

Exploring Neonatal and Infant Health in Nepal

Bishnu Sapkota*

Ph. D Research Scholar, Graduate School of Education, Faculty of Education, Tribhuvan University, Kirtipur, Nepal

*Corresponding Author: Bishnu Sapkota, Ph. D Research Scholar, Graduate School of Education, Faculty of Education, Tribhuvan University, Kirtipur, Nepal.

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Abstract

Maternal death of Nepalese women during pregnancy, while the health risk of infant death is maximum in the first twenty-eight days of life. Underprivileged women and children health leftovers a signification trouble in little and a middle income woman in Nepal. The risk of death of a newborn highest during the first four weeks of life. In the first four weeks, children are important contribution to children continued existence. Maternal health infection and other conditions or poor conditions often contribute to indicating neonatal death and other outcomes.

Keywords: Neonatal; Infant Infancy; Care Pregnancy

Introduction

Neonate is the period of life from birth to four week before. It is the critical time for extra uterine adjustment. It is initial period of infancy. The first twenty hours of life after birth is the most critical time for the new born for adjustment and survival [1]. Newborn period is divided into two parts, the early neonatal period, which is the newborn period from one week of life and the late neonatal period, which extends from the first week of birth to four weeks of life. A new born infant is a child under four weeks of age, in the period of first four weeks of life the child is at high risk of disappearing [2]. A neonate baby is particularly a baby in the first four weeks after birth.

Neonatal child adjustment

The most profound psychology change requires of the new born transition fetal, placental circulation, independent respiration and other body psychology makes the first twenty hours of new born infants as critical time. Breathing process in new born babies should be within 20 second after birth. It is important to establish neonatal circulation from fetal circulation.

During the time of general transition period from need to adjustment in new environment. In this period, it is the critical period of life for a new baby. This includes the initial period after birth. In the period of life time during the significant period of changing period of birth to during four weeks of life and for many it is a rapid time of growth during the time period of development in our new our baby. The neonatal period (birth to 1 month) is a time of extensive and ongoing system transition from the uterine environment to the external world; this includes the initial period after birth, which is referred to as the prenatal period.

Every year thousands of babies in Nepal in the first four weeks it seems difficult to adjust during the period of life because of the difficulty to adjust babies were die in developing countries because of area son that can be prevented. Under the five mortality rates in developing countries have decline significantly in the earlier period, newborn mortality rates has decreased [3]. The new baby's critical health situation for their adjustment in neonatal period defined as deaths occurring during the first four week of life could be averted through expanded coverage of cost-effective interventions [4]. In basic prenatal, natal and postnatal healthcare, a variety of poor economic, socioeconomic, cultural nutritional food, emotional factors, such as helplessness to pay for moving, lack knowledge and attitudes relative to healthcare, as well as various factors of gender bias negatively affect newborn survival in countries of developing (Garg P, 2009).

In the situation of newly born child during the period, under-five child deaths are among newborn infants, babies in their first four weeks of life. In poor countries, half of mothers and newborns do not have skilled care during or after the birth of the baby. Due to lack of education and awareness, as well as in the first baby of life, in women the first week of life. In developing countries nearly half of all mothers and newborns do not receive skilled care during and immediately after birth. Children were dying within the first four weeks days of birth suffer from surroundings and disease associated with lack of quality care at birth or skilled care and behavior instantly after birth and in the first days of life [5].

Circumstances of neonatal

During the time period, the most difficult to adjust to breathe, feed, is also a time of growth. The worst part is that their communication is limited and their primary caregivers need to know the signs and symptoms of danger and disease. In the normal situation of feeding baby. It seems to be difficult with the internal part of the stomach.

Immaturity may cause babies to suffer from physically, mental, social, as well as very abnormal situations throughout their lifetime. The earlier a baby is born, the more likely it is to have health problems. Premature birth can cause a baby to have lung and breathing problems, including Asthma, a health condition that affects the airways and can cause breathing problems. Premature problems caused by not only disease but also that affects mental and physical problem in the situation occur the disease affects by news born babies. These can include pneumonia (infection of the lungs) and meningitis (infection of the brain). Intestinal problems are sometimes caused by a disease that affects premature babies.

