PREVALENCE OF COMPLICATION AMONG PUNJAB'S

MIGRATORY TRIBAL PREGNANT WOMEN

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**ABSTRACT** 

It has been found that tribal people in India are more vulnerable to biomedical health

problems during pregnancy. The objective of the study is to assess the prevalence of

complications among the migratory tribal pregnant women of Punjab. The interview method

was used to investigate the complications of pregnancy in tribal pregnant women. Three

hundred pregnant women were selected as a sample population from four different tribal

groups in Punjab. It was shown that the majority of the respondents (198, 66%) suffer from

hypertension, whereas the prevalence of diabetes is very low. Most of the respondents (240,

or 80%) were not aware of any medical problem, whereas around one-tenth of the

respondents (33, or 11%) suffered from heart disease, and only 12 (4%) of the respondents

suffered from high blood pressure. A large majority of the respondents (268, 89.67%) suffer

from anaemia, followed by severe headaches (66.33%) and swelling of hands or face (60%)

during their pregnancy. Half of them faced complications of persistent vomiting (56.66%)

and pain in the abdomen (50%) during their pregnancy. Overall, it was found that more than

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half of them had a high level of complications (56.33%) during their pregnancy, whereas more than one third of them had an average level of complications (36.66%).

**Key Words**: complications, diabetes, hypertension, migratory, pregnant women, tribal.

#### **INTRODUCTION**

Tribal populations constitute around 8.6% of the total Indian population, and India has the world's highest number of tribal communities (Kumar and Sharma, 2015). Most of the tribes were identified on the basis of their origins, not on the basis of religion. (Ramana and Usha, 2014). The health conditions of the tribal peoples in India are very bad due to poverty, poor education, undernutrition, bad hygiene conditions, poor health services, and ineffective coverage of national health and nutritional services. (Agarwal et al., 2006). All these conditions affect the health status of each group of people, but especially females during their perinatal and postnatal periods. This subgroup of the population is more vulnerable to various complications in comparison to the general population. (Begum et al., 2017) There are other factors like social misbelief, financial restraints, poor transport facilities due to remote areas and inadequate medical advice that further worsen their health status and aggravate complications during pregnancy. (Carnero et al., 2012). The nutritional requirements of a pregnant female increase during pregnancy, and the nutrition status is best measured by body mass index (BMI) (Lisa et al., 2009). Nutritional anaemia is the most common complication faced during pregnancy. It is the most common cause of maternal morbidity and mortality during and after pregnancy. Due to this, there are high chances of foetal growth retardation, premature delivery, low birth weight babies and foetal death. (Tejaswi et al., 2010). During pregnancy, there are many physiological changes in the body that further increase the risk of many macro and micronutrient deficiencies in the body. Due to this, these females suffered from severe protein energy malnutrition, infections, and perinatal complications. (Hemapriya

et al., 2018) Hypertension and gestational diabetes are major complications that occur during pregnancy. Hypertension increases the risks of eclampsia(seizures), foetal growth retardation, postpartum haemorrhage (PPH), disseminated intravascular coagulation, and maternal and neonate death. (Gupta et al., 1996) Gestational diabetes is a type of diabetes that first appears during pregnancy. Though gestational diabetes is less prevalent in pregnant tribal females, it has a high impact on the outcomes of pregnancy. Because of gestational diabetes, the chances of foetal complications are increased for macrosomia (large baby), preterm delivery, difficult delivery, and neonatal injury during labour. The chances of congenital problems like cardiovascular and respiratory systems are higher due to this.

Objective of this study is - "Prevalence of complication among Punjab's migratory tribal pregnant women".

## MATERIALS AND METHODS

The current research was both qualitative and descriptive. As a result, the interview method was used to investigate the complications among the tribal pregnant women. 300 pregnant women were selected from four different tribal groups. The research tool was a structured questionnaire. This tool states prominences of complication during pregnancy of tribal women which was examined by five questions interviewed with pregnant women by researcher. This section consists question of family history of any disease, past health problems, current disease (if any) and, complication symptoms like bleeding from vagina, swelling of hands or face, fever, severe headache, pain in abdomen, dizziness, persistent vomiting, blurred vision, high blood pressure, gestational diabetes, pre-eclampsia (toxaemia), preterm labour, a loss of pregnancy, or miscarriage, anaemia.

