

TALES FROM TAPLEJUNG



Bhagiman Lingden, Field Monitoring Officer at HERD shares a story during the implementation of Remote Areas Maternal and Child Health Pilot (RAMP)



Two small children are sitting on the veranda of a small house; they appear filthy, ragged and look surprised to see us. Chickens are clucking and roaming around looking for something to feed on. Some goats are grazing on a small ground by the side of the house, and a mule is honking nearby. Other two small houses are situated along side this house on a small plain belt of a mountain. It looks like as if these houses are being carried by this large mountain on its back. A young man comes out of a small door stooping forward and looking at us with a little bit of a surprise and a slight grin on his face. Soon after, a young woman comes out of the house carrying a small newborn baby on her hands with a smile on her face and an utterance of a greeting word in Limbu language ‘Sewaro.’

Laxmi Limbu (name changed), a 21-year-old woman who is living in a remote village of Taplejung district, has recently given birth to her first child in Falgun 29, 2071 in a health post. She has been living in a small house with her family of seven members. She had been to school once, and studied up to class four, but couldn't complete her education due to hardships she had to face due to poverty during her childhood. She got married to Harka Limbu (name changed) last year, and she has been a lucky and happy mother of a child at the moment. She wasn't very much aware of antenatal care (ANC) check-ups, institutional delivery, and various aspects of antenatal and post-natal period, such as danger signs during pregnancy, labor, delivery and post-partum period, and danger signs of newborn baby, etc. before and even after getting married. Her mother-in-law and father-in-law were not very much supportive of seeking medical advises for any kind of maternal and neonatal health (MNH) related issues.

She had attended some of the equity and access programme (EAP) activities (interaction programme with pregnant women and their husbands and interaction programme with pregnant women and their mothers-in-law) conducted by EAP implementing NGO few months before, and she has been attending monthly meetings of healthy mothers' group in her village regularly now. She learned various aspects of safe motherhood from those activities, and she admits to being hugely benefited from the EAP activities conducted by EAP implementing NGO in her village. She completed her all ANC checkups as per protocol, delivered her baby in the health post, and received Aama (Safe Motherhood) incentive of amount NRs. 1,900 as an encouragement. However, she doesn't seem to be aware of the three post-natal check-ups as per protocol, which is the only downside that can be seen in her case.

She thinks that the local EAP activities and the local EAP social mobiliser are the most influential factors for her in understanding the importance of ANC check-ups, institutional delivery and other aspects of safe motherhood. She thinks that the information provided in these interaction programs and the monthly meetings of healthy mothers' group had been very much helpful to her in providing confidence to her to deliver her baby easily and comfortably in the health facility. She found that 'the interaction program with the pregnant women and their husbands' most informative and fruitful, among others, in terms of understanding and realizing the necessity of adopting medical advice seeking behavior for any M NH related issues. She feels that they (participants) need to concentrate on contents/topics more during these interaction programs and to keep the records of the information provided during these programs in written form so as to be able to keep that information in mind for a longer period of time.

Laxmi thinks that the explanation with pictures would be better for women like her to remember and understand the subject matter more easily. She seems aware of the importance of seeking medical advises for any MNH related issues and feels the responsibility of informing, encouraging and helping others, too, when needed.

Laxmi wonders what would have happened to her had she not gone for regular antenatal check-ups and opted for institutional delivery. She had been hearing from the elders and her friends regarding the misconception of receiving injections during pregnancy since ages. They used to say to her that receiving injections during pregnancy leads to miscarriage. She says ‘When I went to health facility for the first time, they advised me on things like the need of visiting health facility regularly for routine check-ups; the need of taking de-worming tablets and iron tablets regularly; the need of receiving TD vaccines, etc. After that, I started attending other meetings frequently. I attended some EAP activities conducted in the health post, and I learned a lot of things from there then I, myself, started visiting health facility regularly thereafter on my own initiative.’

Laxmi has a very good experience of giving birth to her first baby in the health facility so she would like to suggest prospective mothers to go for regular ANC check-ups and opt for institutional delivery. She seems aware of the provision of emergency funds as well and would like to advise them to use this locally available emergency fund if needed. She warns prospective mothers against delivering babies at home and rather encourages them to visit health facility in time for safe delivery.