

## Biosocial Determinants of Maternal and Child Health in Northeast India: A Case Study

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**Abstract :** This paper highlights the biosocial determinants of health-seeking behavior in tribal population groups of northeast India, focusing on maternal and child health. The northeastern region of India is a conglomeration of several ethnic groups, most of which are scheduled as tribal groups. A total of 750 ever-married women in reproductive ages (15-49 years) were interviewed from three tribal groups of Nagaland, India using pre-tested and modified maternal health schedule. Data pertaining to reproductive performance of the mothers and their children health status were collected from 12 villages of Dimapur district, Nagaland, India. The sample for study comprises 212 Angami women, 267 Ao women, and 271 Sumi women, all of which belonging to tribal populations of Northeast India. Sex ratios of 15-49 years in these three populations are 1018.18, 1086.69, and 1106.92, respectively. 90% of the populations in the study are nuclear families, with about 10% of households falling below the poverty line as per the cutoffs for India. Female literacy level in these population groups is higher than the national average of 65.46%; however, about 30% of all married women are not engaged in any sort of earnings. Total fertility rates of these populations are alarming (Total Fertility Rate  $\geq 6$ ) and far from replacement fertility level, while infant mortality rates are found to be much lower than the national average of 34 per 1000. The perception and practice of maternal health in this region is unimpressive despite the availability of medical amenities. Only 3 % of mothers in the study have reported 4 times antenatal checkups during last two pregnancies. Other mothers have reported 1 to 3 times of antenatal checkups, but about 25% of them never visited a doctor during the entire pregnancy period. About 15% of mothers never took tetanus injection, while 40% of mothers never took iron folic supplements during pregnancy. Almost half of all women and their husbands do not use birth control measures even for the spacing of children, which has an immense impact on prenatal mortality mainly due to deliberate abortions: the percentage of prenatal mortality among Angami, Ao and Sumi populations is 44.88, 31.88 and 54.98, respectively per 1000 live births. The steep decline in fertility levels in most countries is a consequence of the increasing use of modern methods of contraception. However, among users of birth control measures in these populations, it is seen that most couples use it only after they have the desired number of children, thus its use having no substantial influence in reducing fertility. It is also seen that the majority of the children were only partially vaccinated. With many child deliveries being done at home, many newborns are not administered with polio at birth. Two-third of all children do not have complete basic immunization against polio, diphtheria, tetanus, pertussis, bacillus, and hepatitis besides others. Certain adherence to traditional beliefs and customs apart from the socio-economic factors is believed to have been operating in these populations, which determines their health-seeking behavior. While a more in-depth study combining biological, socio-cultural, economic, and genetic factors is suggested, there is an urgent need for intervention in these populations to combat with the poor maternal and child health status.

**Keywords :** case study, health behavior, mother and child, northeast india

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