## **RESULT AND DISCUSSION**

This section presents the findings related to the complications faced by the respondents during their pregnancy.

Table 1: Frequency and percentage distribution of respondents based on disease-related family history (n = 300).

Family History	Frequency	Percentage
Obesity	0	0
Hypertension	198	66
Diabetes	24	8
None	78	26

Table 1 shows the distribution of respondents according to their family history related to diseases. It shows that the majority of the respondents (198, 66%) suffer from hypertension, whereas the prevalence of diabetes is very low, and only 24 (8%) of the respondents suffered from diabetes. It also reveals that around one-fourth of the respondents had not suffered from any disease in the past.

Table 2 shows the frequency and percentage distribution of respondents based on their previous medical problems (n = 300).

Past Medical Problem	Frequency	Percentage
Did not know	240	80

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High Blood Pressure	33	11
Heart Disease	33	11
None	15	5

Table 2 shows the frequency distribution of the respondents according to their past medical problems. It shows that most of the respondents (240, or 80%) were not aware of any medical problem, whereas around one-tenth of the respondents (33, or 11%) suffered from heart disease, and only 12 (4%) of the respondents suffered from high blood pressure. The distribution also revealed that around 15 (5%) of the respondents had not suffered from any medical problems in the past.

Table 3 shows the frequency and percentage distribution of respondents based on their current medical problem (n = 300).

Diseases	Frequency	Percentage
Infections	109	36.33
Anemia	228	76
Kidney problems	12	4
Epilepsy	0	0
Diabetes	0	0
Cancer	0	0

Table 3 displays the frequency distribution of the responses according to the medical problem they are facing at present. It shows that none of the respondents suffered from diabetes, cancer, or epilepsy. The table further reveals that most of the respondents (268, or 89.67%) suffer from anaemia, whereas one third of the respondents (109, or 36.33%) suffer from other types of infections. Anaemia was found among the majority of respondents.

Table 4: Frequency and percentage distribution of respondents according to pregnancy complications (n = 300).

Complications	Frequency	Percentage
Anemia	228	76
Severe headache	199	66.33
Swelling of hands or face	180	60
Persistent vomiting	170	56.66
Pain in abdomen	150	50
High Blood pressure	137	45.66
Dizziness	78	26
Constipation	66	22
Stomach Pain	60	20
No Complication	60	20
A loss of pregnancy, or miscarriage	53	17.67

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Bleeding from Vagina	51	17
Fever	46	15.33
Preterm labor	26	8.66
Gestational diabetes	2	0.66

Table 4 reveals the complications faced by the respondents during their pregnancy. It was found that the majority of the respondents were suffering from anaemia (76%), severe headaches (66.33%), and swelling of hands or face (60%) during their pregnancy. Further, this table revealed that half of them faced complications of persistent vomiting (56.66%) and pain in the abdomen (50%) during their pregnancy. Moreover, it was also found that more than forty percent of them had a problem with high blood pressure (45.66%). Further, it was revealed that more than one fourth of them had issues with dizziness (26%), and one fifth of them had problems with constipation (22%), and stomach pain (20%) during pregnancy. However, one fifth of them did not face any complication during their pregnancy (20%). A little less than one fifth of them had a loss of pregnancy, or miscarriage (17.67%), and bleeding from the vagina (17%). A few of them also had complications of fever (15.33%), preterm labour (8.66%), and gestational diabetes (0.66%).

(Jayashree and Suneela, 2020) found common maternal complications among the tribal women of India. They were preterm labour, hypertensive disorders, anaemia, and low birth weight of the new born.

Sustained During Pregnancy (n = 300)

Table 5: Frequency and Percentage Distribution of Respondents Based on Infections

Infections	Frequency	Percentage
Urinary Tract Infection (UTI)	112	37.33

The data regarding the infections from which the respondents were suffering showed that more than one third of them were suffering from urinary tract infections (UTI) (37.33%). However, none of them were known to be suffering from bacterial vaginosis, Cytomegalovirus, Group B Streptococcus, or Hepatitis B virus.

