

An Ethnographic Study of Traditional Postpartum Beliefs and Practices among Chinese Women

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Abstract: In many Asian societies, traditional postpartum practices are believed to be vital to the health of women and babies. Deep cultural and social meanings are attached to practices related to behaviors, activities, foods, hygiene, and infant care with variance by regions. Previous studies have demonstrated diverse interpretations of the traditional postpartum beliefs and practices by local communities. In the rural area of Jiujiang Jiangxi Province, China, postpartum women's beliefs and practices have not been documented. This paper is part of an ethnographic study aimed to describe the traditional postpartum beliefs and practices among women in the sociocultural context of the rural area of Jiujiang, Jiangxi province. The villages of two townships of Maying and Zhangqing in Jiujiang City, were the settings for the study. Data collection was from January 2017 to July 2017. Participant observation in the rural area context and in-depth interviews were conducted with 18 postpartum women as key informants. A six-step qualitative data analysis method was used. Three themes emerged from the traditional postpartum practices - *zuo fang* (sitting in room): gaining *yin-yang* (shady-sunny) balance, preventing '*xie*' (pathogenic factor) entering the body, and enhancing breastmilk production. Variations of the traditional postpartum beliefs and practices were influenced by the local sociocultural context. Knowledge of the cultural importance of traditional postpartum beliefs and practices of rural women is required for nurses to provide culturally sensitive postpartum nursing care.

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Introduction

Childbirth takes place in a cultural context that is shaped by the perceptions and practices of that culture.^{1,2} Therefore, childbirth and the postpartum period are constructed within the behavioral, social and experiential content of cultural values.^{3,4} Many

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traditional beliefs and practices during the postpartum period are adhered to by the woman and her family to ensure the health and well-being of herself and the baby.^{5,6,7,8,9,10,11,12,13} Moreover, the rituals of the tradition following childbirth signify the transition of the woman's life stage from childbearing to preparing for their new status as mothers.^{3,5}

In the Chinese culture, the customs of the traditional postpartum practices can be dated from the Song Dynasty (960–1279 A.D.).¹³ However the conceptual origin may have begun more than 2000 years ago.¹⁴ Nowadays, despite substantial social changes and the enormous impacts on health coming from western medicine, Chinese women still prefer to observe the traditional postpartum practices. A cross-sectional study found that most of 2100 Chinese mothers in Hubei, China, attended education courses regarding well-balanced nutrition and health-related behavior in the postpartum period but did not follow the instructions.¹⁵ A randomized control study in China also found that most women did not change their behaviors after attending dietary and health behaviors education program.¹⁶ Existing literature has pointed to the significance of traditional postpartum practices among Chinese women living in different regions of China and even in western countries.^{3,4,17,18,19} A rich cultural diversity exists in the country. Therefore, it is imperative for nurses to know well about the traditional postpartum beliefs and practices in the different sociocultural contexts to provide culturally sensitive postnatal care for women. The rural areas of Jiangxi China have not been the focus of a study from the perspective of women in the 21st century who are living in a modern society strongly influenced by ancient traditions, beliefs and practices, so this study focused on those rural areas.

Review of Literature

Traditional postpartum practices are a series of behaviors undertaken by women after giving birth

based on their own cultural beliefs in their living context.^{9,20,21} In many Asian cultures women often adhere to traditional postpartum practices according to their cultures.^{20,22} In China the *ying-yang* theory is the basis of most of postpartum practices.^{22,23,24} According to this theory, the balance of *yin* and *yang* or 'cold' and 'hot' called by lay people, is believed to be essential for maintaining health, while the *yin-yang* imbalance is believed to cause diseases.²⁵ Women's heat is depleted by losing blood during childbirth that results in a state of extreme *yin* of the body after childbirth.²³ The destroyed balance of *yin-yang* in the body makes the woman vulnerable to various diseases. To restore the balance of *yin-yang*/ 'cold' and 'hot' after giving birth further to promote health and prevent diseases, women have to observe traditional postpartum practices in these societies.^{20,23}

