postpartum period. She told the researcher that the midwife told her to avoid sexual intercourse during postpartum period and then to use contraceptive injection after 45 days of delivery baby. But she told that she has not used contraceptive injection after 45 days of delivery because her husband was not at home during postpartum period in every child and she told that she thinks sexual

intercourse is needed to avoid during postpartum period not to get the next pregnancy soon and as she said:

*“Saya ma (midwife) let us avoid sexual intercourse during postpartum period. She told me to use injection (contraceptive injection) after forty five days of delivery. I have not used injection (contraceptive injection) after forty five days of delivery baby. I think that it is need to avoid sexual intercourse during postpartum period due to next pregnancy will get soon. My husband was not at home during mee dwin (postpartum period). In every child, my husband was not at home. So I did not have to use injection (contraceptive injection) after forty five days of delivery”*

*(Ma Mya, 29-years-old, 3 children)*

The rest 6 rural home birth women avoided sexual intercourse within 45 days of the postpartum period with the various reasons. Some rural home birth women avoided sexual intercourse during postpartum period due to vagina that torn during childbirth has not yet healed, some rural home birth women avoided sexual intercourse during postpartum period due to *je yay* (lochia: the material eliminated from the uterus through the vagina after the completion of labour) is still flowing from the vagina so that they are dirty within 45 days and vagina has not yet healed. Some rural home birth women avoided sexual intercourse during postpartum period due to they were afraid that they will get next pregnancy soon, some rural home birth women avoided sexual intercourse during postpartum period due to they worried that they will get next pregnancy soon and also they worried that uterus will be prolapsed and some rural home birth women avoided sexual intercourse during postpartum period due to they worried that uterus will be prolapsed. This study found that the midwife and older people were influential to suggest rural home birth women to avoid sexual intercourse during postpartum period.

The reason that some rural home birth women avoided sexual intercourse during postpartum period was due to vagina that torn during childbirth has not healed yet and vagina's suture has not healed yet as vagina torn during childbirth was sewed. It was confirmed by

*“I avoided sexual intercourse during postpartum period because vagina that has torn during childbirth has not healed yet”*

*(Ma Cho, 33-years-old, 4 children)*

*“During postpartum period, some women whose vagina did not have to be sutured do not avoid sexual intercourse. At me, vagina has sutured. Before vagina healing, it is the best not to have sexual intercourse. We avoided sexual intercourse because seam from vagina has not healed yet”*

*(Ma Phyu, 28-years-old, one child)*

The reasons that some rural home birth women avoided sexual intercourse during postpartum period were due to vagina has not healed yet, *je yay* (lochia: the material eliminated from the uterus through the vagina after the completion of labour) is still flowing from the vagina so that their body is dirty within 45 days. It was confirmed by

*“After childbirth, saya ma (midwife) let us avoid sexual intercourse for forty five days. After forty five days of delivery, she said me to come torural health centre and receive injection for family planning. We avoided sexual intercourse for forty five days. Vagina has not healed yet, so sexual intercourse was avoided. Then I am dirty with blood. Within forty five days, I am dirty. That’s why we avoided sexual intercourse. Je yay (lochia) is still flowing and my body is dirty, so we avoided sexual intercourse”*

*(Ma Yu, 36-years-old, 5 children)*

The reason that some rural home birth women avoided sexual intercourse during postpartum period was that they were afraid that they will get next pregnancy soon. It was confirmed by

*“After delivery of baby, sexual intercourse was avoided for forty five days. Saya ma (midwife) did not say me to avoid having sexual intercourse during postpartum period. Older people say that mee kan the (the postpartum mother) cannot have sexual intercourse during postpartum period and sot oat (uterus) can be prolapsed. In my mind, I am afraid that I will get the next pregnancy. I avoided sexual intercourse during postpartum period because I am afraid that I will get the next pregnancy”*

*(Ma Moe, 22-years-old, 2 children)*

Some rural home birth women avoided sexual intercourse during postpartum period because they worried that they will get next pregnancy soon. In

addition, they worried that if they have sexual intercourse during postpartum period, uterus will be prolapsed. It was confirmed by

*“The midwife told me to avoid sexual intercourse within forty five days after delivery. I avoided sexual intercourse within forty five days. I am afraid that I will get next pregnancy when we have sexual intercourse within forty five days. That’s why I avoided sexual intercourse. Then, uterus can be prolapsed if the postpartum mother has sexual intercourse within forty five day”*

*(Ma Sandar, 26-years-old, 3 children)*

Some rural home birth women avoided sexual intercourse during postpartum period because they worried *sor oat* (uterus) will be proplapsed as the older people told them to avoid sexual intercourse during postpartum period not to have a prolapse of the uterus. It was confirmed by

*“Within forty five days, the postpartum mother cannot have sexual intercourse. Sot oat (uterus) can be prolapsed. I am afraid that sot oat (uterus) will be prolapsed. So I avoided. Sot oat (uterus) can be prolapsed. Older people said me to avoid sexual intercourse within forty five days and sot oat (uterus) can be prolapsed”*

*(Ma Myint, 29-years-old, 2 children)*

### **Avoidance of cold and wind**

The duration of postpartum period is 45 days. But rural home birth women more avoided from being exposed to wind and cold within the first 7 days after delivery of baby because they considered that within the first 7 days after delivery of baby is more *thwe nu thar nu* than within 45 days after delivery of baby. Thus, they considered that within the first 7 days is more important than that of 45 days.

According to informal conversation, 58 years old woman said that the postpartum mother cannot touch wind within 7 days. The extremities have to be covered with blanket within 7 days after delivery of baby and extremities can be cold. The postpartum mother can get cold as *meeyat chan* (postnatal cold). Like within 7days, for 45 days after delivery of baby is not important. Within 7 days is more *thwe nu thar nu*.

According to informal conversation, 62 years old woman said that *thwe nu thar nu* is that after mother has delivered baby, blood in mother’s body is not mature and blood becomes youthful. Blood in mother’s body has changed. In the mother’s

body, blood has changed automatically. After childbirth, blood becomes youthful itself. You look at the postpartum mother's skin complexion, skin complexion is smooth, skin complexion becomes smooth and blood becomes youthful.

Rural home birth women avoided from being exposed to wind and cold during postpartum period. Most women took a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and its fruits are edible fruits in bunches) with cold water) and did *shin ngway khan* (induced perspiration) for three days. After that, some women started taking a bath with cold water, and some women continued taking a bath with warm water with the duration varying from seven days to one month and they took a bath in the afternoon. The reason they took a bath in the afternoon is that they were worried that they will suffer from *mee yat chan* (postnatal cold). They believed that if the postpartum mother felt *mee yat chan*, she will always feel *mee yat chann* and it is not completely cured.

Some rural home birth women believed that if the postpartum mother started early taking a bath with cold water before 45 days, the postpartum mother can suffer from *mee yat chan* (postnatal cold) and if the postpartum mother did not cover her body with blanket during staying beside the fire for 7 days, extremities will get cold, and if the extremities get cold during staying beside the fire for 7 days, when she gets ill she will suffer from joint aches from both hands and legs. Then, older people do not let the postpartum mother sit outside the room during staying beside the fire for 7 days because they worried that the postpartum mother will get joints ache from both hands and legs from being exposed to wind and cold.

Ma Cho told the researcher that if the postpartum mother started early taking a bath with cold water before 45 days, she can suffer from *mee yat chan* and so she took a bath with warm water for about 15 days not to suffer from *mee yat chan*. She told that the postpartum mother cannot touch wind during staying beside the fire for 7 days, and if she touched wind during staying beside the fire for 7 days, when she gets ill she will suffer from joints ache. In addition, she told that if the postpartum mother did not cover her body during staying beside the fire for 7 days, and when she gets ill, she will suffer from joint aches from both hands and legs and as she explained:

*“If the postpartum mother started early taking a bath with cold water before 45 days, she can get mee yat chan. I took a bath shin yay for three days. Not to happen mee yat chan (postnatal cold), after taking a bath shin yay for three days, I took a bath with warm water. I took a bath with warm water for about 15 days. Then I took a bath with cold water. I am not allowed to sit outside the room because older people worried that after mee yat has finished (staying beside the fire for 7 days has finished) I will suffer from leg’s joints ache and hand’s joints ache from being exposed to wind. The postpartum mother cannot touch wind within mee yat (staying beside the fire for 7 days). When she gets sick, she may suffer from leg’s joints ache and hand’s joints ache if she touched wind during mee yat. During staying beside the fire for seven days, if the postpartum mother did not cover her body with blanket extremities will get cold. If extremities get cold, she may suffer from legs joints ache and hands joints ache when she gets ill”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Moe told the researcher that if the postpartum mother touched wind and did not cover hands and legs with blanket during staying beside the fire for 7 days, she can suffer from joints ache from both hands and legs due to she touched cold wind during staying beside the fire. Then she told that she started taking a bath with cold water after 7 days of delivery but she took a bath in the afternoon because she was afraid that she will get cold and as she explained:

*“If the postpartum mother touched wind and if the postpartum mother does not cover legs and hands with blanket during staying beside the fire for seven days, and after staying beside the fire for 7 days has finished, she may suffer from legs ache and hands ache because mee kan the (the postpartum mother) cannot touch cold wind. I took a bath with warm water within the first 7 days after delivery of baby. Within the first three days of delivery baby, I took a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it’s fruits are edible fruits in bunches) with cold water). The next days, I took a bath with cold water. Oh oh, I took a bath with warm water. I took a bath with warm water after the first three days of delivery baby. After over seven days of delivery, I took a bath with cold water. But I took a bath in the afternoon because I am afraid that I will get cold (mee yat chann)”*

(Ma Moe, 22-years-old, 2 children)

Ma Mya, Ma Myint and Ma Yu told the researcher that they took a bath with warm water with the duration of varying from 7 days to about one month after delivery of baby and then, they took a bath water in the afternoon not to feel cold (postnatal cold means *mee yat chan*) and as they explained:

*“I did shin ngway khan (induced perspiration) for three days and I took a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it’s fruits are edible fruits in bunches) with cold water) for three days. After three days, I took a bath with warm water. I took a bath with warm water for about seven days, eight days. After ten days of delivery, I took a bath with cold water. I took a bath with cold water at around one o’clock, two o’clock in the afternoon because I am afraid that I will get cold...cold. If the postpartum mother gets mee yat chan (postnatal cold), it is not completely cured. Mee yat chan will be for the whole life and she will be always cold”*

(Ma Mya, 29-years-old, 3 children)

*“I until about ten days, fifteen days, on the house I took a bath with warm water after childbirth. I am afraid that I will get mee yat chan (postnatal cold). I took a bath at around three o’clock in the afternoon because I am afraid that I will get mee yat chan (postnatal cold). I took a bath early during postpartum period”*

(Ma Myint, 29-years-old, 2 children)

*“After seven days of delivery baby, at around three o’clock, three o’ clock in the afternoon, I took a bath with warm water. I took a bath with warm water for about one month. Within the first seven days of delivery baby, I took a bath shin yay for three days. In the rest four days, I took a bath with warm water. Taking a bath early is that I am afraid that I will get cold. If I felt cold, I am afraid that I will get mee yat chan (postnatal cold)”*

(Ma Yu, 36-years-old, 5 children)

In addition, Ma Yu told that after staying beside the fire for 7 days, she still feels cold, so she stayed in the room by closing the window and wearing warm clothing because she worried that extremities will get cold and as she explained:

*“After seven days of staying beside the fire, there was no the fire beside me. I felt still cold. Then I wore warm clothing. I had to stay in the room by closing the*

*window because I worried that I will get cold. If extremities are cold during postpartum period, I was worried that extremities will get cold when I get old in later. If extremities get cold during postpartum period, it is not cured. When she gets old, she can suffer from extremities cold”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Phyu and Ma Sandar told the researcher that they took a bath with warm water for three days and then, they started taking a bath with cold water and they took a bath in the afternoon because they were afraid that they will get *mee yat chan* (postnatal cold). But Ma Phyu took a bath with cold water after keeping water in the sun. They explained as:

*“I took a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it’s fruits are edible fruits in bunches) with cold water) for three days. I did shin ngway khan (induced perspiration) for three days. After three days of delivery baby, I took a baht with cold water. I took a bath at around three o’clock in the afternoon by keeping water in the sun. I took a bath quickly because I felt so cold. I took a bath early because I am afraid that I will get cold”*

*(Ma Phyu, 28-years-old, one child)*

*“In previous children, I took a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it’s fruits are edible fruits in bunches) with cold water) for three days. I did shin ngway khan (induced perspiration) for three days. After three days, I did not take a bath with warm water. I took a baht with cold water. I took a bath early at around three o’clock afternoon. I took a bath early not to get cold. If I take a bath in the evening, I will get cold (postnatal cold). I am afraid that I will get mee yat chan (postnatal cold). I did not take a bath early for forty five days. I took a bath early for about one month. In this baby, I took a bath with warm water for three days. In the rest days, I took a bath with cold water. It will have about one month I took a bath early”*

*(Ma Sandar, 26-years-old, 3 children)*

### **Resting**

The duration of postpartum period is 45 days as assumed by rural home birth women. However, they took a rest without doing any household chores after delivery of baby with the duration varying from about 10 days to 45 days. Some rural home birth women took a rest for 45 days without doing household chores after delivery of baby and they just washed only nappies. It was confirmed by

*“Within forty five days, I have my mother, I did not have to do anything. No, I did not do anything. For nappies, on the house, I washed nappies one piece, two pieces slowly. I washed nappies at about ten days, fifteen days, one month after delivery of baby. I did not do any heavy things. I took a rest for forty five days”*

*(Ma Myint, 29-years-old, 2 children)*

*“Within 7 days, I did not do anything. I did not do anything within forty five days. I took enough rest for forty five days. I washed only nappies. I did not cook rice too and I did not do anything as well. In every child, I took a rest for forty five days”*

*(Ma Yu, 36-years-old, 5 children)*

Some rural home birth women, after delivery of baby they took a rest for only 15 days without doing household chores and after they had taken a rest for 15 days, they started doing household chores because their husband started to return to work. It was confirmed by

*“In this baby, I had to take a rest for only fifteen days. Within fifteen days, I did not do anything. I did not wash baby’s nappies too. My husband wash nappies too and my husband washed hta mein (nether garment worn by Myanmar women) too. My husband fetched water too. My husband cooked rice too until fifteen days. After I had taken a rest for fifteen days, he went to the sea for fish. He worked as wage fisherman. I started doing household chores after fifteen days of delivery baby. I fetched water too on my head over fifteen days after delivery of baby. After fetching water, I cooked rice too. I had to take a rest for only fifteen days”*

*(Ma Cho, 33-years-old, 4 children)*

*“I started working household chores after fifteen days of delivery baby because my husband started to return to work. My husband fetched water before going to work. I cooked rice and also I cooked curry”*

*(Ma Moe, 22-years-old, 2 children)*

There was only one woman who is running shop (snap shop) told the researcher that in the previous children, she took a rest for 45 days after delivery of baby but in the last baby, she had to take a rest for about one month and she started doing household chores because she is running shop. It was confirmed by

*“In this baby, I took a rest without doing anything for about one month after delivery of baby. In older children, I took a rest for forty five days. In the last baby, I am selling shop so I had to take a rest for about one month. After I have taken a rest for one month, I started doing households chores”*

*(Ma Sandar, 26-years-old, 3 children)*

Some rural home birth women who stay together with her parents told the researcher that they took a rest in bed for about 7 days, 8 days and they started washing nappies and also they helped their mothers regarding washing household utensils within 45 days. It was confirmed by

*“After childbirth, I stayed in the bed for about seven days, eight days. After eleven days, twelve days of delivery baby, I went down onto the ground and I started washing nappies. During forty five days, I washed only nappies and I helped my mother washing household utensils”*

*(Ma Mya, 29-years-old, 3 children)*

There was only one woman who had to take a rest for only ten days after delivery of baby because her mother-in-law went back home. Her mother-in-law watched and helped her for only 10 days after delivery of baby. So she told that she started doing household chores after ten days of delivery baby but she did only light household chores. It was confirmed by

*“After ten days of delivery baby, my mother-in-law went back her home. Until ten days after delivery of baby, I did not do anything. Over ten days of delivery baby, I did all. I did not fetch water. I cooked rice. I swept the floor a little. I washed nappies. I did light household chores”*

*(Ma Phyu, 28-years-old, one child)*

### **Avoidance of lifting heavy objects**

Most rural home birth women avoided lifting heavy objects during postpartum period because they worried that uterus will be prolapsed and also they worried that joints from both hands and legs will ache. In addition, some rural home

birth women worried that fresh blood will flow from the vagina if they lift heavy objects. However, some rural home birth women avoided lifting heavy objects during postpartum period with the other reason. The reason of avoidance of lifting heavy objects was not to tear vagina suture. This study found that older people, neighbours, mothers and mother-in-law were influential to suggest rural home birth women to avoid lifting heavy objects during postpartum period.

