

NURSING JOURNAL EXCHANGES

Obstetric Work in North Indian Villages

BY A MISSIONARY SISTER

(From 'The Nursing Mirror and Midwives' Journal')

THE birth-rate of India is a word which always brings to my mind some of the experiences of my life-work in Chamba State. It is enshrouded by such weird and wonderful customs that they may be interesting to my fellow-nurses at home. In the villages round Chamba, where I have worked for twenty-five years, a woman's position is wholly dependent on whether she possesses a son or not. Therefore, the most anxious question the patient addresses to her nurse is concerning the sex of her new-born infant. Knowing all that it means to her, especially in the extreme exhaustion which follows abnormal labour, I am always most devoutly thankful for her sake when I can say "a living son is here."

In one house I remember I ushered in the eighth daughter—a source of shame and deep distress to the poor little mother, who felt herself under the displeasure of the gods. She was weary of hearing herself called by the most contemptuous name in all India, *viz.*, "Mother of daughters." But, alas! it was not to be changed to the coveted title of "Mother of sons" on this unhappy occasion. Pregnant women procure all sorts of rosaries to use which belong to any mother who has borne sons, and during the whole nine months they devoutly worship trees and son-bestowing gods, observing a diet of herbs and roots supposed to be favourable to male offspring. Whenever a son is born drums and other musical instruments are banged all over the village, songs are sung, and sweets are lavishly distributed to neighbours and friends. If the infant is of the despised sex, of course there are no such demonstrations, and the father says, "Nothing has been born to me," by which everyone understands another unwanted girl has had the foolish audacity to enter the community!

GINGER AND RICE

It is not usual for the people to send for me until labour has begun, their preparation for the birth consisting entirely of religious ceremonies. Nutmeg and spices are bought in large quantities, which immediately after the birth must be thrown on a fire, so that neither mother nor infant may catch cold. The former has a special diet of ginger and rice, and the moment labour begins the patient is placed on the mud floor, which is considered holy, because they acknowledge God as maker of heaven and earth. A lump of mud is put near the woman, and as soon as the child is born this mud is taken and given to the astrologer. By examining it he foretells what the future of the child will be, and this fate is written out and given to the parents to keep most carefully. While the infant is having its first bath relatives and neighbours throw money into the water (more for a boy and less or nothing at all for a girl), and this money is given to the dai, if such should be in attendance. For fifteen days after, no women (save relatives and very special friends) are allowed into the room for fear of casting an evil eye on the child. For three days the baby must wear no clothes, so the anxiety of the nurse is necessarily great in the cold season, as very often even the healthy infant develops a chill in these circumstances. Boiled sugar and water mixed together are the sole diet during these critical three days. On the morning which ends this period of "primary influences" the following articles are placed in a chaj (Indian sieve): the mother's hair comb, a braid of her hair, one of her small bodices, kajil

(prepared lamp-black, with which the charm of the eyes is enhanced), and wheat. These are passed round the mother's head and that of the infant, after which the mother worships them, makes the baby touch them, and then gives them to the dai. In my own case they know I do not accept these gifts, so they are received by a deputy from amongst the innumerable women relatives. In spite of all enlightening influence and teaching, I can seldom prevent a mixture of honey, water from the Ganges, and cow's dung being prepared, in which a blade of coarse grass is dipped and used to touch, first the mother's breasts, then the child's body and various parts of the house. Finally, the mother must lick some of it, and when one asks for a reason the invariable answer is, "It is our old ripe custom; our forefathers did so, and therefore we must do so, too."

DRESSED IN BLACK

On the third day the child is dressed in black or any colour except red (which is supposed to attract the evil eye), and these garments must be the gift of the maternal grandmother.

In any case of protracted labour the custom amongst the people is to wash the husband's big toe and make the patient drink this water. I had two interesting cases of relatives in one house whose respective infants were born within a few hours of each other. The first patient had lost all her previous children in infancy, so the moment I announced the fact that a living son had been born the rejoicing and noisy commotion were so deafening that it was quite impossible to get anyone to supply me with hot water. Though the precious baby was in a state of collapse, the women refused to let me attend it (or even sever the umbilicus) until they had pierced the nose and both ears and inserted rings of black thread. This delay nearly cost the child's life, and I had many anxious moments before I could restore it.