Many Asian countries have beliefs about postpartum recovery and generate similar traditional postpartum customs. The traditions include rest at home for a defined period, and restricted activity, keeping warm, hygiene, and dietary practices in such societies.^{4,5,6,8,10,11,19,22} Also, considerable variations of the details of traditional postpartum practices are carried out cross-culturally in each aspect in different societies. In China traditional postpartum beliefs and practices have been adapted to fit different environments, and postpartum women choose to practice and select which aspects to practice in their sociocultural context.^{26,27} Previous studies among Chinese women demonstrated that postpartum women who had a low level education,^{27,28} low socioeconomic status,¹⁵ adequate social support,²⁹ living in a rural area,⁸ and lack of postpartum nursing care including education,³⁰ were more likely to observe traditional postpartum practices. Among Chinese women, traditional postpartum practices are observed differently with various reasons in their living context such as Hong Kong, Taiwan and other regions of China.^{4,19,31,32} Moreover, with the development of modern society, the adjustments of the traditional postpartum practices

have been examined among Chinese women in both in Hong Kong and Taiwan.^{3,27} China, particularly rural areas, has undergone fast urbanization in the last decades. However, what traditional postpartum beliefs and practices are adhered to is unknown from the perspective of Chinese women living in the rural area of Jiangxi.

Study Aim

This study identified the traditional postpartum beliefs and present pattern of postpartum practices among women living in the context of the rural area of Jiujiang Jiangxi Province, China.

Setting: Data were collected between January and July 2017 in the rural area of two townships of Maying and Zhangqing in Hukou County, Jiujiang City, Jiangxi Province. Hukou is a county with more than 1000 years history with its own local language. The population is about 300,000 with more than 220,000 living in the rural area. This area was chosen as the study site, as women there observed traditional postpartum practices and had transportation access to the villages.

Participants: Key informants were women who were: older than 18 years, giving birth to a healthy baby within previous 30 days, living with husband, and observing traditional postpartum practices. The exclusion criteria were those having either obstetric or medical complications or severe problems with their babies. In our larger study general informants were mothers or mothers-in-law of the postpartum women, older women and traditional midwives in the villages, traditional Chinese medicine doctors, and nurses, however only data from the postpartum women is presented here. Purposive sampling was used.³⁴

Ethical Considerations

Study approval was obtained from the Research Ethics Committee, Faculty of Nursing, Chiang Mai University, approval number EXP-071-2016. Before

data collection, each potential participant had verbal and written explanations about the study objective and procedures, and informed that they had the right to refuse, or withdraw from the study at any time with no adverse effect. All informants signed an informed consent that included permission to record interviews. The principal investigator (PI) did the record keeping. Confidentiality and anonymity were assured and maintained throughout the study.

Data Collection

Data were obtained in the field by the PI, who had background knowledge and experiences of the cultural group, through participant observation and in-depth interviews. The postpartum women were accessed and recruited in the obstetrics wards in two county-level hospitals, the Hukou Maternity and Child Hospital and the Hukou People's Hospital, with the help of the directors, head doctors, and head nurses. Two or three days following the women's discharge to home, the PI contacted them to observe their activities such as rest, eating, and other daily activities during postpartum period. Observations were conducted 3–5 times at different times of a day within the month. Each visit was at least two hours. Meanwhile, field notes were written for each observation to record what was heard and experienced, including the appearance of the environment, the informant's attitude, behaviors, and interaction with family members, the daily process of activities as they occurred chronologically, special events, and dialogue. At the end of the month following childbirth, in-depth interviews were conducted in their home at their convenience, asking questions like *What do you think about traditional postpartum practices?*; *What did you practice during the postpartum period?*; *Why did you do each activity?* and *Where did you learn it?*. Such questions helped to gain insights of the traditional postpartum beliefs and practices from the perspective of the postpartum women. The interviews with other informants also started with *What do you*

think about traditional postpartum practices? and followed with questions like: *What did you tell your daughter/daughter-in-law about traditional postpartum practices?* and, for the TCM doctor: *What do you prescribe women do as traditional postpartum practices?* Interviews were conducted once or twice for each participant with a duration of 60–90 minutes until data saturation occurred. A reflexive journal was also maintained to keep the researcher sensitive and non-judgmental to the data collected.

