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A study on traditional practice of head-shaving in newborn care among mothers in a tertiary care centre in Malda, West Bengal, India

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ABSTRACT

Background: Newborn period is culturally and traditionally sensitive in every society. Different communities have different traditional practices when it comes to taking care of newborn. Head-shaving in newborn period is one such unique traditional practice existent among rural population of West Bengal. This study was conducted to explore the traditional practice of head-shaving and to highlight its related morbidities among newborns following head-shaving. **Methods:** This was a descriptive, cross-sectional study conducted at triage of special newborn care unit of Malda Medical College and Hospital among 650 mothers who presented to us with their sick newborns following head-shaving. After obtaining informed consent, mothers were interviewed. The data were collected using pre-designed questionnaires. Statistical analyses of the data were done using SPSS version 21.

Results: In the present study, majority (52.62%) of the mothers were within the age group of 18-21 years and 94.15% belonged to Muslim community. Neonatal head-shaving was usually done on 4th day of life (48.15%) and on 10th day of life (28.77%). Baby bath following head-shaving was given in 49.54% newborns using pond water and 77.70 % mothers used crude mustard oil for massaging following baby bath. Following head-shaving, 37.69% of newborns presented with poor feeding, 33.23% with abdominal distension and 61.23% presented with respiratory distress.

Conclusions: Findings of present study highlights the harmful aspects of traditional practice of head-shaving among newborns in rural Bengal. This practice can be avoided by proper health education and counselling of the mothers and her associates involved in newborn care.

Keywords: Head-shaving, Newborn, Traditional practice

INTRODUCTION

Newborn period extends from the time of birth to first 28 days of life. This period is culturally and traditionally sensitive. India is a vast country with diversity in terms of its geographical, religious, linguistic, traditional and cultural practices. Different culture has different beliefs and practices. These age-old traditional practices play an important role in the care of newborns especially in rural areas of West Bengal. Head-shaving, i.e., shaving of scalp hair in newborn period is one such traditional practice found mostly among rural population of West Bengal.

As a result of various national programs and activities, neonatal morbidity and mortality have declined but not to the desired level. Neonatal mortality rate in India at present is 22.7 per 1000 live births.² It is far behind the target of single-digit neonatal mortality rate to be achieved by the year 2030.³ This is because India has its own cultural beliefs and traditional practices exercised in newborn care.

Cultural and traditional practices are different in different parts of India. These are also different among different communities. Not all customs and traditional practices are harmful for the newborn. But the traditional practice of head-shaving in newborn period is prevalent among rural population of Bengal and it may prove harmful at times. Newborns frequently fall sick following the ritual of head-shaving.

Mothers usually gather information about newborn care practices from the elders of the family, relatives and traditional birth attendants. They firmly believe in elder's advice and listen to it. Hence, health education is to be targeted to mothers as well as these groups of people who are involved in newborn care.

This study was done to describe the selected traditional practice of head-shaving in newborn period in rural area of Malda, West Bengal.

Aims and objectives

- To explore the traditional practice of head-shaving in newborn care in a rural area of West Bengal.
- To find out various morbidities related to neonatal head-shaving.

METHODS

This was a cross-sectional study conducted by interview technique in local language using a pre-designed questionnaire. This study was conducted in Special Newborn Care Unit (SNCU) of Malda Medical College and Hospital, Malda, West Bengal. 650 mothers were enrolled for the study from March 2019 to September 2019.

Inclusion criteria

Inclusion criteria were post natal mothers attending triage of SNCU of Malda Medical College and Hospital, Malda with their sick newborns following head-shaving.

Exclusion criteria

Exclusion criteria were post natal mothers who were not willing to participate in the study.

Data collection

The mothers were explained about the study purpose and informed consent was obtained from each willing mother. The data were collected by interview method from all the willing mothers who came to triage of SNCU with their sick babies following head-shaving. Mothers were allowed to take help from close family members while sharing information regarding socio-demographic profile of the family.

All data were recorded in the pre-designed questionnaires. Privacy and confidentiality were maintained at all levels of the study.

Intervention given

All sick newborns following head-shaving were examined thoroughly at triage. 85 newborns were sent back to home after counseling of the mothers and family members. 565 newborns required admission to SNCU for stabilization and proper treatment.

Data analysis

SPSS version 21(Statistical Package for Social Sciences) and Microsoft Excel were used to analyze the data. Frequencies were presented in the form of percentages and Chi-square test was applied to know the association between variables.

RESULTS

In this study, table 1 revealed that majority (52.62%) of the mothers were within the age group of 18-21 years and 15.69% mothers belonged to less than 18 years. 94.15% were Muslims and 52% belonged to joint family. Majority (62.92%) of mothers were primipara and 63.85% had married life of 2 years. Most of the mothers had some formal education. 23.85% had studied upto 7th standard and 26.77% had studied upto 9th standard. 18.77% had no formal education. 45.85% belonged to socio-economic status II and 10% belonged to status IV according to modified B.G.Prasad classification. 4

Table 1: Socio-demographic profile of the mothers.

Parameter	Variable	Number	Percentage
Age (yrs)	<18	102	15.69
	18-21	342	52.62
	22-25	63	9.69
	26-30	87	13.38
	>30	56	8.62
Religion	Muslim	612	94.15
	Hindu	38	5.85
Family	Joint	338	52
	Nuclear	312	48
Parity	Primi	409	62.92
	Multi	241	37.08
Duration of	2	415	63.85
married life	3-5	157	24.15
(yrs)	>5	78	12
	No formal education	122	18.77
Education	5 th standard	137	21.08
Education	7 th standard	155	23.85
	9 th standard	174	26.77
	12 th standard	62	9.53
Socio-	I	132	20.30
	II	298	45.85
economic	III	115	17.70
status	IV	65	10
	V	40	6.15

Table 2 revealed that neonatal head-shaving was usually done on 4th day of life (48.15%) and on 10th day of life (28.77%). In 66.92% cases head-shaving was done with a used blade and 33.08% cases were done with a new blade. Baby bath following head-shaving was given in 49.54% cases using pond water and in 25.38% cases using river water. 77.70 % mothers used crude mustard oil for massaging following baby bath.

