

ROLE OF “SOCIAL OBSTETRICS” IN MOTHER CHILD HEALTH CARE W.S.R
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ABSTRACT

The theme of World Health Day 2005 was “*Make Every Mother and Child Count.*” In any Community, Mother and Child constitute a priority group & can be considered as one unit. *Ayurved* gives importance to the care of mother and child at every phase whether it is antenatal, intranatal, or postnatal care. *Ayurved* classics have briefly described the regimen that should be followed at all the stages. Even though the contemporary science have achieved so much advancement in the various field still the problem of mother & child health care are multifactorial and despite all the current efforts still constitute a serious health problem. Coming together of two health systems in the current situation can provide a better option to meet the requirement of today. In this process, the term such as “*Social Obstetrics*” & “*Sutika Swasthya*” have come into the voyage to provide better health care options to mothers and child. An honest attempt has been made to present the model of these two excellent disciplines for the provision of comprehensive mother & child health care.

KEYWORDS: Antenatal, intranatal, postnatal, *Social Obstetrics*, *Sutika Swasthya*.**INTRODUCTION**

Child is the future citizen of the nation. Health of the child depends upon the health of the mother. Thus, maternal care and maternal health are intimately associated with child care and health. So protection and promotion of health of the mothers and children are of prime importance for building a healthy and sound nation.^[1] Mother and Child constitute approximately 71.4% of the population of a developing country. Women in India constitute nearly 57.5% of the total population. Whereas 50% of all deaths in the developing country occurs in the children below 5 years of age. Global observations show that in developed countries maternal mortality ratio averages at 12 per 100000 birth in developing regions the figure is 239 for the same no. of live birth.^[2] By virtue of their numbers, mothers and children are the major consumers of health services, of whatever form.

A woman who has just given birth to a baby along with a placenta is called “*Sutika*” in *Ayurved* & “*Puerperal Women*” in Modern science. Thus the word, puerperal means to give birth to a child, and puerperium is the period from the termination of labor to complete involution of the uterus usually as 42 days or 6 weeks.

The word *Sutika* is derived from the Sanskrit root “*Su-presage*” which means the lady, who has undergone *prasava*, is termed as *sutika*. There is one more Sanskrit root “*Su-prerace*” (*Tudadigana of Panini*) which refers to either instigation or expulsion, which means a woman who expels out a child is termed as *sutika*.

Acharya Kashyapa has given an explicit description of *sutika* in *Kashyap Samihta*. He mentions that after the delivery of an infant, till the placenta is not expelled, the woman cannot be called *sutika*, hence *sutika* term can be used only after expulsion of the placenta.^[3]

Due to development of a fetus, instability of body tissues, exertion of labour pains, and excretion of moisture and blood, woman becomes very weak. After following proper puerperal care, woman regains all the lost energy and reaches pre-pregnant status.^[6] *Mithyaachar* (inappropriate physical and mental behavior) in this period results in incurable diseases or diseases which are difficult to cure.^[5] It is said in *Ayurved* about 74 types of diseases can occur in this period if not properly managed.^[6] Therefore it is necessary for both the health system *Ayurved* &

Allopathy medicine to join hands and come up with a better solution for the health care of mother and child.

MATERIAL AND METHODS

Sushrut Samhita, Charak Samhita, Ayurvediya prasuti tantra & Stree roga, Kashyap Samhita, Various Preventive & Social Medicine books were used as main source materials while working on this article. Apart from this, various websites, articles, and various other literary works were considered and searched thoroughly for this review article.

AIMS AND OBJECTIVE

In India, women of the child-bearing age (15 to 44 years) constitute 22.2 percent, and children under 15 years of age about 35.3 percent of the total population. Together they constitute nearly 57.5 percent of total population.^[7] By virtue of their numbers, mothers and children are the major consumers of health services. Mothers and children not only constitute a large group, but they are also a "vulnerable" or "special-risk group." The risk is connected with child-bearing in the case of women; and growth, development, and survival in the case of infants and children. *Ayurved* ancient science has various magnificent regimes and treatments for this stage of life. Hence an attempt has been made to set a model which shows how the two health systems can work together to get better result in health care of mother and child.

Social Obstetrics

Social obstetrics has gained focus in recent years. It is the study of the interplay of social and environmental factors and human reproduction going back to the pre-conceptual or even premarital period. The social and environmental factors which influence human reproduction are as follows-

- Age at marriage
- Childbearing & child spacing
- Family size fertility patterns
- Level of education
- Economic status, customs, and beliefs, the role of women in society

The social obstetric problems of our country, differ from the problems faced in the developed countries, because of numerous divergent social, economic, cultural, and other factors. While accepting the influence of environmental and social factors on human reproduction, social obstetrics has an additional dimension that is the influence of these factors on the organization, delivery, and utilization of obstetric services by the community. Therefore social obstetrics is concerned with the delivery of comprehensive maternity and child health care services including family planning so it can be brought within the reach of the total community.

Social Obstetrics in *Ayurved*

Social Obstetrics and various concepts related to the health of both mother and child has been explained in

Ayurved classics, *Acharya Charak* explains that by the presence of healthy sperm, ovum, *aatma*, uterus, time, and by management with a wholesome diet, the normal fetus gets delivered in a fully developed state in time and with ease.^[8] *Acharya* explains the various misconducts which can lead a fertile woman conceives after a long time are defects in genitals, mental worry, derangement of sperm, ovum, diet, and behavior, absence of proper timing, and diminution of strength. Further, *Acharya* quotes that due to defects in the sperm/ovum, past deeds of the soul, uterus, time, and mother's food and behavior, *doshas* get vitiated causing various abnormalities in shape, complexion, and sense organs. Like in the rainy season, wood, stone pieces, and water current leads to imbalances in a tree situated in the river stream, *doshas* cause abnormalities in fetus situated in the womb.^[9] All these explain that proper conducts and regime which should be followed by the mother and also the father even before conceiving is important for the health of both mother and child and one should always take care of all the deeds whether it's physical or mental as its effects their health and health of their progeny.