Ma Myint told the researcher that during postpartum period, she avoided lifting heavy objects because she was afraid that uterus will be prolapsed and as she said:

*“During postpartum period, I avoided lifting heavy objects because I am afraid that sot aut will be prolapsed. Sot aut can be prolapsed. Yes, sot aut is uterus. I did not have to lift heavy objects during postpartum period”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Thein and Ma Mee, key informants told the researcher that during postpartum period, if the postpartum mother carries heavy things, uterus can be prolapsed. Thus, they bewared all activities and they avoided lifting heavy objects as they were afraid that uterus will be prolapsed and as they explained:

*“During postpartum period, uterus can be prolapsed if the postpartum mother lifts and carries heavy objects during postpartum period. If uterus is prolapsed, it is dangerous. That’s why I bewared all activities because I am afraid that uterus will be prolapsed. Hence, I did not lift very heavy objects during forty five days. I did not carry very heavy objects”*

*(Ma Thein, 26-years-old, 2 children)*

*“Lifting heavy objects was avoided during postpartum period. Older people told me that do not lift heavy objects, uterus will come out, and do not lift heavy objects. I am afraid that uterus will come out. So I avoided lifting heavy objects. If uterus came out, I will have to suffer. That’s why I followed what older people told me”*

*(Ma Mee, 42-years-old, 5 children)*

Ma Yu and Ma Sandar avoided lifting and carrying heavy things during postpartum period because they were afraid that uterus will be prolapsed. In addition, they told that the postpartum mother is *thwe nu thar nu* (postpartum mother’s skin

complexion and postpartum mother's blood is youthful), and if the postpartum mother lifts heavy objects (e.g; fetching water) while the postpartum mother is *thwe nu thar nu*, she will suffer from joints ache from both hands and legs and joints ache from both hands and legs will be happening ever and for lifetime and it is not completely cured. Thus, they avoided lifting heavy objects not to get joints ache too from both hands and legs and as they said:

*“I did a little works within forty five days. I washed nappies. I did not do cooking. Older people say that when the postpartum mother did cooking, fetching water within forty five days of the postpartum period, she may suffer from hands joints ache and legs joints ache. During postpartum period of forty five days, if the postpartum mother may suffer from legs joints ache and hands joints ache, legs joints ache and hands joints ache is not cured completely. She may suffer from joints ache for lifetime. If the postpartum mother lifts heavy things, uterus will be prolapsed and legs joints and hands joints will ache. That's why I avoided lifting heavy things”*

*(Ma Yu, 36-years-old, 5 children)*

*“Within forty five days, I did not lift heavy things. Even over forty five days of delivery baby, I did not lift heavy things much. My mother and my mother-in-law has told me that when the postpartum mother who is *thwe nu thar nu* (postpartum mother's skin complexion and postpartum mother's blood were youthful) lifts heavy objects, fetches water within one month after delivery, she may suffer from joints ache from both hands and legs. The postpartum mother should avoid lifting heavy things during postpartum period. If heavy things are lifted during postpartum period, joints from both legs and hands will ache and uterus also can be prolapsed”*

*(Ma Sandar, 26-years-old, 3 children)*

Ma Mya also told the researcher that if the postpartum mother lifts heavy objects during postpartum period, she may suffer from hands joints ache and legs joints ache and uterus can be prolapsed. Furthermore, she told that if the postpartum mother lifts heavy objects, fresh blood also can flow from the vagina. Thus she avoided lifting heavy objects during postpartum period and as she explained:

*“My mother and neighbours have told me that you, the postpartum mother do not lift heavy things, and hands joints and legs joints will ache. If the postpartum mother lifts heavy things, she may suffer from hands joints ache and legs joints ache,*

*uterus also can be prolapsed, and fresh blood can flow from the vagina. I avoided lifting heavy things because I am afraid that uterus will be prolapsed and blood will flow and I am afraid that I will suffer from hands joints ache and legs joints ache. During forty five days, I did only light household chores. Light household chores are that I washed plates. I washed only plates”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Moe also told the researcher that she avoided fetching water during postpartum period because she was afraid that blood from the vagina will flow as older people say that if the postpartum mother carries heavy things on her head and if the postpartum mother sweeps the floor, blood from the vagina may flow and she can get a headache and as she said:

*“People say that the postpartum mother cannot do heavy things, and then, the postpartum mother cannot sweep the floor, if the postpartum mother sweeps the floor, blood from the vagina may flow. When the postpartum mother carries heavy things on her head, blood from the vagina may flow and she may feel a headache. Thus, I did not fetch water. I fetched water after two months of delivery baby. I am afraid that blood from the vagina will flow”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Phyu who avoided fetching water during postpartum period because she told that she cannot hang water pail due to vagina which torn during childbirth was sutured and so vagina was tight and painful and then she could not move as vagina was sutured. Thus, she avoided fetching water during postpartum period as she worried that vagina which was sutured will tear and as she said:

*“I did light household chores. I did not fetch water. I cannot hang water pail because my vagina has sutured and I am afraid that vagina’s suture will tear. Vagina was tight and painful. I could not move”*

*(Ma Phyu, 28-years-old, one child)*

Ma Cho told the researcher that if the postpartum mother started doing heavy things before 45 days, uterus can be prolapsed and if the postpartum mother pulls heavy things, when she gets ill, she can suffer from joints ache from both hands and legs. But, she told that she dared not do very heavy things and she could not avoid

pulling heavy things during postpartum period because she told that there were no people to help her because her husband was going to the sea for fish and as she said:

*“People say that if the postpartum mother started early doing heavy things, sot oat (uterus) can be prolapsed. The postpartum mother started early doing heavy things is that when the postpartum mother lifts heavy things before forty fivedays. That’s why I dared not lift very heavy things. If the postpartum mother pulls heavy things, she may suffer from hands joints ache and legs joints ache. Only when she gets ill, she may suffer from hands joints ache and legs joints ache if the postpartum mother pulled heavy things during postpartum period. For me, I could not avoid pulling heavy things. At me, there are no people to help me. My husband was going to sea for fish, how to do?”*

*(Ma Cho, 33-years-old, 4 children)*

### **Taking a bath *shin yay***

After delivery of baby, the postpartum mothers do *shin ngway khan* (induced perspiration) first and then, they take a bath *shin yay*. They practiced *shin ngway khan* and taking a bath *shin yay* for the first three days after delivery of baby. Taking a bath *shin yay* is that after the postpartum mother did *shin ngway khan*, she takes a bath *shin yay*. According to the researcher’s observation and participation, *shin yay* is that firstly, they (postpartum mother’s mother or neighbours or relatives) *zaw ywat* (which is herbal leaves from kind of a big tree and it’s fruit are edible fruits in bunches) and water were boiled in a big pot and when the big pot becomes boil, they pour boiling water from the big pot including *zaw ywat* into another big bowl and then water (which is fetched from the well) is poured (added) into a big bowl. After that they let the postpartum mother take a bath. This is called taking a bath *shin yay*. The reason of taking a bath *shin yay* by the postpartum mother is not to get joints ache from both hands and legs, is to be light body and is to be good for the postpartum mother’s health. Rural home birth women believed that if the postpartum mother did not take a *bath shin yay* during the postpartum period, when she gets ill, she will have to suffer from hands joints ache and legs joints ache and if the postpartum mother takes a bath *shin yay*, it is good for the postpartum mother’s health and her body is light.

According to the researcher's participant observation, when the postpartum mother takes a bath *shin yay* neighbours, older people and the postpartum mother's mother or mother-in-law and the postpartum mother's sisters massaged the postpartum mother's body with boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and its fruit are edible fruits in bunches) and also the postpartum mother massages her body herself with boiled *zaw ywat* and then, they (neighbours, older people and the postpartum mother's mother or mother-in-law or the postpartum mother's sisters) grind seeds in the breasts of the postpartum mother with boiled *zaw ywat*. The reasons they massage the postpartum mother's body with boiled *zaw ywat* while the postpartum mother is taking a bath are not to get joints ache from both hands and legs, to relieve body ache, not to get body ache, not to happen bones ache and to be good for the postpartum mother's health. Rural home birth women believed that if their body is massaged with boiled *zaw ywat* during postpartum period, their health will be good, and they will not suffer from joints aches from both hands and legs.

Then, rural home birth women believed that during the first months of pregnancy, breasts are small, when the pregnancy is term, breasts are getting large and large and when breasts are getting large, seeds become in the breasts. Thus, older people, neighbours or the postpartum mother's grind the postpartum mother's breast seeds with boiled *zaw ywat* when the postpartum mother takes a bath *shin yay* because they believed that if seeds inside the breast are not ground with boiled *zaw ywat*, seeds inside the breast may block the way that breast milk flows from the breast. The reasons they grind seeds inside the breasts of the postpartum mother are not to block the way that breast milk flows from the breast if breast's seeds crumble (crumble is to break breast's seeds into pieces), not to smell breast's milk (if breast's seeds are ground with boiled *zaw ywat* as boiled *zaw ywat* is warm and hot, they believed that breast milk is cooked automatically and for example, cow milk smells sweet when cow milk is cooked on the stove with the fire), and to increase breast milk production. However, a few rural home birth women said that the reason breast's seeds are ground with boiled *zaw ywat* is not to increase breast milk production and is not for not to smell breast milk. Most of the women complained that they felt painful when their breast's seeds are ground with boiled *zaw ywat*.

Among 7 rural home birth women, Ma Sandar did not take a bath *shin yay* in the last baby because there were no people to help them and thus, she did not do anything in the last baby such as staying beside the fire, doing *shin ngway khan* and taking a bath *shin yay*. Then she told the researcher that when she delivered the previous children, people (family members) were full complement, so she stayed beside the fire and she took a bath *shin yay* and did *shin ngway khan* (induced perspiration) and as she said:

*“In this baby, I did not stay beside the fire because there were no people who will help me. There was no mee yat htin (fire wood). In this baby, my husband did not chop mee yat htin. When I delivered my older children, people were full complement. I stayed beside the fire. In this baby, I did not stay beside the fire because there were no people to help me. My mother also was sick when I delivered this baby. My mother-in-law had died. There was only a person who is my sister-in-law to help me. That’s why I did not do anything. Shin ngway khan also was not done”*

*(Ma Sandar, 26-years-old, 3 children)*

- **The reason of taking a bath *shin yay***

Some rural home birth women told the researcher that the reason of taking a bath *shin yay* is not to get joints ache from both hands and legs. Some rural home birth women told that the reason of taking a bath *shin yay* is to be light body and not to be smelly breast milk of the postpartum mother and some rural home birth women told that the reason of taking a bath *shin yay* is to be light body and hands of the postpartum mother. It was confirmed by

*“Taking a bath shin yay is not to have legs joints and hands joints ache”*

*(Ma Cho, 33-years-old, 4 children)*

*“Taking a bath shin yay is to be light body, not to be smelly in body. The postpartum mother cannot stay without taking a bath shin yay. Not to be smelly in body is not to be smelly breast milk”*

*(Ma Mya, 29-years-old, 3 children)*

*“Taking a bath shin yay is that the postpartum mother takes a bath with warm water to be light body and hands”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Thein, a key informant also told the researcher that if the postpartum mother takes a bath *shin yai*, her health is good and as she said:

*“Taking a bath with shin yai is good for health”*

*(Ma Thein, 26-years-old, 2 children)*

• **If the postpartum mother did not take a bath *shin yai*, what will happen?**

Some rural home birth women believed that if the postpartum mother did not take a bath *shin yai*, when she gets sick, she will have to suffer from joints ache from both hands and legs. It was confirmed by

*“If the postpartum mothers did not take a bath shin yai, when they get ill, legs joints and hands joints ache”*

*(Ma Cho, 33-years-old, 4 children)*

*“People say that the postpartum mother did not do shin ngway khan and did not take a bath shin yai during the postpartum period and if the postpartum mother did not feel gammy after postpartum period, when she gets sick she may suffer from legs joints and hands joints ache. Legs joints ache and fingers joints ache can appear when she gets sick”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Thein, a key informant told the researcher that she is a country woman, so she had to follow traditional practices such as staying beside the fire, taking a bath *shin yai* and doing *shin ngway khan* because she is afraid that she will have to suffer from joints ache from both hands and legs and as she said:

*“I am a country woman, so I had to stay beside the fire, take a bath shin yai and do shin ngway khan according to country custom. If I did not stay beside the fire, take a bath shin yai and do shin ngway khan, I am afraid that joints from both hands and legs will ache”*

*(Ma Thein, 26-years-old, 2 children)*

• **The reason of massage the postpartum mother’s body with boiled *zaw ywat*(herbal leaves)**

The reasons of massage the postpartum mother’s body with boiled *zaw ywat*(herbal leaves)are not to get joints ache from both hands and legs, to relieve of body ache, not to get body ache, not to get bones ache and to be good for the

postpartum mother's health. Ma Thein, and Ma Mee, key informants told the researcher regarding massage the postpartum mother's body with boiled *zaw ywat*. The followings were as they said:

*“Massage the postpartum mother's body with boiled zaw ywat (boiled herbal leaves) is to relieve aches in body”*

*(Ma Thein, 26-years-old, 2 children)*

*“My body was massaged with boiled zaw ywat when I took a bath with shin yay. Massage body with boiled zaw ywat is to be good health and not to have bones ache”*

*(Ma Mee, 42-years-old, 5 children)*

Ma Moe, Ma Mya, Ma Yu and Ma Phyu told the researcher regarding massage their body with boiled *zaw ywat* during postpartum period. The followings were:

Ma Moe told the researcher that she massaged her body with boilded *zaw ywat* during staying beside the fire not to have body ache. She told that massage the postpartum mother's body with boiled *zaw ywat* is good and if the postpartum mother's body is not massaged with boilded *zaw ywat* during staying beside the fire of the postpartum period, she will have to suffer from legs ache and fingers ache later and as she explained:

*“Zaw ywat (herbal leaves from kind of a big tree and its fruits as bunches can be eaten) are boiled. I massaged my body with boiled zaw ywat not to ache in my body. Massage body with boiled zaw ywat is good. Massage body with boiled zaw ywat is good within staying beside the fire for seven days because legs and hands do not ache, later. If massage body with boiled zaw ywat was not done during staying beside the fire for seven days of the postpartum period, after postpartum period legs and fingers will ache”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Mya also told the researcher that massage the postpartum mother's body with boiled *zaw ywat* is not to get joints ache from both hands and legs and is to relieve body ache and as she said:

*“Massage body with boiled zaw ywat is not to have hands ache and legs ache and is to relieve of body ache”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Yu told the researcher that when she took a bath *shin yay* during the postpartum period, her mother-in-law and her sister massaged her body with boiled *zaw ywat*. She told that massage body with boiled *zaw ywat* is to relieve of body ache and as she said:

*“After taking shin ngway khan (induced perspiration), I took a bath shin yay. When I take a bath with shin yay, my body was massaged with boiled zaw ywat (boiled herbal leaves) by my mother-in-law and my sister. Massage body with boiled zaw ywat is to relieve of body ache”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Phyu also told the researcher that her neighbours massaged her body with boiled *zaw ywat* when she took a bath *shin yay* during postpartum period not to have joints ache from both hands and legs and as she said:

*“They (neighbours) massaged my body with boiled zaw ywat. They said that if body is massaged with boiled zaw ywat, legs joints and hands joints do not ache after postpartum period”*

*(Ma Phyu, 28-years-old, one child)*



**Figure 4.7** Massage the postpartum mother’s body when the postpartum mother takes a bath *shin yay*



**Figure 4.8 Grind the postpartum mother breast's seeds with boiled *zaw ywat* (herbal leaves) to crumble seeds in the breast**

**To fall baby's umbilical cord quickly and also for umbilicus wound healing: putting gravy of thin pepper soup, saliva, *je thar kho* (like small anthill which can be seen at the walls of home), ash, baked brick's powder, *say tot phat* (traditional medicine which is yellow powder) and mat's ash into baby's umbilicus and singeing the postpartum mother's palm and sole at the fire**

After delivery of baby, if the postpartum mothers who delivered baby at home with the assistance of of midwife, midwife gave the postpartum mothers surgical spirit and *say ni yay* (betadine: antiseptic solution) to put into the baby's umbilicus and if the postpartum mothers who delivered baby at home with the assistance of auxiliary midwife, auxiliary midwife gave the postpartum mothers surgical spirit and *say ni yay* (betadine: antiseptic solution) to put into the baby's umbilicus. Then, the midwife goes to the postpartum mother home and sees the postpartum mother for the postpartum

care for three days. When the midwife went and saw the postpartum mother for the postpartum care, she also put surgical spirit and betadine into baby's umbilicus. Auxiliary midwife also put baby's umbilicus when she went and saw the postpartum mothers for the postpartum care. However, some rural home birth women did not put betadine or surgical spirit at all into baby's umbilicus at behind the midwife back and they put saliva or ash into baby's umbilicus to heal umbilicus and to fall baby's umbilicus quickly because they do not have beliefs surgical spirit and betadine. They think that if they put betadine and surgical spirit into baby's umbilicus, it takes time to heal umbilicus and fall baby's umbilical cord.

Some rural home birth women, to fall baby's umbilical cord they put only betadine and surgical spirit that the midwife gave them into baby's umbilical and they did not put anything like saliva, gravy of thin pepper soup and so on to fall baby's umbilical cord quickly. But, after falling of baby's umbilical cord, they put baked brick's powder, *say to phat* (which is traditional medicine and yellow powder which can be bought at the general stores) or mat's ash into baby's umbilicus to heal baby's umbilicus, if inside of baby umbilicus is wet and baby's umbilicus has not yet healed. Some rural home birth women, to fall baby's umbilical cord quickly, they put betadine and surgical spirit into baby's umbilicus and also they put gravy of thin pepper soup, ash or *je thar kho* (like small anthill which can be seen at the walls of home) into baby's umbilicus or they singed their palm and sole at the fire to fall baby's umbilical cord. In some cases, mother-in-law put *je thar kho* into baby's umbilicus to fall baby's umbilical cord. There was only one rural home birth woman who did not put anything into baby's umbilicus such as ash, saliva, gravy of thin pepper soup and so on to fall baby's umbilical cord quickly and she put only betadine and surgical spirit into baby's umbilicus because she dared not put like saliva, ash or gravy of thin pepper soup and so on into baby's umbilical cord. This study found that women's mother-in-law, women's mothers and neighbours were the influential to suggest rural home birth women to practices the various ways to use for healing of baby's umbilicus and for falling of baby's umbilical cord quickly.

Auxiliary midwife who is a key informant told the researcher that she let the postpartum mother put betadine and surgical spirit into baby's umbilicus but at

behind her back, they put gravy of thin pepper soup into baby's umbilicus and as she said:

*“Auxiliary midwife said that to fall baby's umbilical cord quickly, we let them use surgical spirit...surgical spirit and betadine (antiseptic solution), now at our period. I do not know before. But, at behind our back, what...it is gravy of thin pepper soup...gravy of thin pepper soup is put. I told them not to put gravy of thin pepper soup into baby's umbilicus. I told them that putting gravy of thin pepper soup can cause infection in the baby's umbilicus. I told them. They put at behind our back”*

*(Auxiliary midwife, a key informant)*

Ma Thein, a key informant also told the researcher that her mother-in-law told her to put gravy of thin pepper soup and ash powder into baby's umbilicus to fall baby's umbilical cord quickly but she put only betadine and surgical spirit into baby's umbilicus for five days and she did not put gravy of thin pepper soup and ash powder into baby's umbilicus because baby's umbilicus is youthful. She told that after over 5 days of delivery baby, she started putting ash powder and gravy of thin pepper soup into baby's umbilicus and also she put betadine and surgical spirit into baby's umbilicus to fall baby's umbilical cord. The followings were as she said:

*“Saya ma (midwife) tied baby's umbilical cord with thread and saya ma asked me to put surgical spirit and betadine (antiseptic solution) into baby's umbilical cord. Saya ma (midwife) put surgical spirit and betadine (antiseptic solution) into baby's umbilical cord for three days. To fall umbilical cord quickly, my mother-in-law told me to put thin pepper soup and ash. After about five days of delivery, I put thin pepper soup and ash powder into baby's umbilical cord. At the beginning of delivery baby, I did not put thin pepper soup and ash powder into baby's umbilical cord because baby's umbilicus is so youthful. I put only betadine (antiseptic solution) and surgical spirit. After over five days of delivery, gravy of thin pepper soup that I eat and ash were put into baby's umbilical cord. I did not put much. I put a little bit. After over five days of delivery baby, I put surgical spirit and betadine (antiseptic solution) into umbilical cord and I put the gravy of thin pepper soup and ash powder too. Then umbilical cord became dry itself and fell”*

*(Ma Thein, 26-years-old, 2 children)*

To fall baby's umbilical cord quickly, rural home birth women practiced the various ways. Ma Cho and Ma Myint did not put *say ni yay* (betadine: antiseptic solution) and surgical spirit into baby's umbilicus but Ma Cho put saliva and Ma Myint put ash into baby's umbilical cord to fall baby's umbilical cord quickly. The followings were as they said:

*"To fall baby's umbilical cord quickly, at baby's umbilicus, I put saliva. In every child, I put saliva. Saya ma (midwife) put surgical spirit and betadine (antiseptic solution) into baby's umbilicus. When she (midwife) came to me, she put. She (midwife) came to me for three days. I put only saliva. I did not use surgical spirit and betadine (antiseptic solution). Saya ma (midwife) gave me surgical spirit and betadine (antiseptic solution) to put into baby's umbilicus. I did not put because I do not have beliefs this surgical spirit. I want my baby's umbilicus to heal. If surgical spirit and betadine (antiseptic solution) are put into baby's umbilicus, umbilicus takes time to heal in my mind. I put saliva. By putting saliva, umbilical cord fell. Yes, mother's saliva is better. Saliva is better than medicine. I put my saliva to be fast umbilical cord fall"*