Data Analysis

A classical ethnographic method was used in this study, characterized by a cyclic iterative process of participant observation, interviewing and interpretation in the natural setting studied.³⁵ Thematic analysis was used to identify, analyze, and report patterns of the traditional postpartum beliefs and practices within data in this ethnographic research.³⁶ Recordings of interviews were transcribed for analysis. After becoming familiar with the data set, initial codes were used for analysis and listed. For example the daily dietary practices of *eating chicken soup, drinking brown sugar water, eating noodles, and eating eggs* were grouped into a potential subtheme of *eating hot food to improve yang*. Similarly, other subthemes were searched such as *rest to restore body vital energy* and *dietary precautions to maintain the yin-yang balance of the baby*. All these practices were adhered to because of the belief of *gaining yin-yang balance*, which became a study theme. Similarly, other subthemes and themes, and the relationships between these were analysed to describe the practices and beliefs of women during the postpartum period.

Trustworthiness

Trustworthiness was provided by prolonged engagement in the field, maintaining field notes and a reflexive journal, peer debriefing and a form of data triangulation.³⁷ The PI visited postpartum women and their family 3–5 times, at least 2 hours each visit, in their natural settings. The visits were arranged at

different times of a day and a month after childbirth to gain various perspectives for the data. Rapport and trust with the informants and the PI fostered vibrant, detailed responses to achieve a deep understanding of the traditional practices and the settings. Field notes and a reflexive journal were maintained to describe the research process in detail and the PI's role. She also researcher regularly detached herself from the settings and communicated with the advisory committee about her thinking and questions encountered. Each step of the research process was appraised by the advisory committee to examine the data collection process, to check the accuracy of coding in data analysis, and to confirm the consistency of the inferences. Data was collected through different methods and different groups of participants.

Findings

In total, 18 postpartum women were research informants and their demographic characteristics are presented in **Table 1**. Through the observations and the descriptions of the informants, the sociocultural context in which the postpartum women lived was described.

Characteristics of the informants

Among the 18 women (**Table 1**), the majority (61.1%) were aged between 20 and 30. All were married. Most (61.1%) had secondary school education. Only a few (16.7%) had a college-level education and 22.2% had only primary school education. The majority (72.2%) gave birth to the second child compared to 27.8% who gave birth to the first child. More than half (55.6%) gave birth by Cesarean section. Before giving birth to this baby, most of them (77.8%) had temporary jobs outside the villages. The majority of postpartum women (94.4%) lived in the extended family, among whom most (88.2%) lived in their husband's family, and a few (11.1%) lived with their own parents' family. Only one (5.6%) was in a nuclear family living situation.

Table 1 Demographics of postpartum women (n=18)

Characteristics	Number (%)
Age (Years)	
20-30	11 (61.1)
31-40	7 (38.9)
Marital status	
Married	18 (100)
Number of children	
1	5 (27.8)
2	13 (72.2)
Level of education	
Primary	4 (22.2)
Secondary	11 (61.1)
College	3 (16.7)
Work status before childbirth	
Home duties	4 (22.2)
Working	14 (77.8)
Average family monthly income (yuan RMB)	
< 2000	2 (11.1)
2000 - 4000	7 (38.9)
>4000	9 (50)
Family pattern	
Nuclear family	1 (5.6)
Extended family	17 (94.4)
Living with own parents	2 (11.8)
Living with husband's parents	15 (88.2)
Delivery mode	
Vaginal	8 (44.4)
Cesarean section	10 (55.6)

Sociocultural context of traditional postpartum practices

With the fast urbanization development, the living environment of postpartum women in the villages is experiencing massive changes. In the past

six to seven years, the government spent money for them to rebuild their villages and houses with improved standards. As they do not rely on the farm only, before childbirth, most postpartum women and their husband worked in the cities outside the villages. Also, some

of them did e-business online without leaving home. The living standard of the family has significantly improved in recent years.

