

## ***ABSTRACT***

### ***The Cultural Practices and Beliefs of Mothers in St. Catherine and how these influence Care of Their New-born; And the Implications for the Health System***

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This cross-sectional study of pregnant women attending seven antenatal clinics in South St. Catherine utilised a questionnaire with close-ended questions administered as an interview. Its aim was to determine the knowledge, attitudes and practices of mothers regarding cultural beliefs and practices utilised in caring for their newborns and their ability to recognise certain symptoms and signs that may indicate an ill neonate.

The questionnaires were administered to 111 women in late pregnancy. The data were analysed using SPSS for Windows. A  $p < 0.05$  was used to indicate statistical significance. The women were between 12-43 years of age with the majority of women (54 or 60%) between the ages of 20-29 years. Most women, 55% already had one or two children and the majority of mothers (68%) are educated to the high or secondary school level.

Most women were late attendees for first booking to antenatal clinic, with 73% first presenting in the 2<sup>nd</sup> trimester and 11%, or twelve women booking in their third trimester. The majority of these mothers are in stable unions, married (24%) or common-law (40.4%). They mostly belong to the lower socio-economic stratum (70.3%); sanitary facilities consisted mainly of pit latrines, (72.1%).

Several beliefs and practices were demonstrated, which could impact on the health and care of the newborn.

These include:

- i. the use of “bush teas” (mint; cold bush) in the neonate for various reasons; 54%
- ii. the use of urine-soaked diapers/nappies to cleans the infants mouth or tongue; 48%
- iii. applying powder/talc with or without grated nutmeg as a poultice to the umbilical cord; 37.8%
- iv. strapping the umbilicus; 44.1%
- v. squeezing the neonates breast to express the milk; 52.2% and
- vi. instilling breast milk in the neonates eyes to treat conjunctivitis; 20.7%

In additions to these beliefs and practices, some mothers do not consider early warning signs in a neonate as cause for seeking medical care and as such, usually commence various home remedies and hence delay seeking medical advice. These include poor feeding, 35.5%, bacterial conjunctivitis 32.4% and jaundice 35.5%.

The majority of at-risk mothers, that is, those most likely to engage in harmful (unacceptable) practices in newborn care and those with reduced health literacy are the adolescent mothers (to a lesser extent the young-adults 20-29 years). Other predisposing factors are unemployment, low socio-economic level, and being in unstable unions. Selected aspects of health promotion have been successful as all mothers accepted that their infants should be immunized, starting at six weeks.

Other aspects of the health literacy of women attending antenatal clinics need to be improved. With adequate exposures, that is, adequate number of visits to the health

centre, as well as early attendance for antenatal care, health behaviour related to practices which impact neonatal care could improve.