*(Ma Cho, 33-years-old, 4 children)*

*"Saya ma (auxiliary midwife) put surgical spirit and say ni yay (betadine: antiseptic solution) into baby's umbilicus after childbirth. After childbirth, saya ma (auxiliary midwife) gave me surgical spirit and say ni yay (betadine: antiseptic solution) for putting baby's umbilicus. I did not put. I did not put. I did not put at all behind saya ma (auxiliary midwife) back because it is needed to fall baby's umbilical cord quickly. When saya ma (auxiliary midwife) came, she put surgical spirit and say ni yay (betadine: antiseptic solution) into baby's umbilicus. At behind saya ma back, I put myself with ash which heals inside of the umbilicus. My mother said me that if ash is put baby's umbilicus, umbilical cord falls fast. I put. I put to be fast umbilical cord fall"*

*(Ma Myint, 29-years-old, 2 children)*

Ma Phyu told the researcher that the midwife put betadine and surgical spirit into baby's umbilicus for three days and the rest days, betadine was not put into baby's umbilicus. But she told that after bathing baby, surgical spirit was put into baby's umbilicus and then her mother-in-law put *je thar kho* (like small anthill which

can be seen at the walls of houses) which is ground into powder into baby's umbilical cord to fall baby's umbilical cord and as she said:

*“In baby, umbilical cord fell after six days of delivery baby. That is, je thar kho was put into baby's umbilical cord by my mother-in-law. Surgical spirit and betadine (antiseptic solution) were put for three days by saya ma (midwife). In the rest days, betadine was not put. After bathing baby, surgical spirit is put into the umbilicus and then je thar kho powder is put to fall umbilical cord quickly. My mother-in-law put”*

*(Ma Phyu, 28-years-old, one child)*

There was only one Ma Mya who told the researcher that she put only say ni yay (betadine: antiseptic solution) and surgical spirit into baby's umbilical cord and she dared not put country medicines like je thar kho and gravy of thin pepper soup into baby's umbilicus and so on and as she said:

*“To fall baby's umbilical cord quickly, only say ni yay (betadine: antiseptic solution) and surgical spirit that saya ma (midwife) gave her were put into baby's umbilicus. I did not follow any country custom and I dared not put country medicine into baby's umbilicus too”*

*(Ma Mya, 29-years-old, 3 children)*

There was only one Ma Moe who singed her palm and sole at the fire to fall baby's umbilical cord quickly during staying beside the fire of the postpartum period. She told that she thinks singe of palm and sole at the fire is related with falling of baby's umbilical cord quickly and as she said:

*“Singe of palm and sole makes fast the baby's umbilical cord fall. I think singe of palm and sole at the fire is related with the baby's umbilical cord fall. In this baby, I was lazy. I singed my palm and sole for a while. My neighbours said me you do not singe your palm and sole with effort, it was for four days already and your baby's umbilical cord has not fallen, are you putting only betadine into the baby's umbilical cord and baby's umbilical cord is just dry. They said me to put thin pepper soup and ash into the baby's umbilical cord. Then I singed my palm and sole for several times at night time and then I slept. Tomorrow morning, when I carried my baby to take a bath baby, baby's umbilical cord fell itself automatically. That's why I did not have to put ash and gravy of thin pepper soup into the baby's umbilical cord. Baby's umbilical*

*cord fell at the fifth day. Therefore, I believe because baby's umbilical cord fell tomorrow morning after singeing of my palms and soles at night time"*

*(Ma Moe, 22-years-old, 2 children)*

Ma Yu and Ma Sandar put only *say ni yay* (betadine: antiseptic solution) and surgical spirit into baby's umbilical cord to fall baby's umbilical cord but they used traditional ways to heal baby's umbilicus if inside of the umbilicua has not healed yet although baby's umbilicus has fallen. Ma Yu used baked brick's power and *say tot phat* (traditional medicine which is yellow powder) to heal baby's umbilicus and Ma Sandar used mat's ash to heal baby's umbilicus. The followings were as they said:

*"In this last baby, the midwife put say ni yay (betadine: antiseptic solution) and surgical spirit into baby's umbilicus for three days. Even the midwife put alcohol and betadine were put into baby's umbilicus, umbilical cord did not fall. The next days, I put alcohol and betadine myself into baby's umbilicus. By putting like that, baby's umbilical cord fell. Although baby's umbilical cord fell, baby's umbilicus was wet without healing. Baked brick are ground into powder. Although baked brick's powder was put into the baby's umbilicus, baby's umbilicus does not heal. When I put say tot pat (traditional medicine which is yellow powder) which was bought from the general store into umbilicus, umbilicus healed. After about forty five days of delivery baby, baby's umbilicus healed. In the elder children, after falling of baby's umbilical cord, baked brick's powder was put into the umbilicus. Before umbilical cord fall, surgical spirit and say ni yay (betadine: antiseptic solution) were put into baby's umbilicus. After umbilical cord fall, baked brick's powder was put. After three days of putting baked brick's powder into baby's umbilicus, umbilicus healed"*

*(Ma Yu, 36-years-old, 5 children)*

*"Surgical spirit and say ni yay (betadine: antiseptic solution) were put into the baby's umbilicus. When baby's umbilical cord has fallen by putting surgical spirit and say ni yay, if inside of baby's umbilicus does not heal, mat's fragment that we used for sleeping was burnt. After a fragment of mat was cut, that fragment was burnt. When that fragment that was burnt became ash, that ash was taken. Then ash was put into baby's umbilicus. By putting mat's ash, baby's umbilicus became dry. After falling of baby's umbilicus cord, I put only mat's ash. Since my first baby, I put like that because my mother asked me to put mat's ash. At every child, I put like that"*

*(Ma Sandar, 26-years-old, 3 children)*



**Figure 4.9** After taking a bath, the postpartum mother is singeing her sole at the fire to fall baby's umbilical cord quickly



**Figure 4.10** After taking a bath, the postpartum mother is singeing her sole and palm at the fire to fall baby's umbilical cord quickly



**Figure 4.11 Using mat's ash to heal baby's umbilicus after falling of baby's umbilical cord by burning two or three fragments of mat to become mat 's ash**



**Figure 4.12 Using *je thar kho* (like small anthill which can be seen at the walls of houses) by grinding *je thar kho* into powder to put into baby's umbilicus to fall baby's umbilical cord quickly**

### ***Shin ngway khan* (induced perspiration)**

According to the researcher's participant observation, rural home birth women do *shin ngway khan* (induced perspiration) for three days after delivery of baby with the aim of expelling dirty and rotten sweats. The procedure of *shin ngway khan* (induced perspiration) was that: first, water and *zaw ywat* (leaves which are herbal leaves from kind of a big tree and its fruits are edible fruits in bunches) were boiled in a big pot. When the big pot becomes boil, boiling water including boiled *zaw ywat* in which the big pot was poured into another pot. After that, a mother sits beside the pot in which boiling water with *zaw ywat* and then, a mother is wrapped with mat together with pot. After that, a blanket is covered over the mat which wrapped a mother together with pot in which boiling water with *zaw ywat*. When it becomes hot enough to give off steam, at the same time, someone from outside put hot brick, one by one into the pot which inside the mat. Then, a mother who sits in the mat has to stir the pot to facilitate steaming. It is necessary to continue the process until a mother has profuse sweating. This is called *shin ngway khan*.

The reasons of doing *shin ngway khan* are to be good for the postpartum mother's health, not to have legs joints and hands joints ache and to come out rotten sweats (to perspire rotten sweats) and to be light the body of the postpartum mother. Rural home birth women believed that if the postpartum mother did not do *shin ngway khan* during postpartum period, her body will be heavy and her body is not light, and later, she will have to suffer from hands joints ache and legs joints ache and also she will not be in good health. Some rural home birth women believed that when they do *shin ngway khan*, dirty and rotten sweats from their body came out, then they felt that their body is light and fresh after doing *shin ngway khan*.

This study found that neighbours and older people of the rural home birth women are influential to suggest rural home birth women to practice *shin ngway khan*. Most rural home birth women complained that they felt hot when they did *shin ngway khan* and some rural home birth women told the researcher that they had difficulty in breathing when they sat in the rolled mat for *shin ngway khan*. Although they felt hot when they did *shin ngway khan*, they followed that practice to be good for their health as older people and neighbours suggested them to follow that practice. Among 7 rural home birth women, 5 women followed that practice.

Ma Yu and Ma Moe told the researcher that if the postpartum mother did not do *shin ngway khan* during postpartum period, what will happen. But Ma Moe followed *shin ngway khan* practice because neighbours and older people told her that if the postpartum mother did not do *shin ngway khan*, she will have to suffer from joints ache. The followings were as they said in differently.

Ma Yu told the researcher that if the postpartum mother did not do *shin ngway khan*, her body is not light and her body will be heavy as older people say and as she said:

*“Older people say that if the postpartum mother did not do shin ngway khan and did not take a bath shin yay, body will be heavy”*

*(Ma Yu, 36-years-old, 5 children)*

*“Older people and my neighbours say if shin ngway khan and taking a bath shin yay (taking a bath by mixing boiling water of boiled zaw ywat (zaw ywat which is herbal leaves from kind of a big tree and it's fruits are edible fruits in bunches) with cold water) are not done during postpartum period, legs and hands will ache. I followed them according to their advices because I am afraid that I would get legs joints ache and hands joints will ache”*

*(Ma Moe, 22-years-old, 2 children)*

A key informant, Ma Mee also told the researcher that if the postpartum mother did not do *shin ngway khan* during postpartum period, later she will have to suffer from joints ache and her health is not good and also she will be suffering from diseases. She told that she did *shin ngway khan* during postpartum period so she did not have to suffer from any diseases and her health is good and as she said:

*“If the postpartum mother did not do shin ngway khan during postpartum period, later her health will not be in good health. Health will not be good is that joints will ache and body will be oedema. She will be suffering from diseases. Yes, I believe that. Now, I nothing happened because I did shin ngway khan to be good my health”*

*(Ma Mee, 42-years-old, 5 children)*

Ma Mya and Ma Phyu told the researcher regarding the reason of doing *shin ngway khan* by the postpartum mother during postpartum period. Ma Mya said that doing *shin ngway khan* is to perspire dirty sweats from body and not to have joints

ache. Ma Phyu said that doing *shin ngway khan* is good for the postpartum mother's health when dirty sweats came out from the postpartum mother's body as neighbours told her and as they explained:

*“Doing shin ngway khan is not to have legs joints ache and hands joints ache and to come out rotten sweats. That's all.”*

*(Ma Mya, 29-years-old, 3 children)*

*“They (neighbours) said that when shin ngway khan is done, if rotten sweats come out, it is good for health”*

*(Ma Phyu, 28-years-old, one child)*

Some rural home birth women told the researcher that they felt hot when they did *shin ngway khan*. Some women felt hot and felt difficulty in breathing when they did *shin ngway khan*. Thus they do not want to do *shin ngway khan*. Although they do not want to do *shin ngway khan*, they followed that practice to be good for their health as older people and neighbours came and helped them to do *shin ngway khan* and as older people and neighbours suggested them to do *shinngway khan*. It was confirmed by

*“The baby was delivered at around seven o' clock in the evening. Then, tomorrow afternoon, shin ngway khan was done and then took a bath shin yay. Neighbours came and did for me to do shing ngway khan and to take a bath shin yay. I had to do because they did for me. I did not want to do shin ngway khan. I felt so hot in the rolled mat. Then a blanket was covered on the rolled mat. I told them that I do not do shin ngway khan. But they told me that cannot. So I had to do shin ngway khan. There were sweats on my body. I felt so hot”*

*(Ma Myint, 29-years-old, 2 children)*

*“I was disappointed that I had to do shin ngway khan because I felt so hot that I had to stay in the rolled mat. Although I did not want to do shin ngway khan, oh! I will do it, I will have to do for only three days, by thinking like that I did shin ngway khan. People (neighbours) who came and helped me to do shin ngway khan did for me by good-will. Staying in the rolled mat is not comfortable. It was so hot. There were sweats on my body. In the country, all postpartum mothers are doing like that. If taking a bath shin yay and doing shin ngway khan are done, I thought that it will be good. Then, I did taking a bath shin yay and shing ngway khan”*

*(Ma Phyu, 28-years-old, one child)*

*“When I did shin ngway khan, I have difficulty in breathing. I have difficulty in breathing too and I felt hot too. In this baby, I had a plan not to do shin ngway khan. They (older people) told me that the postpartum mother cannot stay without doing shing ngway khan. If shin ngway khan is done, sweats come out. Then body is light. They told me that the postpartum mother has to do shin ngway khan not to have legs and hands ache, to perspire and to be light the body. That’s why I did shin ngway khan”*

*(Ma Mya, 29-years-old, 3 children)*

However, Ma Moe and Ma Yu told the researcher that they want to do *shin ngway khan* to be good for their health and their neighbours and their mother-in-laws came and helped them to do *shin ngway khan* and as they said:

*“I did shin ngway khan because shin ngway khan was done for me by neighbours for being good my health. I also wanted to do shin ngway khan for being good health at my body. Every postpartum mother is doing shin ngway khan”*

*(Ma Moe, 22-years-old, 2 children)*

*“I want to do shin ngway khan. When I did shin ngway khan, even I have got a headache, I felt light in my head. Since the first born, shin ngway khan was done. According to country’s custom, I also did continuously doing shing ngway khan. Since the first born until now, when I delivered baby, my mother-in-law came and helped me to do shin ngway khan. When I did shin ngway khan, I felt that my body is light”*

*(Ma Yu, 36-years-old, 5 children)*

Some rural home birth women told the researcher that when they did *shin ngway khan*, sweats came out from their body and after finishing *shin ngwayy khan*, they felt that their body is light. It was confirmed by:

*“I believe that if shin ngway khan is done, body is light. If shin ngway khan is done, body is really light. Body is light when sweats came out. When rolled mat is open, I have to feel like my body is light in my mind”*

*(Ma Mya, 29-years-old, 3 children)*

*“When I did shin ngway khan, I felt that my body is light”*

*(Ma Yu, 36-years-old, 5 children)*

There was one woman who also told the researcher that when she did *shin ngway khan*, she felt hot. But she followed that practice. She told that doing *shin ngway khan* is good for her health and she felt fresh after finishing *shin ngway khan*. It was confirmed by

*“Doing shin ngway khan in the mat was hot. Although it was hot, I had to sit in the mat. I had to do shin ngway khan for three days. While I was doing shin ngway khan in the mat, people said me open your eyes, and then take out your tongue. A blanket is covered on the mat in which I sat so there was no hole in the rolled mat. Then, all water vapour entered into the body because the blanket covered on mat. Vapour were very hot, weren’t vapour and all vapour entered into the body, didn’t vapour. It is good for my health. After finishing shin ngway khan, I felt fresh”*

*(Ma Moe, 22-years-old, 2 children)*

A key informant, midwife told the researcher her opinions regarding *shin ngway khan* practiced by rural home birth women. The midwife told the researcher that doing *shin ngway khan* can affect the postpartum mother’s lungs, so she forbid rural home birth women not to do *shin ngway khan* as doing *shin ngway khan* affects their health especially it affects their lungs. In addition, she forbid rural home birth women not to drink thin pepper soup, not to stay beside the fire too as she thinks that rural home birth women should not stay beside the fire and should not drink gravy of thin pepper soup. But the midwife told that taking a bath *shin yay* is good to relive joints ache for rural home birth women. The followings were as she said:

*“Shin ngway khan is meaningless. I forbid them not to practice shin ngway khan. I did not let them do shin ngway khan. Actually, I do not want them to do shin ngway khan at all. I do not want them to do shin ngway khan. I told them that if you do like that, yours lungs will black with smoke’s vapour. It should not be done. Breathing smoke’s vapour should not have. I forbid practicing shin ngway khan. I also forbid making the fire beside the postpartum mother. I forbid drinking thin pepper soup too. They should not do”*

*(Midwife, key informant)*



**Figure 4.13 Shin ngway khan (induced perspiration): nieghbours are helping the postpartum mother for doing shin ngway khan**



**Figure 4.14 Doing *shin ngway khan***



**Figure 4.15** *Shin ngway khan* (induced perspiration), the postpartum mother's mother and neighbours are helping the postpartum mother while the postpartum mother is sitting inside the rolled mat for *shin ngway khan*

#### **Massage the postpartum mother's body with hot brick**

Rural home birth women who were informants massaged their body with hot brick during staying beside the fire of postpartum period. Hot brick is that brick is baked at the fire which beside the postpartum mother and then, that hot brick from the fire is taken with a coal tongs, then that hot brick is sunk into the water for a while, after that that hot brick is removed from the water and then that hot brick was wrapped with a material, then the postpartum mother massaged her body with that hot brick which is wrapped with a material. The reasons of massage their body with hot brick are not to have body ache, not to have hands joints ache and legs joints ache, later and not to have being swollen in body, and is to be good for the postpartum mother's health. Some rural home birth women believed that if the postpartum mother did not massage her body with hot brick during staying beside the fire of the postpartum period, later she will have to suffer from body ache, and joints ache. Some

rural home birth women believed that if the postpartum mother did not massage her body with hot brick during staying beside the fire, when she gets ill, she will have to suffer from hands joints ache and legs joints ache and they believed that if the postpartum mother massaged her body with hot brick, she will be in good health until she gets old. This study found that neighbours and women's mother were influential rural home birth women to suggest women to follow massage body with hot brick during staying beside the fire of the postpartum period. Among 7 rural home birth women, two women did not massage their body with hot brick because they did not stay beside the fire in their last baby.