Nowadays, women have many ways to access different postpartum practices besides the ancient traditions. For example, in this study, all the recruited postpartum women gave birth in a county level hospital. They had a legitimate chance to know postpartum practices based on western medicine. Moreover, living in the age of information explosion, they used smartphones to communicate with others in different cultures about the postpartum practices either traditional or modern. As one woman explained “*I saw the report that women in western countries went back work 2 or 3 days after childbirth. They still have good health. They do not have the tradition ‘zuo fang’. Why do we have to?*” On other hand, the local language of women in this study was nationalized today. Thus, they did not understand well by themselves about the traditional postpartum practices.

Historically and culturally, *zuo fang* (sitting in room) is the traditional postpartum practice following childbirth among women living in the rural area of Hukou Jiujiang Jiangxi. It is believed to maintain the lifelong health of postpartum women by promoting

recovery, preventing and even curing diseases for the future life.

Traditional postpartum practices – zuo fang

Zuo fang (sitting in room) is a series of believed traditional postpartum practices for 30 to 40 days following childbirth. Findings of *zuo fang* from the perspective of postpartum women and the fieldwork notes are presented in **Table 2**. Three themes and 12 sub-themes are described below.

Gaining yin-yang balance

Yin originally meant ‘shady’, and is associated with the phenomenon of cold, winter, cloudy, rainy, and darkness; it is the symbol of femininity, inferiority, and negativity. *Yang* means ‘sunny’, and is associated with heat and summer, and symbolizes masculinity, externality, superiority, and positivity. Each entity, including human body, can be defined as *yin-yang* unity. On the one hand, as the opposite sides within one unity, *yin* and *yang* contend against, restrain, and repel each other. On the other hand, *yin* and *yang* are the root of each other, and mutually generate and promote themselves. The two are inseparable and integral within one unity. Moreover, the states of *yin* and *yang* are always changing. The elements are always growing or reducing, or even transforming to the opposite side under certain conditions.

Table 2 Themes and subthemes of postpartum women’s traditional postpartum practices – *zuo fang*

Theme	Sub-themes
Gaining <i>yin-yang</i> balance	Rest to restore vital body energy Eating <i>hot</i> food to improve <i>yang</i> Dietary precautions to maintain the <i>yin-yang</i> balance of the baby
Preventing <i>xie</i> entering body	Staying in the room to avoid <i>xie</i> (<i>wind</i>) Hygiene practices to avoid <i>xie</i> (<i>cold</i>) Wearing more clothes to avoid <i>xie</i> (<i>wind and cold</i>) Activities caution to avoid <i>xie</i> (<i>diseases</i>) Dietary prohibition to avoid <i>xie</i> (<i>diseases</i>) Avoiding sex to avoid <i>xie</i> (<i>diseases</i>)
Enhancing breastmilk production	Dietary practices prescribed to improve breastmilk production Dietary prohibition to avoid decreased breastmilk production Restricting visitors to avoid decreased breastmilk production

According to traditional Chinese medicine doctors, *zuo fang* is the way to regain *yin-yang* (shady-sunny) balance for postpartum women through restoring *qi xue* (the vital energy and blood) of their body. To achieve *yin-yang* balance, rest to restore vital body energy and to eat *hot* food as two important practices of *zuo fang* was followed by postpartum women. Also, the baby's *yin-yang* balance was maintained by postpartum women's dietary precautions.

Rest to restore vital body energy

Resting well during the postpartum was one of the most frequently mentioned practices by all women. Rest is believed to restore the vital body energy (*qi*). Good rest meant to lie in bed as much as possible every day for a month after childbirth.