Table 2: Neonatal head-shaving and related cultural practices.

Parameter	Number	Percentage		
Head shaving done on				
4 th day	313	48.15		
10 th day	187	28.77		
21st day	105	16.15		
Any other day	45	6.93		
Head shaving done with	l			
New blade	215	33.08		
Used blade	435	66.92		
Baby bath following head shaving with				
Pond water	322	49.54		
River water	165	25.38		
Drinking water	163	25.08		
Application of oil following baby bath				
Crude mustard oil	505	77.70		
Baby oil	105	16.15		
No application	40	6.15		

Table 3 revealed the clinical features of sickness in newborns following head-shaving. 37.69% of newborns presented with poor feeding and 14.61% presented with lethargy. Abdominal distension was the presentation in 33.23% cases and 61.23% presented with respiratory distress.

Table 3: Presenting clinical features following head shaving.

Parameter	Number	Percentage
Lethargy	95	14.61
Poor feeding	245	37.69
Temperature instability	55	8.46
Vomiting	22	3.38
Abdominal distension	216	33.23
Respiratory distress	398	61.23
Skin rash	45	6.92
Skin pustules	23	3.53
Minor cuts and abrasions on scalp	57	8.76

On applying Chi-square test for socio-demographic variables and traditional practice of head-shaving it was found that the age variable was statistically significant (p<0.05) with the practice of baby bath in pond water and application of crude mustard oil. Religion of the mother was statistically significant with the traditional practice of

head-shaving done with a used blade and applying crude mustard oil. Baby bath following head-shaving was also statistically significant with the presenting clinical features of abdominal distension and respiratory distress.

DISCUSSION

India is a vast country with diversity in terms of its geographical, religious, linguistic, traditional and cultural practices. Some of the traditional and cultural practices are harmful to the health of newborns. Understanding of the community along with their cultural beliefs and traditional practices in newborn care is necessary to implement any program effectively for promotion of newborn health.⁵

This study explored the traditional practice of head-shaving in newborn period among mothers in Malda, West Bengal, India. Mothers considered birth hair as very bad for her newborn and believed in baby's scalp-shaving within the first month of life. Present study revealed that most of the newborns (48.15%) got their head shaved on 4th day of life, 28.77% newborns on 10th day and 16.15% on 21st day of life. These three days are considered as earmarked days for head-shaving ritual in rural Bengal. Head-shaving was done with razor using a new blade in 33.08% cases and a used blade in 66.92% cases. Mothers explained that a new blade is much sharper than a used blade and it might cause injury to baby's scalp during shaving.

Baby bath following head-shaving was a ritualistic practice. This study revealed that 49.54% mothers used pond water for baby bathing. 25.38% mothers used river water and 25.08% mothers used drinking water for bathing. Water from natural water bodies like pond or river was considered holy by most of the mothers.

Application of oil following baby bath on the day of head-shaving was found to be a traditional practice of rural Bengal. Present study revealed that 77.70% mothers used crude mustard oil and 16.15% mothers used commercial baby oil available in the local market. Several studies revealed oil massage before bath routinely. Sashikala et al reported that 79.4% used oil massage before bath.⁶ Nethra et al revealed that 87% of mothers massaged their newborn with oil.⁷ Reshma et al reported that 95% mothers massaged baby with oil before bath.⁸ Bangari et al also reported that 71% mothers used oil massage before bath, 40.3% using commercial baby oil and 27.3% using mustard oil.¹ According to Shankaranarayanan et al, coconut oil massage resulted in significantly greater weight gain velocity.⁹

The present study revealed that newborns frequently fell sick following the ritual of head-shaving. They presented with one or more of the clinical features enlisted in Table 3. 14.61% developed lethargy and temperature instability was noted in 8.46% newborns. Most of the newborns presented with poor feeding (37.69%), abdominal

distension (33.23%) and respiratory distress (61.23%). Some presented with skin rash (6.92%), pustules (3.53%) and minor cuts/abrasions on scalp (8.76%). Most of the newborns were brought to us 3 to 5 days after the headshaving ritual. Out of 650 newborns, 85 babies who presented with minor cuts/abrasions on scalp, skin rash or pustular eruption on skin, but otherwise stable, were sent to home after proper counselling of mothers and family members. Few babies were advised ointments for local application. 565 newborns required admission to SNCU for stabilization and proper treatment.

CONCLUSION

Every society has its own cultural beliefs and traditional practices in newborn care. Some practices are harmless while others are harmful to the newborn health. Cultural practices are passed on from one generation to other and become a tradition. Hence, traditional practices are deeply rooted in the minds of people. The present study explores the traditional practice of neonatal head-shaving in detail and highlights its harmful aspects. This harmful practice can be avoided through proper health education and counselling of the mothers and family members.

Recommendations

Policy makers should be aware of the traditional practices of newborn care followed in the community. All levels of health care providers should be motivated. Community based health workers like PHN (public health nurse), ASHA (accredited social health activist), women self-help groups and local leaders need to be made aware of various traditional practices existent in the community. All should get involved in bringing a change in the mindset of people first before implementing any program for promotion of newborn health.

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