Ma Mee, a key informant told the researcher that the reason of massage the postpartum mother's body with hot brick is because the postpartum mother's skin complexion is youthful as she delivered her baby. Thus, the postpartum mother's body massaged her body with hot brick not to have edema and not to have being swollen at the postpartum mother's body and if the postpartum massaged her body with hot brick, her health is good. She told that she also massaged her body with hot brick during the postpartum period because she was worried that her body will become swelling later and as she explained:

*“The reason that the whole body is massaged with hot brick is not to have being swollen and not to have oedema in body. If we do like that, it is good for health as well. In the whole body of the postpartum mother, blood and flesh are youthful because she delivered baby. So, for being good health, the whole body of the postpartum mother is massaged with hot brick. I massaged the whole body with hot brick because I am afraid that later, my body will become swelling. In every child, I massaged my body with hot brick because I am afraid that my body will become swollen”*

*(Ma Mee, 42-years-old, 5 children)*

However, Ma Cho, Ma Moe and Ma Myint's beliefs are different from Ma Mee, a key informant's beliefs regarding massage the postpartum mother's body with hot brick. Ma Cho, Ma Moe and Ma Myint told the researcher that the reasons they massaged their body with hot brick during the postpartum period are not to have body ache, not to have joints ache from both hands and legs later or when they get ill and to be good for their health until getting old. The followings were as they explained:

*“The reasons that the whole body is massaged with hot brick are not to get legs ache, hands ache, legs joints ache and hands joints ache. If body is not massaged with hot brick, when I get sick, I will suffer from hands joints ache and legs joints ache. My mother had told me to massage hands and legs with hot brick, when you get sick your hands joints and legs joints will ache. As my mother told me, I massaged my body with hot brick because I am afraid that hands joints and leg joints will ache”*

*(Ma Cho, 33-years-old, 4 children)*

*“I had to massage my body with hot brick for 7 days and I had to massage hands and legs with hot brick not to have hands joints ache and legs joints ache later”*

*(Ma Moe, 22-years-old, 2 children)*

*“I massaged my body with hot brick. If body is not massaged with hot brick, body and hands may ache and joints may ache. Joints ache can happen later”*

*(Ma Myint, 29-years-old, 2 children)*

*“Older people say that if the postpartum mother massaged body with hot brick, legs joints and leg joints ache does not happen until getting old and she is healthy until getting old. I believe that. So I massaged my body with hot brick”*

*(Ma Yu, 36-years-old, 5 children)*

But, Ma Phyu told the researcher that she massaged her body with hot brick during staying beside the fire of the postpartum period as her neighbours suggested her to massage her body with hot brick. She told that she did not know that for what, neighbours let her massage her body with hot brick and they did not say her that the reason of massage body with hot brick and as she said:

*“Yes, I massaged the whole body with hot brick. They (neighbours) did not say me anything that for what, body is massaged with hot brick. I also do not know about that until now. They told me to massage my body with hot brick, so I also massaged my body with hot brick”*

*(Ma Phyu, 28-years-old, one child)*

### ***Shin kee phyay***

The reason of doing *shin kee phyay* after delivery of baby is due to pouring water to *shin kee* (apologizing to *Nat*) for easy birth during labour pain. When the pregnant started labour pain, the pregnant women’s mother-in-law or older people

poured water to *shin kee* and they poured water onto ground in front of the pregnant woman who is in labour. During labour pain, if pouring water to *shin kee* (apologizing to *Nat* who is looking after the village and stays at *shin kee eei* (*Nat's* house) where is outside the village) was done for easy birth, *shin kee phyay* is done after delivery of baby. It is a custom of the village. The meaning of *shin kee phyay* is feeding food to *shin kee* (who is *Nat* and is looking after the village). When they do *shin kee phyay*, there are five small bowls in a tray and then, they put some rice, some sticky rice, banana, some sancks, *kaunn latt* (betel leaf and areca nut are tied together with thread) in each bowl. According to the researcher's observation, when they do *shin kee pyay*, they feed food to *Nat* on the ground where the place is opposite to *shin kee eei* (*Nat's* house which is outside of the village) by inviting *shin kee* (who is *Nat*) to come and eat food. Rural home birth women asked older people who can do *shin kee phyay* for doing *shin kee phyay*. In some women, mother-in law or husband did *shin kee phyay*. They believed that if they did pouring water to *shin kee* (apologizing to *Nat*) during labour to look after the pregnant woman who was in labour for easy birth, *shin kee phyay* must be done after delivery of baby and if they do not do *shin kee phyay* after delivery of baby, *shin kee* will bewitch the postpartum mother and also the baby to get ill. However, some women did *shin kee phyay* after delivery of baby although water was not poured to *shin kee* during their labour pain. In some women, if water was not poured to *shin kee* (who is *Nat* and is looking after the village) during labour and they did not do *shin kee phyay* as well after delivery of baby. Mostly, *shin kee phyay* was done after three days, or seven days of delilvery baby or before 45 days after delivery of baby. But there was only one woman who poured water to *shin kee* (who is *Nat* and stays inside the coconut and who is looking after the house and then coconut that *Nats* stays is hung at the pillar in the corner of the house) during her labour pain, so she changed new *ohnn thee swe* (a new coconut) after 5 months of delivery baby. She believed that if she poured water to *shin kee* (who is *Nat* and is looking after the house) during her labour, after delivery of baby if she did not change a new coconut, *shin kee* (who is *Nat* and stays inside the coconut and who is looking after the house) will bewitch her and her baby too to be ill or something bad, thus she changed a new coconut after 5 months of delivery baby.

According to the researcher's informal conversation, 80 years old woman said that

*“Here, shin kee phyay (feeding food to Nat means giving food gift to Nat) is done after childbirth. We cannot stay without doing shin kee phyay. Shin kee can bewitch the postpartum mother and also baby. During labour, if shin kee is apologized as shin kee, look after the pregnant woman who was in labour to deliver baby easily, after delivery of baby shin kee phyay has to be done”*

In Ma Phyu, Ma Myint, Ma Yu, pouring water to *shin kee* (who is *Nat* and is looking after the village and who stays at *shin kee eei* (*Nat's* house) where is outside the village) was done for easy birth and so they did *shin kee phyay* (feeding food to *Nat* means giving food gift to (*Nat*) who is looking after the village). They believed that if pouring water to *shin kee* (who is *Nat* and is looking after the village) during labour, *shin kee phyay* must be done after delivery of baby and if they did not do *shin kee phyay*, *shin kee* (who is *Nat* and looking after the village) will bewitch them and also their baby to get ill or something bad and then, they believed that they cannot stay without doing *shin kee phyay* after delivery and it is a custom of the village and as they said:

*“After delivery of baby, they did shin kee phyay. Which day? I think it was after three days of delivery baby. An old woman from those house came and did shin kee phyay. People say that it was needed to do shin kee phyay after delivery of baby. Water was poured to shin kee while I was in labour. People say that if water was poured to shin kee during labour, after delivery of baby it is needed to do shin kee phyay. After delivery of baby, an old woman from those house came and did shin kee phyay”*

*(Ma Phyu, 28-years-old, one child)*

*“Water was poured to shin kee in front of the house while I was in labour with my second baby. After delivery of baby, shin kee phyay was done. My mother could not do shin kee phyay. An old woman who is a neighbour did shin kee phyay. When my first baby was born, I was in Thailand, so shin kee phyay was not done. It is not good if we did not do shin kee phyay because water was poured to shin kee during labour. We cannot stay without doing shin kee phyay because shin kee is apologized during labour. If water is poured to shin kee during labour, shin kee phyay has to be*

*done. We cannot stay without doing shin kee phyay. If shin kee phyay is not done, danger can become. Danger is that shin kee can bewitch to be ill”*

*(Ma Myint, 29-years-old, 2 children)*

*“After seven days of delivery baby, shin kee phyay was done. The person who do shin kee phyay had to say that shin kee shin myat (Nat is called respectfully) for being easy birth phoe shin phwar shin (Nat is called respectfully) looked after. So hta min pwe let saung (food gift) is given, come and eat. In previous children, my mother-in-law did shin kee phyay. In this baby, my husband did shin kee phyay. Pouring water to shin kee is the custom of the village. All are doing shin kee phyay. If we have apologized to shin kee during labour, we cannot stay without doing shin kee phyay. If we do not do shin kee phyay, shin kee will bewitch the postpartum mother or baby”*

*(Ma Yu, 36-years-old, 5 children)*

However, Ma Moe told the researcher that *shin kee phyay* was done after delivery of baby although water was not poured to *shin kee* during labour pain and as she said:

*“My husband said me that in his village, shin kee phyay is done after giving birth, what about in your village?, go and ask older people. After I had asked older people, shin kee phyay was done. When I asked them, they said cannot stay without doing shin kee phyay, it must be done. Shin kee phyay was done within 45 days after delivery of baby. During labour pain, water was not poured to shin kee. Shin kee phyay is that rice and some snacks are put in a tray. Then a person who can do shin kee phyay was asked for shin kee phyay because it is a custom of this village. Shin kee phyay is done after delivery of baby”*

*(Ma Moe, 22-years-old, 2 children)*

There was only one Ma Cho who poured water to *shin kee* (Nat who stays inside the coconut and who is looking after the house) herself during labour pain as she poured water at the base of the pillar that coconut is hung for easy birth, she changed a new coconut after 5 months of delivery baby. She believed that if she did not change a new coconut after delivery of baby as she poured water to *shin kee* (Nat who is looking after the house and stays inside the coconut which is hung at the base of the pillar where it is in the corner of the house) during labour, *shin kee* (Nat who

stays inside the house and looking after the house) will bewitch her and her baby as well to get ill and as she explained:

*“I had changed ohnn thee swe (new coconut). After delivery of this baby, I changed a new coconut at the month of Thadingyut (October). It was so long. Since the month of Tan Khuu (April), this baby was delivered. If coconut is not changed, shin kee can bewitch me. Shin kee can bewitch me is that shin kee will make me ill. Shin kee can bewitch baby...baby too. Then I changed new coconut”*

*(Ma Cho, 33-years-old, 4 children)*



**Figure 4.16** Preparing food in a tray to do *shin kee phyay*



**Figure: 4.17** A grandfather who is doing *shin kee pyhay* by inviting *shin kee (Nat)* who stays at *Nat's house*



**Figure 4.18** *Shin kee eei (Nat's house)* which is outside the village

### **Staying beside the fire**

Rural home birth women stayed beside the fire after delivery of baby. Although the duration of postpartum period is 45 days, they did not stay beside the fire for 45 days. A period of staying beside the fire by rural home birth women varied in each. They stayed beside the fire from 7 days to over 10 days. But, most women stayed beside the fire for the first 7 days after delivery of baby. The reasons they stayed beside the fire after delivery of baby are not to feel *mee yat chan* (postnatal cold) in the postpartum mother, to bake bricks, and not to have joints ache from both hands and legs in the postpartum mother. They believed that if the postpartum mother does not stay beside the fire, she will get cold (postnatal cold means *mee yat chan*) and she will suffer from hands joints ache and legs joints ache after one month of delivery. In addition, they believed that if the postpartum suffered from hands joints ache and leg joints ache, it is not completely cured. It was found that rural home birth women's mother, mother-in-law and older people were influential to suggest rural home birth women to practice staying beside the fire after delivery of baby.

Among 7 women, 3 women (Ma Cho, Ma Mya, and Ma Sandar) did not stay beside the fire in their last baby. But Ma Cho made the fire under the house. The reasons they did not stay beside the fire were the followings:

Ma Cho told the researcher that she did not stay beside the fire due to the midwife did not allow her to stay beside the fire but she made the fire under the house to bake brick and as she explained:

*“In this baby, saya ma (midwife) did not allow making the fire beside me. She said that she does not want to come to me if I would stay beside the fire. After delivery of baby, the fire was made in previous children. In previous children, there was no injection as say puu (antibiotics injection which is hot) and saya ma (midwife) gave me only oral medicines as say puu (oral antibiotics which is hot). The reason of staying beside the fire is that I felt cold after delivery of baby. Yes, staying beside the fire is not to get cold. At outside, I stayed beside the fire and for inside body, I took oral medicines as say puu (oral antibiotics). Then intensity of heat is balanced in body. Now in this baby, she (midwife) injected me say puu (antibiotics injection). She (midwife) did not let me stay beside the fire. In previous pregnancy, there was no injection as say puu (antibiotic injection) and only oral medicine as say puu (oral*

*antibiotic). Now in this baby, she injected me say puu (antibiotic injection) and gave me oral medicines as say puu (oral antibiotics). She (midwife) did not let me stay beside the fire. That's why I did not stay beside the fire. The fire was made under the house. When I need hot brick, my husband went down and had to bake one brick by one brick at thr fire”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Mya told the researcher that she did not stay beside the fire in the last baby because she also did not want to stay beside the fire and she is afraid that her breasts will get ill from being exposed to smells of burning. She told that in the previous children, she did not understand so she stayed beside the fire as she thought that staying beside the fire will be good, but in the last baby she did not stay beside the fire. She told that if she stays beside the fire, she will feel hot and then oral medicines that midwife gave her and injections that midwife injected her are also hot, then she will feel hotter, thus she did not stay beside the fire. In addition, she told the researcher that she had breast problems since she delivered the second baby. She avoided going to funeral house, frying something with oil and going to the postpartum mother's house because when she went and fried snacks at her neighbour house, breast became swelling immediately and became ache and when she went funeral house, breast became swelling immediately. She said the smell of burning or frying cannot expose to breast at all until now and as she explained:

*“At first, the way that breast milk flows obstructed when I delivered the second child...the second child was about 6 months, at that time...the way that breast milk flows obstructed... by feeding breast milk to baby, obstruction of the way breast milk flows was open...when I went and fried snack at my neighbour house, breast became swelling immediately and became ache... I went to hospital, and so, doctor said me that breast nothing happened... then doctor gave me oral medicine...I felt relieved from breast ache...smell of burning or frying cannot expose to breast at all until now... in later, breast cannot expose to smell of burning or frying at all... I avoided going to the funeral house, going to the postpartum mother house and frying something with oil... when I went to the neighbour's funeral house, breast became swelling immediately... at that time, the second child was 3 years old already...and so, I went and see the doctor...when the doctor injected me, breast relieved from swelling.*

*In previous children, I did not understand, so I stayed beside the fire and I thought that staying beside the fire will be good. In this baby, I did not stay beside the fire because I am afraid that breast will get ill from being exposed to smells of burning. But I do not want to stay beside the fire. I also do not want to stay beside the fire. Then, if I would stay beside the fire, I will feel so hot. If I stay beside the fire, I am afraid that breast also will get ill from being exposed to smells of burning. I also do not want to stay beside the fire. It is hot...hot. Medicine is hot. Oral medicine is hot too and injection is hot too. If I would stay beside the fire, I would feel hotter. Therefore, I did not stay beside the fire in this baby. I thought that if I stay beside the fire, breast will get swelling from being exposed to smells of burning. I thought that when heat enters into my body, breast will get swelling, so I do not stay beside the fire. People who came and watched me during postpartum period told me that staying beside the fire is not related with breast get swelling from being exposed to smells of burning”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Sandar told the researcher that she did not stay beside the fire in the last baby due to her husband did not chop the *mee yat htin* (fire wood) and also no people to help her and as she said:

*“In this baby, I did not stay beside the fire because there were no people who will help me. There was no mee yat htin. In this baby, my husband did not chop mee yat htin. When I delivered my older children, people were full complement. I stayed beside the fire. In this baby, I did not stay beside the fire because there were no people to help me. My mother also was sick when I delivered this baby. My mother-in-law had died. There was only a person who is my sister-in-law to help me. That’s why I did not do anything. Doing shin ngway khan also was not done”*

*(Ma Sandar, 26-years-old, 3 children)*

A period of staying beside the fire after delivery of baby by rural home birth women varied in each. Most of rural home birth women stayed beside the fire for 7 days after delivery of baby, some stayed beside the big fire (but it is not very big fire) for 7 days and then they continued staying bedside the small fire for about 4 days or 5 days if the weather is the winter season and some stayed beside the fire for 10 days. The followings were:

*“I stayed beside the fire for 7 days. After staying beside the fire for 7 days with the big fire, a small fire was made continuously for about 4 days, 5 days. They (older people) let me stay beside the fire for forty five days. I could not stay beside the fire for forty five days. In previous child, I stayed beside the fire for only seven days. When I delivered this baby, the weather was cold and it was winter season. At dawn, weather is cold. So, they let me stay beside the fire for forty five days because they worried that I would get mee yat chan (postnatal cold)”*

*(Ma Moe, 22-years-old, 2 children)*

*“I stayed beside the fire for ten days”*

*(Ma Phyu, 28-years-old, one child)*

*“I stayed beside the fire for seven days during postpartum period. After staying beside the fire for seven days, the burner was thrown onto the ground”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Myint told the researcher that she stayed beside the fire for 7 days, although she did not want to stay beside the fire as she felt hot, she had to stay beside the fire due to her mother’s influence and as she said:

*“After delivery of delivery, the big fire was made. I said my mother not to make the fire because I do not want to stay beside the fire, I felt so hot and so messy in my mind. I could not say to my mother. It is their custom so I had to stay beside the fire. Although I did not want to stay beside the fire, I had to follow that practice. I felt so hot and I had sweating on my body because I had to sleep beside the fire. I had to sleep beside the fire for seven days. Doing like that it is good for health. But I did not want to stay beside the fire and I was disappointed because I felt so hot. The season that I delivered baby was summer, so I felt so hot and I had to stay beside the fire patiently. I had to massage my body with hot bricks daily for 7 days”*

*(Ma Myint, 29-years-old, 2 children)*

Ma Yu told the researcher that since she delivered her first child, the midwife told her not to stay beside the fire and staying beside the fire is hot and nowadays the postpartum mother no needs to stay beside the fire. She told that she stayed beside the fire due to her mother-in-law made the fire and after she has delivered baby, her mother-in-law made the fire. In addition, she told that if the fire was not made, she felt cold after delivery of baby and as she said:

*“Since the first born, the fire was made after delivery of baby. The midwife told me not to make the fire, making the fire is hot, although the fire is not made it nothing happens and nowadays the postpartum mother does not need to stay beside the fire. I stayed beside the fire because my mother-in-law made the fire. My mother-in-law made the fire after baby has come out from the abdomen (womb). If the fire was not made, I was not warm. I felt cold”*

*(Ma Yu, 36-years-old, 5 children)*

- **The reason of staying beside the fire by the postpartum mother**

Ma Mee, a key informant told the researcher that making the fire beside the postpartum mother is not to get *mee yat chan* (postnatal cold) in the postpartum mother and as she said:

*“Making the fire beside the postpartum mother is not to get cold (mee yat chan) in the postpartum mother”*

*(Ma Mee, 42-years-old, 5 children)*

Ma Moe also told the researcher that if the postpartum mother did not stay beside the fire, she can suffer from *mee yat chan* (postnatal cold) and joints ache from both hands and legs after about one month of delivery baby and as she said:

*“After delivery of baby, if the postpartum mother does not stay beside the fire and then if she stays away from the fire she can get mee yat chan (postnatal cold). If the postpartum mother did not stay beside the fire, after about one month of delivery baby, she will suffer from hands joints ache and legs joints ache. If the postpartum mother suffered from hands joints ache and legs joints ache, it is not cured. She always suffers from hands joints ache and legs joints ache”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Cho and Ma Phyu told the reseacaher their opinion regarding staying beside the fire by the postpartum mother. The followings were:

Ma Cho told that if there are *say puu* (antibiotic injection which is hot), the postpartum mother no needs to stay beside the fire and the postpartum mother stays beside the fire is due to there are no *say puu* (antibiotic injection which is hot). It means that after delivery of baby, the postpartum feels cold, then the midwife injected her *say puu* (antibiotic injection which is hot), then she does not feel cold and she becomes warm, thus, if there are *say puu* (antibiotic injection), the postpartum mother

no needs to stay beside the fire and if the midwife did not inject *say puu* (antibiotic injection which is hot) to the postpartum mother after delivery of baby, she feels cold, thus the postpartum mother needs to stay beside the fire and as she said:

*“Staying beside the fire is because there are no say puu (antibiotic injection which is hot). If there are say puu, the postpartum mother no needs to stay beside the fire”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Phyu told the researcher that she thinks nowadays, the postpartum mother no needs to stay beside the fire because these days are medicines days, but she told that mother and her neighbours who are the postpartum mothers stay beside the fire and as she said:

*“I think that nowadays, the postpartum mothers no need to stay beside the fire because these days are medicines days. Some postpartum mothers do not stay beside the fire. But I stayed beside the fire because I do not understand as I am a primiparous mother and all postpartum mothers from nearby this environment stay beside the fire”*

*(Ma Phyu, 28-years-old, one child)*

Auxiliary midwife, key informant, who has 13 years experiences in women's home birth delivery told the researcher her experience regarding staying beside the fire by the postpartum mother. She told that in the past all postpartum mothers stayed beside the fire, but now most postpartum mothers do not stay beside the fire and now the amount of postpartum mothers who stay beside the fire is getting less and less and also now they made the fire as small fire and in the past, they stayed beside the big fire and as she said:

*“In the past, postpartum mothers stayed beside the fire. Now, most of postpartum mothers do not stay beside the fire. Postpartum mothers stay beside the fire, however, the amount of the postpartum mother staying beside the fire is less. In the past, they made the big bonfire. Now, the bonfire becomes smaller”*