I am very weak during this period..... Sometimes when I go to the toilet and squat there, I feel my legs could not support my body, and I have to lean on something for supporting..... I always feel tired. I would like to lie in bed every day..... After more than 20 days, I feel my strength is coming back slowly..... I plan to rest for 40 days when I will get more power. (Postpartum woman 18)

Good mood, preventing diseases like waist pain, nothing else to do, and enjoying being taken care of were also the reasons for lying in bed during the postpartum. However, only one woman strictly practiced bed rest as suggested. Good rest was understood and then observed differently by the women. Many believed that adequate rest meant they were not tired. There was no need to lie in bed all day if lying in bed made them tired. They could sit, walk or even do some household work such as washing the milk bottle. Furthermore, some of them believed that they had good health without the need for lying in bed all day. Besides, some women admitted that whether they could lie in bed all day depended on whether their family support was enough. Thus, many women had more bed rest during the first one to two weeks after childbirth but

much less in the rest of the month. A few just slept as usual and sat in the daytime.

Eating hot food to improve yang

Eating *hot* food during *zuo fang* is vital to improving *yang* of the body to gain further *yin-yang* balance. Deciding what, when and how often to eat were a massive task for women and their family who prepared food for them. Hens are believed as the best *hot* food, which is typically made into soup and can be eaten many times every day and as many as possible during the month following childbirth.

I have taken eleven hens in this month, which takes about two to three days to eat one. (Postpartum woman 11)

However, not all postpartum women could eat so many hens during the postpartum period. Some either ate several times or not at all during the whole month, as they did not have an appetite, or worried about gaining weight or aggravating baby jaundice. Moreover, pork, pork ribs, and fish were also considered as *hot* food but not the best to change the flavor. Such *hot* food was encouraged to be eaten immediately after childbirth traditionally to promote recovery.

However, some women did not start to eat such *hot* food until the second week after giving birth. Different reasons for this included following the nurse's suggestion and being too weak to digest and absorb the high fat, energy and protein food in the first week following birth. Also, noodles, eggs, and brown sugar were also the most popular *hot* foods to eat.

Dietary precautions to maintain the yin-yang balance of the baby

The baby's *yin-yang* balance could also be maintained through breastmilk by adjusting the women's diet. If they overate *hot* natured food, the baby would get too much *yang* (*shang huo* - getting fire) with the red rash on the body; by contrast, if the postpartum women were over eating *cold* food, the baby would get too much *yin* with symptoms like diarrhea.

I ate too much hen (hot food) several days ago. You see my baby is 'shang huo' (getting fire, or suffering from excessive internal heat) with a red rash full on his face, neck and chest. (Postpartum woman 2)

Preventing xie entering body

In traditional Chinese medicine, factors that cause diseases and the state of different kinds of diseases are all called *xie*. It is believed as *xu chu zhao xie*, meaning when the body is weak, it is easy to let disease factors enter and thus get diseases. Postpartum women are in a state of *yin* after childbirth, called *xu* by lay people. This makes them vulnerable to any disease factors and diseases. Once women get disease during the postpartum period, it is believed that these are always incurable and last for the rest of life.

As the 'pore' of body opens after childbirth, *wind* and *cold* are believed the most common *xie* (pathogenic factor) that can be anywhere to enter the body of postpartum women to cause different kinds of diseases such immediate cold and the incurable headache and tearing of eyes in older age. To protect postpartum women from *wind* and *cold* and diseases, they had to stay in a room, observe hygiene practices and wear more clothes during *zuo fang* (*sitting in room*).

Staying in the room to avoid xie (wind)

Staying in the room is the literal meaning of *zuo fang* (*sitting in room*) in the local language to avoid *wind* outside. The room is normally understood as the bedroom with the door and windows closed tightly. Postpartum women stayed in their bedroom for most time of each day during the postpartum period including eating inside.

After giving birth, the bone of the whole body is loose. Especially there is a slit in the pelvic bone..... The pore of the whole body opens. All these changes make it easy for wind to enter the body. I think it is real. Once I went outside, and the wind was small, but I still felt

chilly even now is in summer. However, before childbirth, I did not have this feeling in wind. So, I avoid going out of the bedroom. (Postpartum woman 4)

However, for some women, the room was not just the bedroom, but anywhere inside the home but they were not supposed to go outside of. In addition to the natural wind outside, they also had to avoid wind inside the home from electric fans and air-conditioning. However, a few accepted air-conditioning but avoided the direct wind from this.