The second patient, whose confinement took place a little later in the next room, was deformed, and after doing my utmost for over twenty-four hours the usual operation became necessary. It was impossible to save the child's life, of course, but the mother lived and very slowly recovered. During the period of delayed labour a round ball made of flour and water was rubbed lightly across the patient's abdomen and then given to a cow to eat! Apparently this had no effect, but the people did not seem in the least disturbed by its non-success, and several were assured in their own minds that I was the cause of its complete failure.

However, when the first patient heard that a dead child had been brought into the world, she would neither see nor let me come near her (or the infant) lest my "influence" should send it to join the little dead nephew. At last, however, acute anxiety forced her to call me again, but certain ceremonies had to be performed, amongst which some rupees were placed on the ground at the threshold of the room, over which I was to step with care.

The Indian mother has her first bath on the tenth and twenty-first day of the month. She must not drink plain water during this period; other things must be boiled in it to give it a good taste and influence. The general rule is that a girl is named on the twenty-first day, but a boy after three or even six months, or when he can use his legs and fists!

In a village some ten miles away from my headquarters I attended a patient, and to reach her I had to travel by a mountain path so narrow and steep that neither pony nor "dandi" could tackle it. I hastened along as fast as I could, for the call was urgent, and found my patient's home consisted

of one low, flat-roofed, windowless mud room, in which four children, several cows and calves were housed. In a cloud of flies and mosquitoes one had to carry on as best one could, and the child was actually born beside a calf, which seemed in no way disturbed by its wail of woe. The atmosphere, however, was such that I was thankful when my task allowed me to go out for a mouthful of fresh air. Never can I forget the breathless heat and thickness which were positively stifling; it seemed as if all one's aseptic measures were a mockery in such circumstances. Wonderful, indeed, how these Eastern women and their infants survive, when, according to all the laws of hygiene, the case is hopeless from the start.

Certainly an obstetric nurse in Chamba State is not altogether an *accepted* teacher. She learns much herself of how Nature persistently refuses to be a Rachel deprived of her children.

BOOK REVIEWS

C.M.B. Examination Questions and Model Answers. Messrs. Faber and Faber, 24 Russell Square, London W.C. 1. 1s. 6d. net.

The practice of writing answers to examination questions is a good way of preparing for an examination. Candidates for midwifery examinations would do well to get this book, which has been so successful that it is now in the third edition. The questions are well arranged and the answers not only give the true solution but also show the best way of dealing with such questions. The book is recommended to all midwifery students, especially those thinking of working for the London C.M.B.

The Art of Bandaging, by Dora Vine. Professional Publications Ltd, 139, High Holborn, London, W.C. 1. 1s. and 1s. 6d. net.

While almost all nurses agree that bandaging can only be taught effectively by practical demonstration a book of reference on such a subject is invaluable. This book contains much that is useful to the would-be clever and expert bandager. The reasons for the several rules in bandaging are clearly given and the work is illustrated by suitable diagrams. The concluding pages of the book contain useful information regarding splints and how to prepare them.

A Country Doctor in Bengal, by Ethel Bleakley, C.E.Z.M.S., London. 1s.

A series of interesting little talks centering around a village doctor's work in a Mission station in Bengal. It portrays the many sides of woman's life in India and shows how the women are led to think of higher things through the ministry of healing. Miss Bleakley is a member of our Association and we have pleasure in recommending her little book.

The Bloodless Phlebotomist. The Denver Chemical Manufacturing Co., New York.

An interesting publication produced by the manufacturers of Antiphlogistine. It is published periodically and will be sent to any who care to apply for it. The present issue contains a very interesting article on "Is it possible to revive the dead organism?" by Dr. S. J. Tchechulin of Moscow.