*(Auxiliary midwife, key informant)*

In addition, auxiliary midwife told the researcher her experiences regarding rural home birth women's cultural beliefs and practices. She told that in the past when she started as auxiliary midwife, most people followed ritual beliefs and

custom regarding home birth, but now ritual beliefs and custom gradually has diminished a little and as she said:

*“In the past, when I started as an auxiliary midwife, most people followed ritual beliefs and custom. Now, ritual beliefs and custom has diminished a little. Some are still following rituals and custom”*

*(Auxiliary midwife, key informant)*

The midwife, a key informant, 7 years experiences in women's home birth delivery also told the researcher her experiences regarding staying beside the fire by the postpartum mothers. She told that after delivery of baby, some postpartum mothers do not stay beside the fire, some stay beside the fire and some stay away from the fire and then, most of the primiparous women stay beside the fire. But, her experience regarding staying beside the fire is a little different from auxiliary midwife's experience because midwife told that most postpartum mothers stay beside the fire after delivery of baby and auxiliary midwife told that now, most of the postpartum mothers do not stay beside the fire. The midwife told that the health assistant (health care provider) says nothing rural home birth women not to stay beside the fire, and when she was posted in the study village, rural home birth women stayed beside the big fire, now they stay beside a small fire and the bon fire becomes gradually small and small in her reign because she scolded rural home birth women not to stay beside the big fire as she felt hot when she went and saw the postpartum mother for the postpartum care. The followings were as she said:

*“Some postpartum mothers do not stay beside the fire after delivery of baby. Some postpartum mothers stay beside the fire. Some postpartum mothers stay beside the fire but they stay at away from the fire. The reasons for staying beside the fire are that they said to bake the brick at the fire. Mostly, they stay beside the fire after delivery of baby. Although I told them not to stay beside the fire, it is nothing different. They made the fire. Most of the postpartum mothers who delivered baby as the first time stay beside the fire. I told them you will think that it is needed to stay beside the fire when you deliver next baby too. But they stay beside the fire. The day before yesterday, a postpartum mother who delivered baby as the first time stay beside the fire. But the fire was made away from her. The fire was not made near her. Sometimes when I told them as I do not want to come and watch for postnatal care*

*if the fire is made, there are also postpartum mothers who do not stay beside the fire. Postpartum mothers who stay beside the fire are many. I told them not to stay beside the fire. The health assistant (health care provider) says nothing them regarding making the fire. The health assistant let rural home birth women make the fire. Making the fire becomes less in my reign. The bon fire becomes small and small. In the past, when I came here, the bon fire is around a table. When I went and watched the postpartum mother who stays beside the big fire for postnatal care, the whole of my body perspired. The postpartum mother wore warm clothing also and covered their body with blanket too. At that time, it was at the beginning of I was posted in this village. I said nothing. I was looking that they were making the fire. Later, I shouted at them as I cannot come for postnatal care and I felt so hot and it was so hot why the big fire is made? Now, the bon fire becomes gradually small and small”*

*(Midwife, key informant)*



**Figure 4.19 Staying beside the fire by the postpartum mother**

### **Beliefs function of uterus: massaging abdomen with hot brick and pushing uterus up with hot brick**

The beliefs hold by rural home birth women regarding uterus were that after delivery of baby, there is no baby in the *je* (uterus), then *je* (uterus) looks for the baby in the abdomen. At that time, *je* is going and moving in the abdomen as *je* becomes float from here and there when *je* is looking for the baby in the abdomen and when *je* is looking for the baby, the postpartum mother feels that *je* is painful. They believed that *je* is painful due to *je* is looking for the baby in the abdomen. Besides, rural home birth women believed that after delivery of baby, if *je* is located in the lower part of the abdomen (supra-pubic region), baby is close each other and if *je* is located in the upper part of the abdomen, baby is far each other. So, after delivery of baby they pushed or lifted up abdomen with hot brick to reach *je* to the upper part of the abdomen for being far baby each other (which is like using family planning method. For example, after delivery of baby, the postpartum mother pushes *je* up or lifts *je* up with hot brick to the upper part of the abdomen to be far baby each other. If *je* is pushed or lifted up with hot brick, the next pregnancy will get late, then baby will be far each other and if *je* is located in the supra-pubic region (lower part of the abdomen), the next pregnancy will get soon, it means baby will be close each other).

Furthermore, they believed that if the abdomen is massaged with hot brick after delivery of baby, *je* (uterus) is involuntional. For involuntional of uterus, they massaged abdomen with hot brick after delivery of baby. They believed that after delivery of baby, uterus is wide and swollen, thus they massaged abdomen with hot brick from the outer surface of the abdomen for involution of uterus. They believed that if *je* (uterus) did not shrink, later uterus can becomes swollen and if *je* is involuntional, later there is no any danger. The reason they massaged abdomen with hot brick is for involution of uterus and the reason they pushed or lifted abdomen up with hot brick is to reach *je* to the upper part of the abdomen for being far baby between one baby and one baby. It is found that older people, rural home birth women's mothers and friend were influential to suggest rural home birth women to follow that practice.

Ma Mee, a key informant told the researcher that massage abdomen with hot brick is for involution of uterus and she massaged abdomen with hot brick for

involution of uterus because uterus is wide and swollen after delivery of baby. She told that if uterus shrank, there is no danger and if uterus did not shrink, uterus can become swollen and she has nothing happened because she massaged abdomen with hot brick for the shrinkage of the uterus. Then, she told that after delivery of baby, she pushed *je* up to the upper part of the abdomen for being far baby each other and as she said:

*“Massage abdomen with hot brick is for involution of uterus. I had to deliver baby so uterus is swelling, right. That’s why abdomen was massaged with hot brick to involute uterus. Uterus has to deliver baby so uterus becomes wide. That’s why the abdomen is massaged with hot brick from the outer surface for uterus involution because uterus is wide. I massaged abdomen with hot brick for uterus involution. There is no danger if uterus shrank. For example: in some women, uterus becomes swollen if uterus did not shrink. So I have nothing happened. I pushed abdomen up with hot brick is that pushing *je* up to the upper part of the abdomen not to close baby. Massage abdomen with hot brick is massage uterus with hot brick for uterus involution”*

*(Ma Mee, 42-year-old, 5 children)*

Ma Yu told the researcher that after delivery of baby, *je* is looking for the baby and she felt that *je* is painful when *je* is looking for the baby and when she pushed *je* up with hot brick, she felt that *je* is not painful. But she told that she is lazy to push *je* up to the upper part of the abdomen with hot brick, so she did not push *je* up with hot brick that much when she delivered the last baby and also in the previous children and she pushed *je* up a little bit because older people asked her to push *je* up with hot brick. She told that older people told her when *je* is pushed up with hot brick, if *je* reaches up baby is far and if *je* is located in the lower part of the abdomen (suprapubic region), baby is close. But she told the researcher that for being far baby, she will use the contraceptive injection because nowadays are medicines easy and she did not push *je* up that much. In addition, she told that she massaged abdomen with hot brick for involution of uterus and as she said:

*“Older people told me that push *je* up, when *je* reaches up, baby is far. After delivery of baby, *je* is looking for baby. Abdomen is massaged with hot brick is for uterus involution. After delivery, *je* is going when *je* is looking for baby. When *je* is*

*looking for baby, je is painful as je floats from there and je floats from here. When I pushed je up, I felt that je is not so painful. Sometimes, I pushed je up, blood clots flowed. Older people say that if je is pushed up, baby is far and if je is located at lower, baby is close. In this baby, I did not push je up that much. I pushed je up a little bit because I was lazy. Then, nowadays are medicine days. To be far baby, I can use the contraceptive injection. So I did not push je up that much. Also in the elder children, I did not push je up. I thought that there are medicines. I will use medicines. So I did not push je up that much. I just pushed je up a little bit because older people asked me to push je up. I did not push je up that much. I massaged abdomen with hot brick for uterus involution”*

*(Ma Yu, 36-years-old, 5 children)*

Ma Phyu told the researcher that after delivery of baby, she felt that *je* is moving and like only one small ball left in the abdomen and older people asked her to lift *je* up with hot brick for involution of uterus. But she told that she did not left *je* up with hot brick because she felt that the whole body is painful after delivery of baby, so she just pressed abdomen with hot brick for involutiouon of uterus and as she said:

*“The other postpartum mothers lifted je with hot brick. I did not lift je. I just pressed my abdomen with hot brick for je involutinal. After delivery of baby, je is moving in the abdomen because je is looking for baby. After baby is delivered, je floats. I felt tha je is going and I felt like only one ball (je is like a small ball) left in the abdomen. Je is moving. They (older people) asked me to lift je up for involution of je. How can I lift je because I felt that the whole body is painful”*

*(Ma Phyu, 28-years-old, one child)*

Ma Cho told the researcher that her friend told her to push *je* up to the upper part of the abdomen with hot brick to be far baby and if *je* is located in the supra-pubic region, baby is close, thus Ma Cho told that she has pushed *je* up with hot brick for one time only. But, she told that when she pushed *je* up with hot brick, *je* does not reach to the upper part of the abdomen and *je* stays at it’s place itself and when she pushed *je* up with hot brick, she felt so painful and she had to cry so she had to ask husband to get midwife. She told that that’s why she never pushed *je* up with hot brick at all when she delivered in the next babies and then she told that she does

not believe if *je* is pushed up with hot brick, baby is far and if *je* is located in the supra-pubic region, baby is close and as she explained:

*“People say that if je is at supra-pubic region, baby is close with each other. Je stays at it’s place itself. When je is pushed up to the upper part of the abdomen, je cannot reach to the upper part of the abdomen. I had pushed je up with hot brick. I had to cry. Pyaw (her friend) told me to push je up. I pushed je up to the umbilicus. Je re-fell. Je stays at it’s place itself. I could not push je up. She asked me to push je up is to be far baby each other. Why baby has to be far each other? It is not related with pushing je up. Pyaw (her friend) has told me that if je is pushed up, baby is far each other and if je stays at supra-pubic region, baby is close. When I pushed je up, I felt so painful. I had to cry very much. My husband had to go and get saya ma (midwife). I had pushed je up to the upper part of the abdomen in only one baby. I did not push je up at all in next babies”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Myint told the researcher that after delivery of baby, she massaged abdomen with hot brick due to older people asked her to massage abdomen with hot brick. But she told that after delivery of baby, she felt there was a round object in the abdomen like a small ball and when she asked her mother, her mother said her that it is called *je* and *je* must be pushed up with hot brick to be far baby and *je* must be massaged with hot brick for involution of uterus. She told the researcher that she followed as her mother told her and as she said:

*“After delivery of baby, I was massaging my abdomen with hot brick because older people told me that abdomen had to be massaged with hot brick. I felt that there was a round object like a ball in the abdomen. I did not say to my mother. I was continuously massaging my abdomen with hot brick. After that I said my mother, mother, there is a round object like a ball in my abdomen but I do not know what is it?, and so my mother told me that round object like a ball is je. Je cannot be pushed down with hot brick, you push je up with hot brick and je will disappear by pushing je up with hot brick. My mother told me that you push je up, when je reached up, baby is far each other. I also do not understand. I was following as my mother told me. Then my mother told me that if je is not massaged with hot bricks, je will not be involutinal”*

*(Ma Myint, 29-years-old, 2 children)*

However, some rural home birth women told the researcher that pushing *je* up with hot brick is for involution of *je* (*uterus*), for being far baby and to flow *je yay* (dirty blood means lochia). It was confirmed By Ma Moe and Ma Mya.

Ma Moe told the researcher that after delivery of baby, older people told her to push *je* up with hot brick and when *je* is pushed up with hot brick, *je* shrinks and when *je* shrinks, *je yay* also flow from the vagina and if *je* is pushed up with hot brick, baby is far as well. She told that she did not understand well and she just followed as older people asked her. But she told that she does not believe that baby is far if *je* (*uterus*) is pushed up with hot brick, and nowadays, she can use medicines for being far baby. She told that she pushed *je* (*uterus*) up with hot brick for involution of the uterus and and to flow *je yay* (lochia: dirty blood and bad blood) from the vagina and as she said:

*“Older people told me to push je up when I delivered my first baby, then I pushed je up because I did not understand, when they asked me to push je up, I also push je up, ha ha ha, and also in the last baby, I pushed je up with hot brick. Older people told me that je must be pushed up with hot brick and it will be okay only when je is involuntional, je yay (lochia) flows only when je is involuntional and if je is pushed up with hot brick, also baby is far each other. I think that it is not concerned. There are people who have baby is far and there are people who have baby is close. Although je is pushed up, there are people who have baby is close and there are people who have baby is far. I do not believe that. Although I do not believe that, I pushed je up with hot brick for involution of the uterus. That’s why I pushed je up with hot brick to flow je ya (lochia). I do not believe that pushing je up makes baby far. Nowadays, we can use medicine for being far baby”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Mya told the researcher that in previous children, she pushed *je* (*uterus*) up with hot brick for flow of *je yay* (lochia: dirty blood and bad blood), for being far baby and for involution of uterus, but she did not push *je* (*uterus*) up with hot brick in the last baby because midwife told her not to do anything *je* (*utuers*) for involution of *je* and midwife worried that she will have a postpartum haemorrhage if

she pushed *je* up with hot brick. Ma Mya told that in the last baby she just put hot-water bag on the abdomen to get a little heat at the uterus and as she said:

*“Older people and my mother told me that if je is pushed up with hot brick, je is involuntal and baby also is far. They told me to push je up with hot brick for being far baby. I pushed je up in previous children for involution of je is fast and for being far baby. I noticed that when I pushed that ball (je) up with hot brick, je yay (lochia) flows. Je yay (lochia) flows and a lot of je yay (lochia) flows. Pushing je up is to flow je yay, for involuntal of uterus and for being far baby. Je yay flows from the uterus. Saya ma (midwife) told me that no needed to do je anything and je is involuntal with medicines. In this baby (the last baby), I did not do je anything. I did not push je up too. I dared not touch je too because I am afraid that I will have a postpartum haemorrhage. Saya ma did not let me do. After I had delivered baby, she told me not to push je with hot brick because she is worried that I will have a postpartum haemorrhage if I pushed je up with hot brick. That’s why I dared not push je up too. I just put hot-water bag on the abdomen. When I asked saya ma (midwife) that can I put like that hot-water bag on the abdomen, she said that hot-water bag can be put. Now, in this baby, I did not push je up. I just put hot-water bag on the abdomen to get a little heat at the uterus”*

*(Ma Mya, 29-years-old, 3 children)*

#### **4.7 Experiences of rural home birth women regarding home birth**

Rural home birth women expressed their experiences regarding giving birth at home. There were four parts of home birth experiences expressed by rural home birth women such as experiences of giving birth at home, experiences of rural home birth women regarding midwife’s communication, labour pain experiences of rural home birth women, and experiences of rural home birth women during childbirth regarding supports from husband, neighbours, mother-in-law, midwife and husband’s aunty.

##### **Experiences of giving birth at home**

Some women expressed that when they delivered baby at home, they felt enjoyable and free too because they had to deliver baby at their home, their parents

and husband are at home, so they felt enjoyable and free too. Some women expressed their home birth experiences as giving birth at home is safe due to home is their home and when they delivered baby at home, there are parents and relatives at home and so that they can stay peacefully at home. Some women expressed that giving birth at home is free and also safe because home is their home. Some women expressed that giving birth at home is free and peaceful. Some women expressed that giving birth at home is fulfilling because there are their husbands and children at home and some expressed their home birth experiences as giving birth at home is free, safe, no stress and fulfilling because when they delivered baby at home people came and watched them and they have companion to consult as there parents and sisters are at home.

#### **Giving birth at home is free and enjoyable**

One of 7 rural home birth women who were informants expressed her home birth experiences as when she delivered baby at home, she felt enjoyable so that she expressed that giving birth at home is enjoyable and free too because she had to deliver baby at her home and home is the place that she always stays and also there are parents and husband also at home and as she said:

*“When I delivered baby at home, I felt enjoyable. Giving birth at my home is that I felt like being enjoyable and I am not down-hearted and I felt free. I felt free too because I had to deliver baby at my home. That’s why I felt like being enjoyable. Home is the place that I always stay, so giving birth at home is free and I felt enjoyable too. If I go and deliver at hospital or rural health centre, I will not be enjoyable. Then, my parents is at home and my husband also is at home, so I felt enjoyable too and I felt free too when I delivered baby at my home”*

*(Ma Mya, 29-years-old, 3 children)*

Ma Thein, a key informant also expressed her home birth experiences. She expressed that giving birth at home is free and enjoyable and giving birth at home makes her enjoyable and as she expressed:

*“I felt free and light in my mind if baby is delivered at home. Giving birth...how can I say it? ... I felt automatically enjoyable in my mind after I have delivered baby. At hospital, I will not be enjoyable in front of many people. At home, I felt like I am enjoyable. How can I say it, neighbours came and watched me and then,*

*they go back home. At that time, I had to feel more enjoyable when only my family left at home. Giving birth baby at home makes me enjoyable”*

*(Ma Thein, 26-years-old, 2 children)*

### **Giving birth at home is safe**

Ma Myint and Ma Yu told the researcher their home birth experiences as giving birth at home is safe but they expressed in different ways and as they expressed:

*“Giving birth at home is safe. Safety is that there are parents and relatives at home. So I felt that giving birth at home is safe”*

*(Ma Myint, 29-years-old, 2 children)*

*“Giving birth at home is safe. Giving birth at home is safer than hospital and rural health centre. Giving birth at home is safe is that I can stay at home peacefully. Hospital and rural health centre is not my home. So I do not want to deliver baby at hospital and rural health centre. Home is my home, so I can stay peacefully”*

*(Ma Yu, 36-years-old, 5 children)*

### **Giving birth at home is free and safe**

One out of 7 rural home birth women who were informants expressed her home birth experience as giving birth at home is free and safe because the place that she delivered baby is her home and as she expressed:

*“In my mind, giving birth at home is free and safe too. I felt safe because home is my home”*

*(Ma Moe, 22-years-old, 2 children)*

Ma Mee, a key informant expressed her home birth experience. She expressed that giving birth at home is free and as she expressed:

*“Giving birth at home is free. Yes, free”*

*(Ma Mee, 42 years-old, 5 children)*

### **Giving birth at home is free and peaceful**

One out of 7 rural home birth women who were informants expressed her home birth experience as giving birth at home is free and peaceful and as she expressed:

*“Giving birth at home is free and peaceful”*

*(Ma Phyu, 28-years-old, one child)*

### **Giving birth at home is fulfilling**

Ma Cho expressed her home birth experiences as when she gave birth at home she felt fulfilling because there were her husband and children at home. In addition, she said that if she would deliver baby at hospital, she will not be enjoyable because giving birth at hospital will cost her much and there is only husband to earn income and as she expressed:

*“When I gave birth at home, I felt fulfilling too. If I would deliver baby at hospital, I am not enjoyable as giving birth baby at hospital will cost me much because there is only one my husband to earn money. When I gave birth at home, I felt fulfilling is that my children are beside me and when I look at, there are my children and my husband at home. Yes, I felt fulfilling”*