Hygiene practices to avoid xie (cold)

Traditional hygienic practices were believed to help avoid *cold*, particularly cold water, which mainly included washing hair, taking a bath, brushing teeth, or washing any other parts of the body for a month. Washing hair and taking a bath was believed to make the postpartum women expose to *cold* that might cause a cold and headache, while brushing teeth might cause the women to have loose teeth or lose teeth in an early age.

I did not wash my hair for a month. I worried I would get cold and headache. (Postpartum woman 4)

However, most thought it was difficult to follow the traditional hygiene practices strictly for a month. Most washed hair one to two times during *zuo fang* by using warm water and drying hair with a hair drier. The majority of women wiped their body with a towel and warm water every day. Most of them also brushed their teeth with warm water every day but brushed gently and quickly using a unique toothbrush, such as the disposable toothbrush designed particularly for postpartum women. Only one woman kept hygiene as usual washing hair and taking a bath often. Several explanations of not following the traditions strictly were presented by the informants, such as they could not endure such discomfort for a long time, learnings from the internet and accepting

a nurse's suggestion to wash hair and take a bath often.

Wearing more clothes to avoid xie (wind and cold)

To prevent *wind* and *cold* entering the body, the women wore more clothes than usual both in cold and hot seasons when they stayed inside the house.

In such hot days, I have to wear long sleeve clothes, pants, socks, and even cotton-padded shoes. (Postpartum woman 15)

Activity caution to avoid xie (diseases)

During the postpartum period, any part of women's body is believed weak and vulnerable to different kinds of diseases, and needs to be protected by not using it much. Thus, they could not watch TV or read a smartphone to protect eyes from becoming tired immediately or getting eye pain, early eyesight decrease or tearing eyes in the future. However, all the women watched TV or read smartphones to a different degree, as these activities were already the habits of their daily life.

I felt tired eyes when I read WeChat (a widely used communication application in China) for only 5 minutes..... I read several times a day, 6 to 10 times on average. I just cannot stop myself from reading it. (Postpartum woman 13)

Also, they could not sit, stand, or squat much, or hold heavy things to prevent different kinds of diseases like the chronic pain of waist, knee, and feet, as well as uterine prolapse in the future.

Dietary prohibition to avoid xie (diseases)

Postpartum women could not eat *cold* food such as fruit to avoid delay in lochia discharge, teeth pain or a discomforted stomach. Hard and sour food also needed to be avoided. However, *cold* food was defined differently by the women. For instance, some considered all fruit to be cold, while others believed only fruit like watermelon as being *cold* food. All vegetables were not viewed as *cold* food.

I cannot eat cold food or drink cold water. Cold food might cause gong han (cold uterus), which would slow down the lochia discharge. (Postpartum woman 14).

Avoiding sex to avoid xie (diseases)

Sexual activity was supposed to be avoided from the time without lochia discharge to several months after childbirth, believed to prevent infectious diseases, infertility, or being pregnant during postpartum period. Some of them just did not want it because of being tired.

I do not know the duration, at least when I have no lochia discharge. Otherwise, it might cause infectious diseases. If you get disease during the postpartum period, you will be challenging to be pregnant again. (Postpartum woman 10)

Enhancing breastmilk production

To increase breastmilk production, some foods were encouraged to be eaten and in contrast to prevent breastmilk decrease, some foods was prohibited. Also some visitors were restricted during the postpartum period.

Dietary practices prescribed to improve breastmilk production

Some food like crucian soup, *huang hua* (yellow flower), pork trotter soup and so forth were believed to increase the breastmilk production. Thus, postpartum women ate such food intentionally to assure enough breastmilk for the baby.

I ate lots of huang hua to increase milk production..... You can put huang hua in any soup you cook, like hen soup, or pork trotter. (Postpartum woman 9)

Dietary prohibition to avoid decreased breastmilk production

Some foods were believed to decrease breastmilk production such as *gastrodia elata* (a traditional Chinese medicine that can be cooked with food), pork liver

soup, cock, and cuttlefish. Some shared their experiences and beliefs such as:

Two days ago, I ate a bowl of pork liver soup, now I do not have breastmilk. It decreased obviously. (Postpartum woman 13)

Restricting visitors to avoid decreased breastmilk production

To avoid decreasing breastmilk, those women who were pregnant or menstruating, or breastfeeding a baby were typically restricted from visiting postpartum women.