Table 6: Respondents' frequency and percentage distribution based on their level of medical complications during pregnancy (n = 300).

Level of Complications	Frequency	Percentage
High	169	56.33
Average	110	36.66
Low	21	7

Table 6 shows the level of medical complications among respondents during their pregnancy. It showed that more than half of them had a high level of complications (56.33%) during their pregnancy, whereas more than one third of them had an average level of complications (36.66%). However, a few of them also had low levels of complications during pregnancy. The higher level of complications indicates more problems during pregnancy. The respondents faced complications like anaemia, severe headache, swelling of hands or face, persistent vomiting, pain in the abdomen, high blood pressure, and urinary tract infection during their pregnancy. Anaemia seemed to be very common among the respondents. The present finding showed that they had a very low level of knowledge about the nutrient. Further, they also had poor personal and environmental hygiene conditions at their home. (Senugupta A, 2019) found that medical intervention among the tribal groups of India helps in curing nutritional deficiencies, especially anaemia among pregnant women.

**Table 7: Impact of Socioeconomic Status on Complications During their Pregnancy** (N=300)

Variables	Source of Variance	Sum of Squares	DF	Mean Square	F	Sig.
Age	Between Groups	900.6412	2	450.3206	23.691	0.1
	Within Groups	5645.3455	297	19.0079	**	
Tribal Group	Between Groups	1202.9055	4	300.7264	16.6035	0.1
	Within Groups	5343.0812	295	18.1121	**	
Family	Between Groups	545.6033	2	272.8017	13.5028	0.1
Pattern	Within Groups	6000.3833	297	20.2033	**	
Occupation	Between Groups	341.8012	2	170.9006	8.18117	0.1
	Within Groups	6204.1854	297	20.8895	**	
Monthly	Between Groups	545.6033	2	272.8017	13.502	0.1
Income	Within Groups	6000.3833	297	20.2033	**	
Number of	Between Groups	1407.0578	2	703.5289	40.659	0.1
Family	Widlin Carre	1107.0570		7.03.3207	**	
Members	Within Groups	5138.9289	297	17.3028		
**p < 0.01			1	•	•	1

Table 7 presents the analysis of variance for impact of socioeconomic status on complications during their pregnancy. It was found that there were significant differences in the complications faced by the respondents during their pregnancy in relation with their age, tribal group, family pattern, occupation, monthly income, and number of family members. This indicates their complications differed according to the above-mentioned variables. Thus, the null hypotheses stating that there will be no significant differences in the complications

faced by the respondents in relation to their age, tribal group, family pattern, occupation, monthly income and number of family members were not accepted.

The possible reason for this finding could be the difference in their understanding and awareness regarding the care during pregnancy. Therefore, the younger respondents would have had more complications than the others. However, those were unable to fulfill their nutritional requirements or recommended dietary allowances might have face more complications.

Memon (2019) mentioned that tribal women in Chhattisgarh faces complication during their pregnancy due to malnutrition, teenage pregnancy, improper gap between successive births, poor nutrition during prenatal phase. Apart from this the poor hygiene and nutrition practices and lack of health care facilities causes health issues among mother and new born both.

## **CONCLUSION**

It was shown that the majority of the respondents (1988, 66%) suffer from hypertension, whereas the prevalence of diabetes is very low. Most of the respondents (240, or 80%) were not aware of any medical problem, whereas around one-tenth of the respondents (33, or 11%) suffered from heart disease, and only 12 (4%) suffered from high blood pressure. A large majority of the respondents (268, 89.67%) suffer from anaemia, followed by severe headaches (66.33%) and swelling of the hands or face (60%) during their pregnancy. Half of them faced complications of persistent vomiting (56.66%) and pain in the abdomen (50%) during their pregnancy. Over all, it was found that more than half of them had a high level of complications (56.33%) during their pregnancy, whereas more than one third of them had an average level of complications (36.66%). In our study, we mainly found out the prevalence of various complications during pregnancy. This data can be used for future planning to prevent these complications, and this data can be implemented in various government policies to prevent these complications.

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