*(Ma Cho, 33- years-old, 4 children)*

### **Giving birth at home is free, fulfilling, safe and no stressful**

As giving birth at home is free, fulfilling, safe and no stressful, there was only one woman among 7 rural home birth women expressed her home birth experiences. She expressed that giving birth at home is free and people came and watched her and she felt fulfilling too because she delivered at her home. In addition, she expressed that she felt safe and no stressful when she gave birth at home and she has companion to consult as her parents and sisters are at home and as she expressed:

*“Giving birth at home is free. There are people who came and watched me. There are parents at home. I have not delivered baby at rural health centre and hospital so I do not know. I had delivered baby at home only. Giving birth at home is fulfilling. Being fulfilling is free. I delivered all children at home. At home is free. I felt fulfilling because I delivered baby at my home. I felt that home birth is safe because I delivered baby at my home. There is nothing stress at home. I felt fulfilling when I gave birth at home. I have companion to consult because there are my parents, my sisters at home”*

*(Ma Sanar, 26-years-old, 3 children)*

### **Experiences of rural home birth women regarding the midwife's communication**

Ma Cho and Ma Mya among 7 rural home birth women who were informants expressed their home birth experiences regarding the midwife. Ma Cho expressed that midwife is very good-hearted and she told her to take medicine regularly when she received antenatal care and as she expressed:

*“Saya ma (midwife) is very good-hearted. Why I say that saya ma (midwife) is very good-hearted is that she treats pregnant women without differentiation. She is good-hearted. She treated us intimately. She said me to take medicine regularly and not to throw medicines. But I threw arr say (FERUP SOFTULES is iron) hee hee. She told me to take all medicines”*

*(Ma Cho, 33-years-old, 4 children)*

Ma Mya also expressed that when she received antenatal care, the midwife treated her amiably and when she delivered baby at home with the assistance of midwife, the midwife treated her amiably and as she expressed:

*“Saya ma (midwife) treated me amiably when I went and received antenatal care at the rural health centre. When she came and assisted me in delivery baby at home too, she treated me amiably”*

*(Ma Mya, 29-years-old, 3 children)*

### **Labour pain experiences of rural home birth women**

Ma Moe, Ma Mya, and Ma Phyu expressed their labour pain experiences. They expressed that they felt relieved from labour pain if they were walking during labour pain and if they were lying down in bed during labour pain, they felt painful and as they expressed:

*“When I started labour pain, I felt relieved from pain if I was walking. If I was lying down in bed during labour, I felt painful”*

*(Ma Moe, 22-years-old, 2 children)*

*“If I walk during labour pain, I think abdominal pain is relieved”*

*(Ma Mya, 29-years-old, 3 children)*

*“During labour pain, I walked. I could not lie down. When I lied down in bed I felt so painful. Labour pain is painful at only abdomen”*

*(Ma Phyu, 28-years-old, one child)*

However, Ma Myint and Ma Yu expressed their labour pain experiences as if they were walking during labour, they felt painful and if they were lying down in bed, they felt that labour pain relieved and as they expressed:

*“When I was in labour for my second pregnancy, Ma Mee Nge (auxiliary midwife) told me to stand while I was in labour. I also stood for easy birth. Ma Mee Nge (auxiliary midwife) told me that during labour, standing make easy birth. If the pregnant woman stand during labour, baby’s head descends at the vagina. Then, giving birth is easy..... I felt more painful when I stand during labour. I did not want labour pain. And so, I lay down in bed during labour. In my mind, lying down in bed is better.....If I was standing during labour, I felt painful. If I was lying down, I felt a little bit relieved from pain. My mother also told me not to lie down. She let me walk during labour as standing makes quick birth. Then, I said my mother that whether baby is delivered quickly or not, I could not be patient. I was in labour by lying down in bed”*

*(Ma Myint, 29-years-old, 2 children)*

*“In my mind, when I was in labour if my abdomen was rubbed, I had to feel that labour pain relieved. Then, while I was in labour, if I was walking, I had to feel that labour pain is more painful and if I was lying down in bed, I felt that labour pain relieved”*

*(Ma Yu, 36-years-old, 5 children)*

Among 7 rural home birth women who were informants, Ma Moe told the researcher that she felt labour pain relieved when auxiliary midwife was beside her during labour and as she expressed

*“During labour, I felt relieved from pain when auxiliary midwife was beside me. Only auxiliary midwife can help to come out the baby right? Only auxiliary midwife understand”*

*(Ma Moe, 22-years-old, 2 children)*

Some rural ural home birth women expressed their labour pain experiences as labour pain was so painful, and labour pain is different from normal abdominal pain. Some rural home birth women expressed that labour pain is so sharp and labour pain is not same with anything. Ma Myint, Ma Phyu and Ma Mya expressed their labour pain experiences. The followings were as they expressed:

*“In this baby, I started labour since around six o’clock in the morning and baby was delivered at around seven o’clock in the evening. Labour pain was so painful. Labour pain is different from normal abdominal pain. It was so painful”*

*(Ma Myint, 29-years-old, 2 children)*

*“Labour pain is so painful. I do not know how I have to express that feeling”*

*(Ma Phyu, 28-years-old, one child)*

*“Labour pain is not same with anything. Labour pain is so sharp. I do not want to feel labour pain”*

*(Ma Mya, 29-years-old, 3 children)*

However, Ma Sandar, 3 children motherhood expressed that when she delivered the first two children, she did not feel that labour pain was not so painful and when she delivered the last baby (third child), she had to feel that labour pain was a bit more painful than that of the first two children. But, she expressed that labour pain was not so painful and as she expressed:

*“In two oldest children among three children, I did not feel that labour pain was not painful much. In the last pregnancy, I had to feel that labour pain was more painful than labour pain of two oldest children. Labour pain is not so painful when I was in labour. I felt that labour pain was a bit more painful in the last pregnancy. But I felt that labour pain was not so painful”*

*(Ma Sandar, 26-years-old, 3 children)*

### **Experiences of rural home birth women during childbirth regarding supports from husband, neighbours, mother-in-law, midwife and husband’s aunty**

When the pregnant woman started labour pain, neighbours, the pregnant woman’s mother-in-law, mothers or relatives came and helped the pregnant woman who was in labour. According to the researcher’s interviews, husbands did not enter into the labour room while their wives were giving birth. During childbirth, neighbours, the pregnant woman’s mother-in-law, midwife and the pregnant woman’s aunty gave supports the pregnant women such as emotional supports, and physical supports. But in some cases, husband from the outside of the labour room also gave emotional supports his wife who was giving birth. Among 7 rural home birth women

who were informants, only Ma Mya's husband entered into the labour room and gave emotional support Ma Mya while Ma Mya was giving birth.

- **Husband's emotional support during childbirth**

During childbirth, most of women's husbands did not enter into the labour room while their wives were giving birth according to interviews. But, Ma Mya's husband entered into the labour room and gave emotional support to Ma Mya while Ma Mya was giving birth and as Ma Mya expressed:

*“My mother did not say me as encouragement. She did not say me anything. My husband was saying at beside me that birth is easy when you deliver baby, you do not have difficulty and birth is very easy, you do not worry and when you deliver baby, birth is always being easy. I have energy and I am happy too because he encouraged at beside me”*

*(Ma Mya, 29-years-old, 3 children)*

- **Husband and neighbour's emotional supports during childbirth**

Ma Cho expressed that she had energy when her husband gave emotional support outside the labour room during childbirth and when people (neighbours) beside her gave emotional support during childbirth and as she said:

*“My husband encouraged me outside the labour room as squeeze, squeeze, Ma Cho...do not be down-hearted... squeeze, during childbirth, yes. He encouraged me as squeeze, I know about my wife, I know that giving birth is easy in my wife. Also my husband from outside is encouraging me and people (neighbours) beside me are also encouraging me, so I have energy”*

*(Ma Cho, 33-years-old, 4 children)*

- **Mother-in-law's emotional support during childbirth**

There was only one woman who was given emotional support by her mother-in-law during her childbirth. She told the researcher that when she started labour pain, she always called her mother-in-law. In the last baby, she called her mother-in-law and her sister. She told that her mother-in-law encouraged her as every woman has to deliver baby like that, so when it is time to deliver baby, baby will come out and as she expressed:

*“When I started labour pain, I always asked someone to go and call my mother-in-law. In every child, I did not call the other people. When baby is delivered,*

*if I shouted, I am shy that the other people will know. So I did not call the other people. In this baby, my mother-in-law and my sister were called. My mother-in-law encouraged me that baby will come out, every-one has to deliver like that, baby will come out, and when it is time to deliver itself, baby will come out”*

*(Ma Yu, 36-years-old, 5 children)*

- **Neighbours’s physical support during childbirth**

Ma Phyu was given physical support by her neighbours during childbirth. Ma Phyu expressed that she felt labour pain relieved when neighbours beside her rubbed her abdomen and as she expressed:

*“Neighbours sat beside me and then, they rubbed my abdomen. When they rubbed my abdomen, I felt that labour pain relieved”*

*(Ma Phyu, 28-years-old, one child)*

- **Neighbours’s physical support and emotional support during childbirth**

Ma Myint also expressed her experiences regarding neighbour’s physical support and emotional support during childbirth. She expressed that her neighbours pushed her abdomen down when she squeezed baby and also her neighbours gave her emotional support and as she expressed:

*“Four neighbours pushed my abdomen down while I was in labour. When I squeezed baby, they also pushed my abdomen down. Neighbours encouraged me that squeeze, the baby is going to deliver, squeeze and then, fighting”*

*(Ma Myint, 29-years-old, 2 children)*

- **Neighbours and auxiliary midwife’s physical support and emotional support during childbirth**

Ma Moe expressed her home birth experiences regarding neighbours and auxiliary midwife’s physical support and emotional support during childbirth. She expressed that her neighbours and auxiliary midwife said her to tell them when she wants to squeeze baby as they will push her abdomen down a little bit and then her neighbours encouraged her to breathe regularly and not to think about upset things and as she expressed:

*“During childbirth period, three women who are my neighbours beside me said me that if you want to squeeze, tell us. Saya ma Mee Nge (auxiliary midwife)*

*also said me that if you want to squeeze, tell us, we will push your abdomen down a little bit. My neighbours beside me said that squeeze, squeeze, do not think about upset things, and breathe regularly”*

*(Ma Moe, 22-year-old, 2 children)*

• **Husband’s aunty and midwife’s emotional support during childbirth**

Ma Sandar expressed her home birth experiences regarding her husband’s aunty and midwife’s emotional support during childbirth of the last baby. She expressed that she had more energy when her husband’s aunty and midwife gave her emotional support during childbirth and as she expressed:

*“In the last pregnancy, my mother and only my husband’s aunty encouraged me during childbirth. The baby was delivered at three o’ clock in the morning. My husband stayed outside. Although husband stay outside, I did not have energy. In this baby, my husband’s aunty was saying me as squeeze, you nothing happen, squeeze...baby’s head is coming out, squeeze out. I felt that I had more energy when husband’s aunty was saying me as baby’s head is coming out, squeeze. Midwife also encouraged me as baby is going to come out, squeeze, squeeze. I had more energy when midwife is beside me”*

*(Ma Sandar, 26-years-old, 3 children)*

**Summary: The significance factors influencing women to give birth at home**

There are several factors influencing women to give birth at home. These factors included home birth cost is less, due to financial problems, home birth will be surrounded with family members, having supporters when the baby is delivered at home, home birth is a traditional practice, and home birth is our cultural norm. *Saya ma* (midwife) is also one of the influencing factors in decision making about giving birth at home for women. Women said that if the midwife told them as baby’s position in the womb is not good (e.g; umbilical cord wrapping around baby’s neck or baby’s position is in transverse lie) or mother’s health is not good, and if the midwife told them to go and deliver baby at hospital as they might have a difficult birth when they deliver baby at home, they would go to hospital and now the midwife did not tell them to go and deliver baby at hospital, thus they gave birth at home. The health care

provider (health assistant) is also another source of advice and influences women to give birth at home. The health care provider (health assistant) encouraged women to give birth at home as giving birth at home is good. Women perceived that home birth can follow traditional practices such as taking a bath *shin yay*, doing *shin ngway khan* and massage body with hot brick. In addition, women reported that they experienced no problems during their first home birth and they did not have any problems related to pregnancy. All these factors are influencing women to give birth at home.

**Summary: Cultural beliefs and practices related to home birth during pregnancy**

Cultural beliefs and practices followed by rural home birth women during pregnancy included preparing *mee yat htin*, dietary precautions and behavioural precautions, drinking *sa nwuin* (turmeric) powder for easy birth, for fart, not to feel *lay nar* (flatulence) and applying *sa nwuin* (turmeric) powder on the abdomen for fart, to feel comfortable in the abdomen and applying *sanwuin* (turmeric) powder on the extremities, not to adhere to the pregnant woman's body by *ma kaunn soe war* (evil-spirits) and avoidance of taking iron during pregnancy by rural home birth women.

- **Preparing *mee yat htin* (fire wood)**

Preparing *mee yat htin* (fire wood) under the ladder of the pregnant women's houses is a custom of the village. However, when they prepare *mee yat htin* they put *sue khats* (thorn branches) like plum thorn branches onto the *mee yat htin*. The reason why they put *sue khats* on the *mee yat htin* is that they have a belief that *ma kaunn soe war* (evil-spirits) are afraid of *sue khats* and if they did not put *sue khats* on the *mee yat htin*, *ma kaunn soe war* (evil-spirits) will stay at *mee yat htin* and they will stay at *mee yat htin* and when the pregnant woman delivered baby, she stays beside the fire after delivery of baby. Then, *mee yat htin* is carried on house and make the fire for the postpartum mother, then *ma kaunn soe war* follow on the house together with *mee yat htin* and then, *ma kaunn soe war* will bewitch the postpartum mother and also baby to get ill or something bad. Thus, rural home birth women put *sue khats* on the *mee yat htin* when they prepared *mee yat htin* under the ladder of the house. Therefore, the main reason of preparing *mee yat htin* by putting *sue khats* on the *mee yat htin* during pregnancy is not to stay at *mee yat htin* by evil-spirits for prevention of the postpartum mother and baby's health.

- **Dietary precautions**

There were 10 cultural beliefs of dietary precautions practiced by rural home birth women during pregnancy such as avoidance of eating *ba we* (octopus), avoidance of eating *bay thee* (Turkish orange egg plant), avoidance of eating *hta min choo* (crust of cooked rice), avoidance of consumption of twin banana, avoidance of consumption of mixed salad of papaya, avoidance of eating *hta min chann* (leftover rice), avoidance of eating chilli, avoidance of eating *chin* (cockle), avoidance of eating egg plants and avoidance of eating cassava plants potato. The main purposes of dietary precautions are not to harm or affect mother and baby's life and health, not to cause a prolonged labour in mother, not to have a difficult birth in mother, not to affect mother's health, not to have twin baby, and to maintain baby's health to be in good health.

Not to harm or affect mother and baby's life and health; rural home birth women avoided eating *ba we* (octopus), cassava plant's potato and *hta min choo* (crust of cooked rice). Not to cause a prolonged labour for mother; rural home birth women avoided eating *bay thee* (Turkish orange eggplant). Not to have a difficult birth in mother; rural home birth women avoided eating *hta min chann* (leftover rice) and *hta min choo* (crust of cooked rice), not to affect mother's health; rural home birth women avoided eating *chin* (cockle), not to have twin baby; rural home birth women avoided eating twin banana and to maintain baby's health to be in good health; rural home birth women avoided eating mixed salad of papaya and chilli.

- **Behavioral precautions**

There were (10) cultural beliefs regarding behavioural precautions practiced by rural home birth women during pregnancy period such as avoidance of preparing nappies, clothes and baby stuff for unborn baby, avoidance of having sex, attaching safety pin at clothes when the pregnant woman goes out in the evening, avoidance of sleeping at the afternoon, avoidance of putting hair down without tying hair at the evening, avoidance of doing rigorous activities, avoidance of telling lie to others by pregnant woman, avoidance of hair cutting during pregnancy period, avoidance of sitting at the entrance of the door during pregnancy and avoidance of sewing pillow during pregnancy. The main purposes of behavioral precautions are not to have a difficult birth in mother, not to bewitch them by evil-spirits, not to

deliver a stupid baby and not to miscarry into pregnancy or not to result baby in death when they deliver baby.

Not to have a difficult birth for mother; rural home birth women avoided telling lie to others during pregnancy, avoided sitting at the entrance of the door during pregnancy, avoided sewing pillow during pregnancy and avoided sleeping at the afternoon during pregnancy. Not to bewitch the pregnant woman by evil-spirits; rural home birth women performed attaching safety pin at clothes when they goes out in the evening during pregnancy and avoided putting hair down without tying hair at the evening during pregnancy. Not to deliver a stupid baby, rural home birth women avoided hair cutting during pregnancy and not to miscarry into pregnancy or not to result baby in death when they delivered baby; rural home birth women avoided doing rigorous activities during pregnancy, avoided having sex during pregnancy and avoided preparing nappies, clothes and baby stuff for unborn baby during pregnancy.

- **Drinking *sa nwuin* (turmeric) powder and applying *sa nwuin* (turmeric) powder on the abdomen**

The main purpose of drinking *sa nwuin* (turmeric) powder and applying *sa nwuin* (turmeric) powder on the abdomen were for easy birth, and not to feel flatulence in mother.

- **Applying *sanwuin* (turmeric) powder on the extremities**

The main purpose of applying *sanwuin* (turmeric) powder on the extremities was not to bewitch the pregnant woman by evil-spirits.

- **Avoidance of taking iron during pregnancy by rural home birth women**

The main purpose of avoidance of taking iron during pregnancy by rural home birth women was not to have a difficult birth in mother.

**Summary: Cultural beliefs and practices related to home birth during childbirth period (Intrapartum period)**

The cultural beliefs practiced by rural home birth women during childbirth included drinking *yay mum* (water over which mantras have been recited for easy birth effect) during labour pain, crossing over (*chay kyaw let kyaw*) pregnant woman's body during childbirth, pouring water to *shin kee* (who is *Nat* and is looking after the house or looking after the village) during labour pain, wearing of *hta mein* (nether garment

worn by Myanmar women) of mother or the other woman who has delivered baby easily by the pregnant woman during childbirth or during pregnancy and childbirth, and opening the doors and windows during childbirth. The main purpose of these five cultural beliefs practiced by rural home birth women during childbirth is for easy birth.

**Summary: Cultural beliefs and practices during postpartum period regarding home birth**

There were 12 cultural beliefs practiced by rural home birth women during postpartum period regarding home birth such as food restriction, sex abstinence, avoidance of cold and wind, resting, avoidance of lifting heavy objects, taking a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and its fruits are edible fruits in bunches) with cold water), to fall baby's umbilical cord quickly and also for umbilicus wound healing: putting gravy of thin pepper soup, saliva, ash, baked brick's powder, *say tot phat* and mat's ash and *je thar kho* (like small anthill which can be seen at the walls of home) into baby's umbilicus and singeing the postpartum mother's palm and sole at the fire, *shin ngway khan* (induced perspiration), massage the postpartum mother's body with hot brick, *shin kee phyay*, staying beside the fire, beliefs function of uterus: massage abdomen with hot brick and pushing uterus up with hot brick.