People in this village believed that the pregnant women should not visit postpartum women. My neighbor was pregnant. She said she would be embarrassed if I did not have milk after she visited me. (Postpartum woman 17)

Discussion

The findings show that the Chinese women living in the rural area of Jiangxi adhered to traditional postpartum beliefs and practices aimed at restoring and maintaining their health and protecting themselves and babies from diseases. The findings are consistent with findings in other regions of China.^{4,19,31,32} Other Asian countries, such as Thailand,⁵ Myanmar,^{9,10} Malaysia,¹¹ and Vietnam,⁶ had similar reports of traditional postpartum practices. Significant similarities and differences of traditional postpartum beliefs and practices have been found in other regions of China.^{4,19,31,32} Furthermore, the traditional postpartum beliefs and practices varied among women living in the same sociocultural context of the rural area of Hukou Jiujiang Jiangxi, China. Therefore, it is particularly important to look at the traditional postpartum beliefs and practices as a whole. Two questions arise: Why did all women in this study followed many traditional postpartum practices of *zuo fang* in the vast, changing China rural society?

and Why did most of them adapt some practices in their settings?

Based on the findings of this study, the traditional postpartum practices as a cultural ritual with a long history are embedded in women's mind and passed down women from generation to generation. Several reasons were identified to explain why postpartum women chose to follow the traditional such practices though they had a choice. The research supports the view that the postpartum period is vital for women to recover physically, psychologically, mentally, and transition to motherhood smoothly. Consistent with previous studies^{38,39} through a woman's contribution of a new life to the family, the traditional postpartum practices serve as a reward for her and an opportunity to establish and improve her social position and rights in her husband's family.⁴⁰

Moreover, Raven et al. (2007) reported that the older generation with health problems who related to performing traditional postpartum practices gave their advice to the next generation so that they could try to avoid similar health problems.¹⁹ Confirmation of this belief was supported in this study. Besides, postpartum women are supposed to obey their parents and parents-in-law because of the unique social value of filial piety in China society.³ Thus, to be filial and avoiding direct conflict with the older generation, postpartum women are more likely to follow what their mother or mother-in-law tells them to do. More importantly, they also provide family support for women to observe traditional postpartum practices. Studies reflect this practice among different groups of Chinese women.^{2,29} In this study, almost all postpartum women lived with their mother or mother-in-law, who provided them family support to a considerable extent.

Last but not the least, as reported by Liu et al. (2006), the lack of postpartum nursing care including education from professionals, might also provide a continuance of women performing traditional postpartum practices.¹⁵ In this study, the women had

limited postpartum education during their hospital stay for childbirth, and home visits by nursing or medical staff were absent during the postpartum period.

Even though the women chose to follow the traditional postpartum practices, they did adapt and modify many of these. This study supports the view that the improved living conditions such as warm water supply inside homes, heating equipment in the bathroom, hair drier and so on made the modifications possible and convenient. Similar findings were reported in Hong Kong and Taiwan.^{3,4}

Both Chin et al. (2010) in Malaysia and Holroyd et al. (2011) in Hong Kong claimed that the development of western medicine influenced women's beliefs about traditional postpartum practice.^{3,26} Questioning of such practices was confirmed in this study, for example, many women accepted nurses' suggestions to adapt their traditional practices, such as the hygiene measures. Naser et al. (2012) reported that in modern society of Singapore, readily available modern technology, such as the internet and online chat forums, gave people access information about global postpartum practices and care, which helped women modify their traditional practice or abandon it as they wished.⁸ The women in this study echoed this as a smartphone to different degrees.