Essential care of a newborn baby

After birth, a newborn or infancy must adapt to extra uterine life for survival. The first minute, hour day, and weeks/month of the new born life are circle and time of risk. Risk decrease with increase period of life. Newborn survival can be improved with skill support immediately after birth. Mother and family can easily provide this kind of care at home. Since newborns must be healthy at term, these simple care provided by parents are enough for survival [6]. The main responsibility of baby care is mother and family, so they need to know about newborn care at home. New born cannot adjust their temperature like adult the need to warm much more so to keep the newborn warm. The newborns wake up a lot at nights the mother needs to sleep and rest during the day. New born the system to fight infection is not mature, so they can get infection more easily.

New born baby care in Nepal

In the context of Nepal it is difficult to get afford for the people due to lack of health service and resource in the village area because health service. In 1990 the government started in the program National safe motherhood.

The programs objective was reduce maternal and neonatal morbidity as well as mortality rate and improve maternal and neonatal health status through preventive and promotion health activities by target people and avoidable reason death of during period of

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pregnancy, childbirth and the postpartum period. In the program suggest that three delays are significant factors for maternal and newborn morbidity and mortality in Nepal (delays in seeking care, reaching care and receiving care. Since time, government has also introduced Aama and Newborn Programmers in prevention of mother and new babies.

Current situation

In Nepal the intervention to reduce neonatal death belong to division of department of health service. Addressing neonatal mortality required continuity between these elements of care. In Nepal, there are many organizations working as the programs for promotion, protection prevention working partnership program to improve women status such as UNICEF, WHO, GTZ, Save the Children US Care Nepal.

These organizations work at the community level and the policy level to improve the health status of Nepalese women for the development of the health sector to improve the livelihood of poor vulnerable people and socially excluded people by empowering income-generating program.

Improvement in neonatal/infant health issues

To minimize the child death rate child mortality in the context of Nepal the pregnant women should be provided with proper care and nutrient food fully minimized. First of all, early marriage should be stopped. When the girl marry in early age then she will be treated as a child birth giving machine and will be pregnant in her early age through which she wouldn't able to develop physically and mentally.

To decrease neonatal death rate the pregnant women should be provide with facilities along with sanitation which are required for a mother and a child. Fully plasticized and authorized nurse should be on duty look after a mother and child. A pregnant woman should always treat herself in a healthy environment through which she will be able to develop physically and mentally.

Improve newborn health care in Nepal. Focus on medical care, nursing goof support, social and family center health care, skill delivery, improve local health service and as well as women empowerment, counseling service, and provide training for women health volunteers. Improve the nutrition of the mother and the position of the women in society in the context of Nepal [7-11].

Conclusion

In the data and other secondary sources of information most of children are dying during the first four weeks of period of life. In Nepal cultural taboo also play the vital role of destructive cultural practices during the pregnancy. Poor maternal and neonatal health cares because we have incomplete health resources and service for the village area.

Health care professionals, unemployment poverty, illiteracy women low status in society and political in stabilities are major challenges facing in Nepal. It is imperative to focus on family center care. Promotion of health and health practice to be adopted during pregnancy, birth of skills, local health services improve mother's nutrition and women's position in society. Therefore, health sector service to recover women in society, as well as income generation program, lack of female literacy, poor economic status and insufficient skills to prevent newborn complication in the context of Nepal.

Bibliography

- 1. Mishra RS. New born health interventions and challenge for implementation in Nepal (2016).
- 2. Maternal and Neonatal health Report, World Health Organization (2016).

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- 3. Lassi ZS and Haider BA. "Community-based intervention packages for reducing maternal and neonatal morbidity and mortality and improving neonatal outcomes". *Cochrane Database of Systematic Reviews* (2010): 13.
- 4. Darmstadt GL. Evidence-based, cost-effective interventions: how many newborn babies can we save 13 (2005): 143-149.
- 5. Maternal and Neonatal Health Annual Report. UNICEF (2017).
- 6. Shrestha T. "Nursing care of children, (2nd edition) Kathmandu". Medhavi Publication (2018).
- 7. Joshi R., *et al.* "Improving Neonatal Health in Nepal. Major challenges to achieving millennium development goal4". *Health Science Journal* (2017).
- 8. Newborn policy and planning framework (working vision), World Health Organization (2010).
- 9. National health and program in Nepal, Government of Nepal (2018).
- 10. National Neonatal Health Strategy. Nepal Family Health Division department of Health Service Ministry of health (2012).
- 11. Ministry of Health and Population Department of Health Service. Annual Report (2016).

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