- **Food restriction**

Generally, the main purpose of food restriction by rural home birth women during postpartum period was not to affect the postpartum mother's health and baby's health. As specific purposes of each cultural beliefs regarding food restriction, in mother; not to suffer from hypertension, not to get itchy woman's vagina, not to suffer from *arr sayt* (cannot open mouth like lockjaw); rural home birth women avoided eating roselle. In mother; not to suffer from stiffness in the neck or back of mother, and not to get vagina itchy, rural home birth women avoided eating eggplant. In mother, not to suffer from hypertension, dizziness, headache and not to get itchy vagina; rural home birth women avoided eating *par lar tue* (kind of mackerel). In mother, not to suffer from hypertension, rural home birth women avoided eating pork. In mother, not to get itchy vagina rural home birth women avoided eating cockle and prawn. In mother, not to suffer from hypertension, rural home birth women avoided eating coconut milk. In mother, not to get cold; rural home birth women avoided

eating watermelon. In mother and baby; not to get *mee yat chay luu* (postnatal diarrhoea) in mother and not to get diarrhoea in baby, rural home birth women avoided eating chilli and pork's fat.

- **To occupy good health in mother:** rural home birth women performed avoidance of cold and wind, resting, *shin ngway khan* (induced perspiration), massage the postpartum mother's body with hot brick, staying beside the fire, taking a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and its fruits are edible fruits in bunches) with cold water, sex abstinence, and avoidance of lifting heavy objects.

As the specific purpose of each cultural belief and practice; not to get *mee yat chann* (postnatal cold) rural home birth women practiced avoidance of cold and wind. Not to get joints ache from both hands and legs, to be light body of mother and to perspire dirty sweats from mother's body, rural home birth women performed *shin ngway khan*. Not to get joints ache from both hands and legs, to be good mother's health rural home birth women performed massage body with hot brick. Not to get *mee yat chann* (postnatal cold) and not to get joints ache from both hands and legs rural home birth women performed staying beside the fire. Not to get joints ache from both hands and legs, to be light mother's body and to be good for mother's health, rural home birth women performed taking a bath *shin yay*. Not to be prolapsed uterus, not to get the next pregnancy and due to vagina has not yet healed, rural home birth women practiced sex abstinence. Not to be prolapsed uterus, not to get joints ache from both hands and legs and not to tear vagina suture, rural home birth women practiced avoidance of lifting heavy objects.

- **To fall baby's umbilical cord quickly and also for umbilical wound healing:** rural home birth women performed putting gravy of thin pepper soup, saliva, *je thar kho* (like small anthill which can be seen at the walls of home), ash, baked brick's powder, *say tot phat* and mat's ash into baby's umbilicus, and singing the postpartum mother's palm and sole at the fire.

- **Not to bewitch the postpartum mother and baby by *shin kee* (Nat who is spiritual spirit),** rural home birth performed *shin kee phyay* after childbirth

- **Regarding beliefs function of uterus:** to be far baby (means not to get the next pregnancy very soon) and to be involuntal of uterus rural home birth women performed massage abdomen with hot brick and pushing uterus up with hot brick.

**Summary: Experiences of rural home birth women regarding home birth**

There were four parts of home birth experiences expressed by rural home birth women such as experiences of giving birth at home, experiences of rural home birth women regarding midwife's communication, labour pain experiences of rural home birth women, and experiences of rural home birth women during childbirth regarding supports from husband, neighbours, mother-in-law, midwife and husband's aunty.

- **Experiences of giving birth at home**

Some rural home birth women expressed the same feelings. Some expressed their feelings in differently and respectively in each. The feelings expressed by rural home birth women regarding experiences of giving birth at home were that giving birth at home is free and enjoyable, giving birth is free and safe, giving birth at home is safe, giving birth at home is free and peaceful, giving birth at home is fulfilling and giving birth at home is free, fulfilling, safe and no stressful.

- **Experiences of rural home birth women regarding midwife's communication**

Women expressed their home birth experiences regarding with midwife's communication. The experiences expressed by rural home birth women regarding midwife's communication included: midwife is very good-hearted and treated them amiably when they received antenatal care and midwife told them to take medicines (iron) regularly and also midwife treated them amiably when they delivered baby at home with the assistance of midwife.

- **Labour pain experiences of rural home birth women**

Some rural home birth women expressed that during labour pain, they felt relieved from labour pain when they walked and they felt painful when they lay down in bed. However, some rural home birth women expressed that during labour, they felt painful when they walked and they felt relived from labour pain when they lay down

in bed. Only one woman expressed that during labour pain, she felt relieved from labour pain when auxiliary midwife was beside her.

Some rural home birth women expressed their labour pain experiences as labour pain was so painful. Some rural home birth women expressed that labour pain was so sharp painful and labour pain is not same with anything.

**• Experiences of rural home birth women during childbirth regarding supports from husband, neighbours, mother-in-law, midwife and husband's aunty**

Rural home birth women expressed their home birth experiences regarding supports from husband, neighbours, mother-in-law, midwife and husband's aunty. Most of the rural home birth women's husband did not enter into labour room when their wives were giving birth. In this regard, only one woman expressed her experiences that her husband entered into the labour room when she delivered baby and she expressed she felt happy and she got energy when her husband encouraged her. In addition, only one woman expressed her experiences regarding supports from her mother-in-law during childbirth. Some rural home birth women expressed that they had energy and felt relieved from painful when their neighbours, midwife, husband who stayed outside the labour room and husband's aunty gave emotional supports and physical supports.

## **CHAPTER V**

### **CONCLUSION, DISCUSSION AND RECOMMENDATIONS**

#### **5.1 Conclusion**

This study is an ethnographic study and uses qualitative methodology approach to understand cultural beliefs and practices during pregnancy, childbirth (intra-partum), and postpartum period regarding home birth among rural women, to describe home birth experiences among rural women, and to know how women's cultural beliefs and practices regarding home birth are shaped in the socio-cultural economic contexts among rural women, in Myanmar. This study was conducted in *Thabyay Ywa* village, Kyauk Lone Gyi village tract, Sub-Palauk Township, Palaw Township, Tanintharyi Region, Southern part of Myanmar. The informants of the study consisted of 7 rural home birth women who delivered at home within one year and recently delivered at home within 2 months, key informants who were two rural home birth women who delivered at home within 2-3 years, one midwife, and one auxiliary midwife. In-depth interviews were used to conduct the data. Based on the aims of this study, the researcher found out information to answer the research questions.

#### **Socio-cultural-economic factors influencing women to give birth at home**

There are several factors influencing women to give birth at home. The factors stated by rural home birth women included: home birth cost is less and when they would give birth at rural health centre or hospital it will cost them much and they gave birth at home is due to they do not have money and money is the main reason in decision making to give birth at home, home birth will be surrounded with the family members and having supporters when the baby is delivered at home, there are no people who will watch them ever if they would deliver baby at hospital or rural health centre, home birth is a traditional practice since in the past ancestors gave birth at home and also their mothers and sisters gave birth at home, home birth is our cultural

norm because the other women in the village are also giving birth at home, midwife did not tell them to go and deliver baby at hospital as they might have difficult birth during childbirth at home. In addition, the health care provider (health assistant) is also another source of advice and influences women to give birth at home and he (health assistant) encouraged women to give birth at home as giving birth at home is good. Moreover, women stated that home birth can follow traditional practices such as taking a bath *shin yay*, doing *shin ngway khan* and massage body with hot brick, mothers experienced no problems during their first home birth, and they did not have any problems related to pregnancy. All these factors are influencing women to give birth at home.

#### **Cultural beliefs and practices related to home birth during pregnancy**

The cultural beliefs practiced by rural home birth women during pregnancy included preparing *mee yat htin* by putting *sue khats* (thorn branches) on the *mee yat htin* (fire wood), dietary precautions and behavioural precautions, drinking *sa nwuin* (turmeric) powder: for easy birth, for fart, not to feel *lay nar* (flatulence) and applying *sa nwuin* (turmeric) powder on the abdomen: for fart, to feel comfortable in the abdomen and applying *sa nwuin* (turmeric) powder on the extremities, not to possess at the pregnant woman's body by evil-spirits and avoidance of taking iron during pregnancy by rural home birth women. The purpose of preparing *mee yat htin* by putting *sue khats* on the *mee yat htin* during pregnancy is not to bewitch the postpartum mother and baby by evil-spirits. The purposes of dietary restriction are not to harm or affect mother and baby's life and health, not to cause a prolonged labour in mother, not to have a difficult birth in mother, not to have twin baby. The purpose of behavioural precautions are not to have a difficult birth in mother, not to bewitch the pregnant woman by evil-spirits, not to deliver a stupid baby and not to miscarry into pregnancy or not to result baby in death when the pregnant woman delivers baby. The purpose of avoidance of taking iron during pregnancy is not to have a difficult birth in mother.

#### **Cultural beliefs and practices related to home birth during childbirth**

Cultural beliefs practiced by rural home birth women during childbirth (intra-partum period) included drinking *yay mum* (water over which mantras have been recited for easy birth effect) during labour pain, crossing over (*chay kyaw let*

*kyaw*) pregnant woman's body during childbirth, pouring water to *shin kee* (who is Nat and is looking after the house or looking after the village) during labour pain, wearing of *hta mein* (nether garment worn by Myanmar women) of mother or the other woman who has delivered baby easily by the pregnant woman during childbirth or during pregnancy and childbirth, and opening the doors and windows during childbirth. All these cultural beliefs practiced by rural home birth women during intra-partum (childbirth) period are for easy birth.

### **Cultural beliefs and practices related to home birth during postpartum period**

The cultural beliefs practiced by rural home birth women during postpartum period included 12 cultural beliefs and practices such as food restriction, sex abstinence, avoidance of cold and wind, resting, avoidance of lifting heavy objects, taking a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and its fruits are edible fruits in bunches) with cold water), to fall baby's umbilical cord quickly and also for umbilicus wound healing: putting gravy of thin pepper soup, saliva, ash, baked brick's powder, *say tot phat* and mat's ash and *je thar kho* (like small anthill which can be seen at the walls of home) into baby's umbilicus and singeing the postpartum mother's palm and sole at the fire, *shin ngway khan* (induced perspiration), massage the postpartum mother's body with hot brick, *shin kee phyay*, staying beside the fire, and beliefs function of uterus: massaging abdomen with hot brick and pushing uterus up with hot brick.

The purpose of food restriction by rural home birth women during postpartum period is not to affect the postpartum mother's health and baby's health. To occupy good health in mother: rural home birth women performed avoidance of cold and wind, resting, *shin ngway khan* (induced perspiration), massage the postpartum mother's body with hot brick, staying beside the fire, taking a bath *shin yay* (taking a bath by mixing boiling water of boiled *zaw ywat* (*zaw ywat* which is herbal leaves from kind of a big tree and its fruits are edible fruits in bunches) with cold water, sex abstinence, and avoidance of lifting heavy objects. To fall baby's umbilical cord quickly and also for umbilical wound healing: rural home birth women performed putting gravy of thin pepper soup, saliva, *je thar kho* (like small anthill

which can be seen at the walls of home), ash, baked brick's powder, *say tot phat* and mat's ash into baby's umbilicus, and singeing the postpartum mother's palm and sole at the fire. Not to bewitch the postpartum mother and baby by *shin kee* (Nat who is spiritual spirit), rural home birth performed *shin kee phyay* after childbirth. Regarding beliefs function of uterus: to be far baby (means not to get the next pregnancy very soon) and to be involutorial of uterus, rural home birth women performed massaging abdomen with hot brick and pushing uterus up with hot brick.

### **Experiences of rural home birth women**

This study found that women had positive experiences in home birth. Women mentioned that they feel home is warmer than the hospital. In this regard, the experiences of giving birth at home expressed respectively by rural home birth women included: giving birth at home is free and enjoyable because they have to give birth baby at their home, their parents and husbands are at home, and home is the place that they always stay, giving birth at home is free and safe because the place that they delivered is their home, giving birth at home is free and peaceful, giving birth at home is fulfilling because their children and their husbands are at home, and giving birth at home is free, fulfilling, safe and no stressful because they delivered baby at their home, people came and watched them when they gave birth at home, and they have companion to consult with their parents and sisters at home. In addition, rural home birth women expressed their home birth experiences regarding midwife's communication and these experiences include: midwife is very good-hearted and the pregnant women were treated without differentiation by midwife and they felt they were treated by midwife intimately and amiably when they received antenatal care at the rural health centre and also they were treated by midwife amiably when they delivered baby at home with the assistance of midwife.

Women who gave birth at home also mentioned experiences of labour pain and managed how to relieve the pain. Women expressed that during labour pain, they felt relieved from labour pain when they were walking and they felt painful when they were lying down in bed where as some women expressed that during labour pain, they felt painful when they were walking and they felt relieved from labour pain when they were lying down in bed. Only one rural home birth woman expressed that during labour pain, she felt relieved from labour pain when auxiliary midwife was beside her.

In addition, some rural home birth women expressed labour pain was so painful, labour pain was so sharp, labour pain was not same with anything and labour pain was different from normal abdominal pain. However, only one rural home birth woman expressed that she felt that labour pain was no so painful.

Women who delivered at home experiences supports from husbands, neighbours, mother-in-law, midwife and husband's aunty expressed. These include: women felt happy and got energy when husband gave emotional supports in the labour room during childbirth, women felt that they got energy when husband from the outside of labour room and neighbours encouraged during childbirth, women felt relieved from labour pain when neighbours gave physical supports, and women felt that they had more energy when husband's aunty and midwife gave emotional supports. In addition, some women expressed that they were given emotional supports by mother-in-law during childbirth, and some women expressed that they were given emotional supports and physical supports by auxiliary midwife and neighbours.

This study found that the cultural beliefs practiced by rural home birth women have both harmful effects and beneficial effects on both mother and baby's health. Among dietary precautions practiced by rural home birth women during pregnancy, avoidance of consumption of mixed salad of papaya, chillies, cockle, and cassava plant potato are beneficial effects on both mother and baby's health and avoidance of consumption of twin banana not to have twin baby, avoidance of consumption of octopus not to become woman's placenta like a octopus, avoidance of consumption of turkish orange eggplant not to become thick the skin of the pregnant woman's amniotic sac like the skin of the elephant's amniotic sac, avoidance of consumption of *hta min choo* (crust of cooked rice) not to have a difficult birth and avoidance of consumption of *hta min chann* (leftover rice) not to become large fetus in the womb and not to have a difficult birth in mother are negative points as their beliefs are the wrong beliefs. In addition, applying turmeric powder over their body during pregnancy not to bewitch them by evil-spirits and avoidance of taking iron supplements during pregnancy are harmful effects on mother's health.

Among behavioural precautions practiced by rural home birth women during pregnancy, avoidance of having sex and avoidance of doing rigorous activities are the positive points as the beneficial effects on both mother and baby's health and

avoidance of preparing nappies, clothes and baby stuff for unborn baby not to have a miscarriage or not to result baby as dead baby when baby is delivered, avoidance of sleeping at the afternoon not to become large fetus in the womb and not to have a difficult birth in mother, avoidance of telling lie to others by pregnant woman and avoidance of sitting at the entrance of the door during pregnancy not to have an obstructive labour, avoidance of hair cutting during pregnancy period not to deliver a stupid baby, and avoidance of sewing pillow during pregnancy not to close woman's vagina when baby is delivered like the hole of pillow is sewed are the negative points as their beliefs are the wrong beliefs.

During the postpartum period, among food restrictions practiced by rural home birth women, avoidance of consumption of roselle, *pa lar tue* (kind of mackerel), chillies, prawn, pork's fat, rays, coconut milk and cockle are the positive points as beneficial effects on both mother and baby's health. Besides, sex abstinence, avoidance of lifting heavy objects, taking a bath *shin yay* and avoidance of cold and wind during postpartum period are beneficial effects for mothers. But practicing of *shin ngway khan* (induced perspiration) and staying beside the fire during postpartum period are harmful effects for mothers and putting saliva, gravy of thin pepper soup, baked brick's powder, and mat's ash into baby's umbilicus are harmful effects for baby.

## 5.2 Discussion

### **Cultural beliefs and practices related with home birth have both beneficial effects and harmful effects on both mother and baby's health**

Cultural beliefs practiced by rural home birth women have harmful effects on both mother's health and baby's health. These harmful practices affect mother's health included applying turmeric powder over the body during pregnancy, staying beside the fire and *shin ngway khan* during postpartum period. In addition, avoidance of taking iron supplements during pregnancy also can affect mother's health. Royal College of Obstetricians and Gynaecologists (2013) stated that if the pregnant woman is anaemic during pregnancy, taking iron supplements may reduce the chance of needing a blood transfusion if she has a postpartum haemorrhage when she delivers

baby. This study also found that a key informant, 26 years old, 2 children motherhood had a postpartum haemorrhage after delivery of the second baby and she did not take iron during pregnancy. In addition, according to informal conversation, 28 years old, 3 children motherhood had a postpartum haemorrhage after delivery of the third baby. Postpartum haemorrhage is a leading cause of maternal deaths in the developing world including Myanmar. In the developing world, 25 % of maternal deaths are due to postpartum haemorrhage stated by World Health Organization. In Myanmar, UNICEF (2012) stated that severe postpartum haemorrhage is the main direct obstetric cause of maternal deaths, followed by eclampsia and abortion related complications. Moreover, rural home birth women have lack of health education related with taking iron supplements, and they do not know that taking iron supplements help the pregnant mother not to suffer from anemia. The cultural beliefs that can affect to baby's health were that putting gravy of thin pepper soup, saliva, *je thar kho* (like small anthill which can be seen at the walls of home), ash, baked brick's powder, and mat's ash into baby's umbilicus to fall baby's umbilical cord quickly and also for umbilicus wound healing. In fact, practicing of putting saliva, ash, gravy of thin pepper soup, baked brick's powder, mat's ash powder and *je thar kho* into baby's umbilicus wound, baby's umbilicus can get infection especially the bacterium *Clostridium tetani* which can cause tetanus can infect into baby's umbilicus.

However, this study found that some cultural beliefs practiced by rural home birth women have beneficial effects on both mother and baby's health such as avoidance of consumption of cassava plants potato and avoidance of doing rigorous activities during pregnancy. According to <http://www.nutrition-and-you.com/cassava.html>, cassava root composes natural toxic cyanogenic glycoside compounds linamarin and *methyl-linamarin*. Injury to tuber releases linamarase enzyme from the ruptured cells, which then converts linamarin to poisonous hydrocyanic acid. Thus, it is consumption of raw cassava root results in cyanide poisoning with symptoms of vomiting, nausea, dizziness, stomach pains, headache, and death. Thus, cassava plant potato should be cooked after peeling cassava plant potato to ensure them safe for consumption by removing these compounds. Besides, some beliefs were beneficial for mother's health such as avoidance of eating *pa lar tue* (kind of mackerel), sex abstinence, avoidance of lifting heavy objects, and taking a

bath *shin yay* during postpartum period. Moreover, rural home birth women followed traditional practices not only to be good for their health and baby's health but also they followed traditional practice which is pushing uterus up with hot brick after childbirth for family planning. Therefore, some cultural beliefs practiced by rural home birth women have beneficial effects on both mother and baby's health and also beneficial effect for the women's reproductive health.

Furthermore, as the positive points for mother and baby's health, some cultural explanations regarding food restrictions practiced by rural home birth women during pregnancy and postpartum period are scientific ways. For example, rural home birth women avoided consumption of cassava plant potatoes during pregnancy because they believed that if the pregnant woman consumed cassava plant potatoes, she may suffer from poison and also fetus in the womb may suffer from poison and rural home birth women avoided consumption of *pa lar tue* (kind of mackerel) and roselle during postpartum period because they believed that if the postpartum mother consumed roselle and *pa lar tue*, she may suffer from hypertension. Thus, rural home birth women's some cultural explanation regarding food restrictions are similar to the diagnosis of the modern medical practitioners and links to the modern medicine mode.