Mother and Child is One Unit

In antenatal period, fetus is present inside the mother and gets diet, drugs, and diseases from the mother.

At birth, the health of the newborn depends upon the health of the mother. After birth, the newborn is dependent on the mother for at least 6 to 9 months. The growth and development of the child are dependent upon the health of the mother. The mother is the first teacher of a child. The mental and social development of the child depends upon the mother. If mother dies, the child's growth and development are affected known as maternal deprivation syndrome. For instance, postpartum care is inseparable from neonatal care, it is for these reasons mother and child are treated as one unit.

Components of Mch

MCH talk about to curative, promotive, preventive, and rehabilitative health care of mother and child. Important components of MCH are –

- Obstetrics
- Pediatrics
- Family Planning
- Knowledge of Health administration
- Role of various health personals in health care

Objectives of MCH

- Reduction of maternal, perinatal, and childhood mortality and morbidity.
- Promotion of reproductive health
- Promotion of physical and psychological development of child and adolescent within the family
- Ultimate objective of MCH service in lifelong health

MCH Problems

Advanced countries are concerned with problems such as perinatal problems, congenital malformations, genetic and certain behavioral problems. In developing countries, the primary concern is the reduction of maternal and child mortality and morbidity, spacing of pregnancy, limitation in family size, prevention of communicable diseases, improvement of nutrition, and promoting acceptance of health practices. Currently, the main health problem affecting the health of the mother and child in India and other developing countries revolve around the triad of malnutrition, infection, unregulated fertility.

Solution through social obstetrics

Study of cultural pattern, belief, and practice relating to childbearing, knowledge of which might be useful in promoting acceptance and utilization of obstetrics and pediatrics service in the community. As hospitals for children should adopt the strategy of "Primary health Care" to improve child health care through growth monitoring, oral rehydration, nutritional surveillance, promotion of breastfeeding, immunization, community feeding, regular health check-up.

And in case of mother high maternal mortality reflects not only in inadequacy of health care services for mothers, but also a low standard of living and socio-economic status of the community. In the world as a whole, the problem of maternal mortality is principally one of applying existing obstetric knowledge through antenatal, intranatal and postnatal services rather than developing new skills. Lowering MMR must take into consideration the following measures, early registration of pregnancy, at least four antenatal check-ups, dietary supplementation including correction of anemia, prevention of infection and haemorrhage during puerperium, prevention of complications, e.g., eclampsia, malpresentations, ruptured uterus, treatment of medical conditions, e.g., hypertension, diabetes, tuberculosis, etc. anti-malaria and tetanus prophylaxis, clean delivery practice.

In India, a large number of maternal deaths could be prevented with the help of trained local dais and female health workers. Institutional deliveries for women with bad obstetric history and risk factors. Promotion of family planning - to control the number of children to not more than two, and spacing of births. Identification of every maternal death, and searching for its cause, and Safe abortion services.

Solution Through Ayurved

Ayurved being the holistic science has both therapeutic as well as spiritual aspect it explains the reason of various types of diseases occurs in mother and child and leads to increase in death rate for both mother and child the ancient health system provides the remedy, as well as conducts, should be followed by both mother and father to have a healthy life for themselves as well as for their

progeny. *Acharya Charak* explains that *pragyapradha*, unbalanced use of senses, and temporal effects are the main causes behind all disorders. And the remedy for all disorders lies in the balanced use of intellect, senses, and time.^[10] *Daiva* (deeds of the previous life) and *paurusha* (deeds of present life), imbalance of these leads to diseases and balance prevents the diseases. If one eliminates the accumulation of *doshas* of early winter in spring, that of summer in early rains, and that of rainy season in autumn, never suffers from seasonal disorders. Similarly, if mother uses a wholesome diet and behavior, moves cautiously, is unattached to sensual pleasures, donates, observes equality, is truthful, forbearing, and is devoted to venerable people becomes free from diseases. One who is endowed with such an intellect, speech, and positive actions which yield good results, who has a submissive mind, clear understanding, and knowledge, and who does penance and continued effort in *yoga*, does not fall victim to diseases.^[11]

DISCUSSION

MCH is not a new specialty. It is a method of delivering health care to a special group in the population that is especially vulnerable to disease, disability, or death. These groups of children under the age of 5 years and women in the reproductive age group comprise about 32.4 percent of the total population in India.^[12] The MCH services encompass the curative, preventive, and social aspects of obstetrics, pediatrics, family welfare, nutrition, child development health, and education. Maternal and child care was traditionally designed and provided in the form of vertical programs with "standard" technical content based on models from a few developed countries. Applied to different socio-economic situations, such vertical programs have been unable to provide more than minimum coverage because of their cost, and they have scarcely been of a kind to solve the priority problems of the majority of mothers and children. Hence there is a major need to apply these programs based on cultural and widely accepted traditions of that region like in India *ayurved* has an age old history people of India have *ayurved* in their homes from the time immemorial so if both contemporary science and *ayurved* join their hands together the goals of "*Social Obstetrics*" can be achieved very easily and efficiently.

CONCLUSION

In the past maternal and child, health services were rather fragmented and provided piecemeal "Primary health Services" by different agencies in different ways and separate clinics. In providing these services specialists in obstetrics and child health have joined hands and are now looking beyond the four walls of hospital into the community to meet the health needs of mother and child aimed at "positive health". In this process, they have linked themselves to preventive and social medicine, and as a results term such as "*Social Obstetrics*" have come into vogue.

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