#### **Home birth is existing and making sense in women and family lives**

International Federation of Red Cross and Red Crescent Societies (2014, 23 May) stated that more than 70% of deliveries are home birth in Myanmar. International Federation of Red Cross and Red Crescent Societies (2014) mentioned that home birth is more common in rural areas, Myanmar. It seems that rural women have a very strong home birth practice in Myanmar. In this study, almost all women except women who want to do sterilization at hospital give birth at home. In fact, in the study area, the health care provider (midwife) wants rural women to give birth at rural health centre because maternal death is common in home deliveries in Myanmar especially in rural areas but in the study area there were no maternal deaths in home deliveries. Since the last two years, although midwife who is posted in the study area encouraged rural women to give birth at rural health centre according to the order of the superior officer, rural women are still keeping home birth practice. It was one thing to be considered why rural women are still keeping home birth practice in the contemporary days. This study found that why rural home birth women are still

keeping home birth practice because they have their own meanings regarding home birth as home birth has meanings in their lives such as giving birth at home is better health outcomes, home is the best place to birth, and home is comfortable to birth. Moreover, they gave birth at home as home birth cost is less when they compare cost in home birth cost and hospital birth cost, they gave birth at home even they know they have to pay more money to the midwife if they give birth at home and they have to pay less to midwife when they deliver baby at rural health centre, and they gave birth at home due to they have difficulty regarding supporters who will ever take care of them when they would deliver baby at hospital or rural health centre. Besides, they gave birth at home because they believed that home birth has a very few complications and also they trust the midwife as the midwife is skillful in women home birth delivery. Home birth is aimed to preserve the lives and well being of mother and child. This is similar to the biomedical mode, but differs in terms of the immediate social context in which they act upon, and of the cultural values that they espouse (Muecke, 1978).

In Myanmar, there is no specific policy related to home birth but nationally, it is generally recommended that all first birth should be delivered at hospital. Although health care providers encouraged rural women to give birth at hospital, most women in rural areas refuse to deliver their first births in hospital. Therefore, it is one thing to be considered for rural home birth women to support their home birth practice. In rural areas, midwife takes part a vital role in pregnancy and childbirth including providing basic health care for the people. To support rural women's home birth practice, midwives, the other health care providers and health policy makers should consider rural women's home birth practice and also should consider to redesign a comprehensive maternal and child health care services in order not to have maternal deaths in home deliveries in rural areas, Myanmar.

Nowadays are modern days according to mainstream. However, rural home birth women are still keeping a number of cultural beliefs and practices related to home birth. Most rural home birth women complained that they felt so hot and some complained that they had difficulty in breathing while they performed *shin ngway khan*. The midwife forbid rural home birth women not to practice *shin ngway khan* and practicing *shin ngway khan* can affect their health especially their lungs as they

have to breathe smoke vapour. But they followed that practice because they have their own meanings and logic in that practice as practicing *shin ngway khan* is good for their health.

In addition, midwife explained and educated the pregnant women that applying turmeric powder over the body can interrupt in decision of diagnosis by health care providers (e.g. if the pregnant woman applied turmeric powder over her body, her skin is yellowing so that health care providers can decide wrong diagnosis as the pregnant woman has jaundice), but rural home birth women continued to follow applying turmeric powder over their body during pregnancy period because they have their own meanings and logic that applying turmeric powder over the body during pregnancy help to have a easy birth and help not to feel flatulence when they started labour pain. Furthermore, rural home birth women avoided consumptions of chillies during postpartum period as they feared that they will get diarrhoea and also they worried that baby will get diarrhoea via breast milk when the mother got diarrhoea. Therefore, rural home birth women have their own meanings and logic related to along the way of home birth's cultural beliefs and practices.

#### **Cultural beliefs regarding food practiced by rural home birth women related to cosmology of medical system**

This study shows that the cultural beliefs regarding food practiced by rural home birth women link to some parts of cosmology of medical system applied by cultural interpretive medical anthropology. This cultural interpretive medical anthropology trys to understand the meanings of health and illness interpreted from the point of people's emic view. Home birth beliefs and practices reflect to the belief set of the people in the community. They practice diet such as avoidance of consumption of mixed salad of papaya and chillies as these foods are hot foods and consumed fried water convolvulus as cold food during pregnancy because belief in hot and cold, balance and imbalance.

This study shows that rural home birth women avoided consumption of hot foods such as mixed salad of papaya and chillies during pregnancy for good health as their bodies are hot and they worried that their body and also fetus in the womb will feel hot. After childbirth, rural home birth women stayed beside the fire to restore their body heat, avoided cold and wind, and consumption of thin pepper soup to get heat in

their body as they believed that the postpartum mother's body must be warm ever and the postpartum mother's body cannot touch cold for good health. These practices can be explained based on balance and imbalance theory, the cultures of Asian and Hispanic practice a system of cold and hot body balance (Galanti, 2004 is cited in Greene (2007) in South Orange, New Jersey in the United States of America). In this study of Greene (2007), women consider the pregnancy as hot state and thus, they avoided consumption of hot foods during pregnancy. According to Stone (2012), in the traditional Chinese medicine, body has a "hot" and "cold" nature which must be balanced for good health. Then, giving birth makes the body "cold", thus during the first month of postpartum period, the postpartum mothers are not allowed to drink cold water, go outside, or shower as all of which can make the postpartum mother's body cold. Furthermore, the postpartum mothers are suggested to eat hot foods like ginger.

This study also found that women take good food during postpartum period such as consumption of egg, fried chic hen and fried water convolvulus to get energy as they concern that this period women body is weak. This is the set of cultural belief regarding the body function. Similar to a study by Liamputtong (2008), this study showed that women in Chiang Mai, Northern Thailand considered that foods provided in hospital are not being suitable foods to consume for the postpartum mother as the postpartum mother might be in conflict with traditional diets during postpartum period, but medical practitioners from hospital look at women's nutrition and let the postpartum mother consume good foods such as beef, chicken, eggs, thus some postpartum mothers followed what medical practitioners suggested them.

#### **Modern medicine influences some cultural beliefs and practices regarding home birth**

Some cultural beliefs practiced by rural home birth women are under modern medicines. Preparing *mee yat htin* (fire wood) under the ladder of the house during pregnancy is the custom of the village but this study found that some rural home birth women did not prepare *mee yat htin* in their last pregnancy because the midwife always scold rural home birth women when they stay beside the fire which is the big fire not to make the fire as nowadays are modern medicines days and the postpartum mothers no need to stay beside the fire. Thus, some rural home birth women in this study did not follow preparing *mee yat htin* during pregnancy and they

did not stay beside the fire when they delivered their last baby. They revealed that nowadays are modern medicines days and staying beside the fire is hot and if there are modern medicines, postpartum mothers no need to stay beside the fire.

And also, according to the researcher's observation and informal conversation, every pregnant woman did not prepare *mee yat htin* especially woman who has delivered many children. They said that they will not stay beside the fire as staying beside the fire is hot and nowadays are medicines days and the postpartum mothers are available without staying beside the fire. Therefore, this study found that the practice of preparing *mee yat htin* during pregnancy and staying beside the fire during postpartum period have gradually diminished in the study village as the views of rural home birth women has changed based on the era which has changed from the olden days to modern days.

**Health care provider (health assistant) influences rural women to give birth at home and health care provider (midwife) treated rural home birth women amiably**

In Lao PDR, Sychareun et al., (2012) mentioned that the factor influencing women to choose home birth was that nurses are another source of advice and influence when women decided to give birth at home. But, in this study, the health care provider (health assistant) encouraged rural women to give birth at home as giving at home is good. Then, according to interview with midwife, she said that the health assistant did not forbid rural home birth women not to follow traditional practices such as staying beside the fire and then health assistant let rural home birth women practice. It seems that the health assistant supports rural home birth women's needs.

Regarding midwife's communication with rural home birth women, this study is quite similar to the previous studies. Janssen, Henderson, & Vedam (2009) pointed out home birth experiences of women in Canada. Women expressed their experiences that midwife provided them emotional support during pregnancy period. They felt they were treated with love and respect by midwife, and the prenatal visits were like visiting a friend. In this regard, the midwife treated rural home birth women friendly and amiably. Rural home birth women expressed their home birth experiences regarding midwife's communication as the midwife is good-hearted and the midwife

told them to take medicines regularly when they received antenatal care during pregnancy and also midwife treated them amiably when they delivered baby at home with the assistance of the midwife.

## **5.3 Recommendations and further study**

### **5.3.1 Recommendations**

The findings of this study will support health care providers in order to understand well of rural home birth women's cultural beliefs and practices. And also according to the findings of this study, health care providers should be aware of rural home birth women's some cultural beliefs and practices that have harmful effects on mothers and baby's health in order to re-design maternal and child health services especially in rural area. Culturally-specific knowledge from this study should be used to guide policy-makers and health planners in the future development of safe motherhood initiatives in developing countries. Midwives have a unique opportunity to ensure that care given during childbirth is clinically safe and culturally sensitive.

#### **For maternal and child health care services**

Based on the findings of the study, health care providers still require to provide health education to rural home birth women and rural home birth women have lack of health education related with maternal and child health, so the health care providers (health assistant and midwife) should provide more health education related with the followings:

- Should provide health education regarding taking iron supplements during pregnancy to reduce the likelihood of needing a blood transfusion if a postpartum haemorrhage occurs after childbirth
- Should provide more health education rural home birth women not to apply turmeric power over their body in order not to interrupt in decision making of diagnosis by health care providers
- Should provide health education regarding practicing of doing *shin ngway khan* (induced perspiration) during the postpartum period as practicing *shin ngway khan* may affect rural home birth women's health

- Should provide health education regarding practicing of putting gravy of thin pepper soup, saliva, *je thar kho* (like small anthill which can be seen at the walls of home), ash, baked brick's powder, *say tot phat* (traditional medicine which is yellow powder) and mat's ash into baby's umbilicus to fall baby's umbilical cord quickly and also for umbilicus wound healing as bacterium *Clostridium tetani* which can cause tetanus can infect easily into baby's umbilicus wound

- And also, health care providers should provide rural home birth women's mothers, mother-in-laws, neighbours and older people regarding some cultural beliefs and practices of home birth that have harmful effects on both mother and baby's health because they are influential to suggest rural home birth women to follow cultural beliefs and practices regarding home birth

Moreover, health care providers (midwives and health assistant) should conduct home visits to the pregnant women's houses and the postpartum mother's houses to provide more effective health education regarding maternal and child health. Health care providers (midwives and health assistant) and health policy makers should consider for support home birth practice as the needs of rural women.

### **5.3.2 Further study**

As further study, receiving antenatal health care services by the pregnant women in the study area should be studied deeply in order to understand their perceptions of antenatal care services such as beliefs of taking iron supplements during pregnancy.

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## **APPENDICES**

## **APPENDIX A**

### **GUIDELINES FOR OBSERVATION**

#### **Observation guideline of the study area**

##### **(1) Geographical Characteristics of the village**

- Distance from township hospital
- Health care availability
- Water resource
- Electricity
- Communication and transportation

##### **(2) Demographic data**

- Population and household
- Education
- Race and religion

##### **(3) Economic situation**

- Income status
- Types of occupation

##### **(4) Social structure**

- Types of family
- Decision making in the family
- Social factors

##### **(5) Health and reproductive health profile**

- Women's health
- Family planning situations

### **Participant observation guideline**

- Observe home birth women's decision making power within the family.
- Observe home birth women's behavior and facial expression to know their internal feelings related to home birth experiences.
- Observe home birth women's practices based on cultural beliefs during, childbirth and postpartum period if the researcher has the opportunity.
- Observe home birth women's economic status.
- Observe pregnant women's food and behavior restrictions if the researcher has the opportunity.

## **APPENDIX B**

### **GUIDELINES FOR IN-DEPTH INTERVIEWS**

#### **In-depth interview guideline for home birth women**

##### **(1) Demographic Characteristics:**

- What is your name?
- How old are you?
- How old were you when you had the first child? (if they are multiparous)
- What level did you attend the school?
- What is your religion?
- Are you a native of the village or not in village?
- How long have you been staying in this village?
- What types of family (nuclear or extended family)
- What is your job? What is your husband`s job?

##### **(2) Health History**

- How many times did you have pregnancy?
- Are you primiparous or multiparous mothers? If multiparous, how many children do you have?
- How many times did you receive antenatal care for the last pregnancy?
- Did you use contraceptive pills or injections for family planning?  
Could you tell me about your family planning practice?
- Were all of deliveries taken place at home? ( If multiparous women)

- All of deliveries took place at home with the assistance of midwives or health assistant or auxiliary midwives or traditional birth attendants (TBA)?
- Did you have any complications during childbirth period and postpartum period at home birth? If so, how did you solve those problems?
- Why did you choose to give birth at home?
- What are the reasons which led to the decision to give birth at home?
- What were supporting and inhibiting factors that influence the decision and the most significant reasons for giving birth at home?
- Do you think having a baby at home is safe? If yes, why? Or if no, why?

**(3) Cultural beliefs, practices, and experiences during pregnancy period regarding home birth**

- What is the life of a pregnant woman? Tell me please your opinion.
- Do you think pregnancy is a disease? Tell me your opinion, please.
- What do you think of pregnancy period?
- Were there any differences between normal food and food that you ate during pregnancy period? If yes, why? Or if no, why? Who advised you to do like that? Did you believe or not?
- What kind of food should pregnant women eat? If yes, why? Or if no, why?
- What kind of food pregnant women should not eat? If yes, why? Or if not, why?
- Did you prepare for easy births by eating green vegetables or taking magical shower during pregnancy period? Who suggested you to do like that? Did you follow or not?

- What were the rituals among rural women during pregnancy period?
- What were the spiritual and super-natural beliefs and practices surrounding pregnancy period?
- What behavior changes or restrictions (avoidance of lifting heavy objects, avoidance of sexual intercourse and so on) did you follow during the first trimester, the second trimester and the third trimester of pregnancy period? Why?
- What kind of work did you avoid during pregnancy period?
- How do you think the woman's body regarding pregnancy and childbirth? Please tell me your opinion.
- What kind of things did you prepare to give birth at home? If yes, what are these things? Or if not, why?
- What experiences did you have during pregnancy period?

**(4) Cultural beliefs, practices and experiences during childbirth period at home**

- How did you feel during childbirth period at home? Did you feel home birth is safe and comfortable or not?
- Do you think birth is an illness or a natural physiological process? Could you tell me your opinion?
- Why did you give birth at home? Who advised you to give birth at home?
- Did you believe homebirth is safe? If yes, why? Or if no, why?
- What were perceptions of medical risks regarding childbirth at home?
- What were the rituals among rural women during childbirth period?
- What were the spiritual and super-natural beliefs and practices during childbirth period?
- What were cultural beliefs related with placenta burial.

- What experiences did you have during childbirth at home?
- Did you believe or not that home birth is safe? If yes, why? Or if no, why?

**(5) Cultural beliefs, practices, and experiences during postpartum period at home**

- What did you think of postpartum period?
- How long do you mean by postpartum period?
- What were the cultural beliefs and practices among rural postpartum mothers? Please tell me.
- What were rituals, spiritual and super-natural beliefs during postpartum period?
- What kind of cultural beliefs and practices did you follow? If yes, why? How did you feel? Who advised you to follow these cultural beliefs and practices?
- Did you believe or not these cultural beliefs and practices during postpartum period?
- How long do postpartum mothers stay by the fire after delivery?
- Who advised you to stay beside the fire? How long did you stay by the fire?
- Did you believe or not staying by the fire? What would happen to you if you did not follow?
- What kind of food do women take during postpartum period?
- What kind of work did you avoid during postpartum period?
- What behavior changes or restrictions (resting, avoidance of heavy things and sexual activity, avoidance housework, staying inside the home, not bathing or washing hair and so on) did you follow during postpartum period?
- Are there any differences between drinking in the normal and in the postpartum period? Tell me please.

- Are there any beliefs what kind of food postpartum mother should not eat and should eat during postpartum period?
- Are there any cultural beliefs what kind of work postpartum mother should do and should not do during postpartum period?
- What kind of herbal medicine did you take during postpartum period?
- What kind of self treatment or self medication and healing did you use during postpartum period?
- Did you receive advice from relatives, friends and neighbor?
- Did you consult with experiences lay persons?
- How long postpartum mothers should rest in bed or at home after delivery? Tell me please your opinion?
- What experiences did you have during postpartum period?

### **In-depth interview guideline for home birth women who delivered at home within 2-3 years as key informants**

- How old are you?
- To which level did you attend the school?
- What is your job?
- How long have you been staying in this village?
- Who take care of you during childbirth and postpartum period?
- What kind of suggestions did you receive from others regarding home birth cultural beliefs and practices during pregnancy, childbirth and postpartum period?
- What experiences did you have during pregnancy, childbirth, and postpartum period regarding home birth?
- How many children do you have?
- All of deliveries took place at home with assistance of midwife or health assistant or traditional birth attendants (TBA)?
- Why did you choose home birth?
- Who suggested you to give birth at home?

- Did you believe homebirth was safe and convenient? How did you feel?
- What kind of cultural beliefs and practices did you follow during pregnancy, childbirth, and postpartum period? What were the rituals among rural women regarding pregnancy, childbirth and postpartum period?
- What were the spiritual beliefs and super-natural beliefs regarding pregnancy, childbirth and postpartum period?
- What behavior or restriction changes did you follow during pregnancy, childbirth and postpartum period? Please tell me.
- Did you prepare anything for easy birth when you were pregnant?
- What kind of food did you eat during pregnancy and postpartum period?
- Whom did you receive these suggestions regarding cultural beliefs and practices from? Did you follow all?
- Could you tell me the experiences that you had regarding homebirth?

### **In-depth interview guidelines for midwife**

- How long have you been working this job in this village?
- What kinds of cultural beliefs and practices regarding pregnancy, childbirth and post-partum period are you familiar with?
- Could you tell me your opinion about these cultural beliefs, and practices?
- How do you think about rural home birth women following these cultural beliefs and practices regarding pregnancy, childbirth and postpartum period?
- Could you tell me about your experiences being as a midwife in women`s home birth delivery?

- Could you tell me why most women give birth at home rather than give birth a baby at rural health center or hospital? Could you tell me your opinion?

### **In-depth interview guidelines for auxiliary midwife**

- How long have you been working as an auxiliary midwife in this village?
- What kind of cultural beliefs and practices regarding pregnancy, childbirth and postpartum period are you familiar with?
- Could you tell me your opinion about these cultural beliefs and practices?
- Could you tell me your experiences related with women home delivery between nowadays and before?
- Could you tell me why most women give birth at home?

## APPENDIX C

### TIMELINE FOR THESIS

Thesis timeline	2014							2015		
	13 <sup>th</sup> June	July	20 <sup>th</sup> Aug	Sept	Oct	Nov	20 <sup>th</sup> Dec	Jan	Feb	March
Proposal defense										
Preparation for data collection										
Data collection										
Data analysis										
Report writing										
Finalized report										

## **BIOGRAPHY**

<b>NAME</b>	Cho Hmi Naing
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<b>UNIVERSITY ATTENDED</b>	University of Nursing (2005-2008), Yangon, Myanmar Mahidol University, Thailand Health Social Science International Program (2013-2015) M.A. (Health Social Science)
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