Moreover, though postpartum women tended to obey the older generation, they also became more independent. In this study, informants were concerned about their physical comfort and feelings when they chose to adapt and modify some of the traditional postpartum practices, for example, washing hair and brushing teeth. The findings of this group are consistent with the results among Hong Kong postpartum women, who were more independent and self-centered, and made decisions by themselves instead of following the older people, which finally affected what and how they undertook practices during the period of *zuo-yue-zi*.³

Also, in this study, the postpartum women were given more freedom by the older generation to

make decision of what to do and how to do regarding the traditional practices. As the older generation is becoming less strict about observing the tradition. Thus, postpartum women inherit the traditional postpartum beliefs and practices, while, they also adapt the tradition into the modern sociocultural context.

Conflicts between traditional beliefs and practices and modern postpartum nursing care during postpartum period still exist. The postpartum women feel ambivalent about what practices selected to follow, the traditional or the modern postpartum practices.⁴¹

Limitations

Only the postpartum women who were ethnic Han in the rural area of Jiujiang, Jiangxi were recruited. However, China has other 55 ethnic groups, from which the traditional postpartum beliefs and practices might be quite varied in the same context. Also, the inclusion criteria did not limit the parity. When women gave birth to the second child, some were more careful as they did not follow the tradition well after the first baby and feared problems may arise, while others were not as compliant as with the first pregnancy because of the lack of support from the family who were busy taking care of the first child. So the number of the children might have an influence on the practices that postpartum women performed. Moreover, postpartum women spoke the local language to different degrees. Thus, the ambiguities of language might have made the researcher miss some information about traditional beliefs and practices in their responses.

Conclusions and Implication for Nursing Practice

This study provides a contemporary picture of traditional postpartum beliefs and practices in the natural settings in an area of China, which define the activities in each aspect of the daily life for women

during postpartum period is to assure the health and life of both postpartum women and the babies. It also provides insight into the strength of the health beliefs of the Chinese women about practices during the postpartum period and health later in life.

This study provides insights in the sociocultural context of Jiangxi that has never before obtained and of particular interest that in the 21st century postpartum practices are as they have been for centuries since the Song dynasty. Furthermore, the knowledge of traditional beliefs and practices should be included in the education of midwives and nurses to cultivate their cultural awareness further to provide culturally sensitive postpartum care. Comparative studies are recommended with women who follow the traditional practices and those who do not for the impact of each on the physiological and psychological health of the women, impact on family relations, affect of social support and other factors that affect women in the transition of new roles with a new baby.

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การวิจัยเชิงชาติพันธุ์วรรณนาความเชื่อและการปฏิบัติตัวหลังคลอดแบบดั้งเดิมของสตรีจีน

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บทคัดย่อ: ในหลายสังคมของเอเชีย การปฏิบัติตัวหลังคลอดแบบดั้งเดิมถูกเชื่อว่ามีความสำคัญต่อสุขภาพของสตรีและทารก ความหมายทางสังคมและวัฒนธรรมที่ผังลึกมีความเกี่ยวพันกับการปฏิบัติที่เกี่ยวข้องกับด้านพุทธิกรรม การทำกิจกรรม อาหาร สุขอนามัย และการดูแลทารก ซึ่งมีความหลากหลายตามภูมิภาค จากการศึกษาที่ผ่านมาแสดงให้เห็นถึงการแปรความหมายที่หลากหลายของความเชื่อและการปฏิบัติตัวหลังคลอดแบบดั้งเดิมของชุมชนท้องถิ่นต่างๆ โดยในพื้นที่ชนบทของจีวเจียงเจียงซี ประเทศจีน นั้น ความเชื่อและการปฏิบัติตัวหลังคลอดแบบดั้งเดิมจากทัศนะของสตรีหลังคลอดยังไม่มีหลักฐานเชิงวิชาการที่ชัดเจน บทความนี้เป็นส่วนหนึ่งของการวิจัยเชิงชาติพันธุ์วรรณนาที่มีวัตถุประสงค์ เพื่ออธิบายความเชื่อและการปฏิบัติตัวหลังคลอดแบบดั้งเดิมของสตรีในบริบทสังคมวัฒนธรรมของพื้นที่ชนบทของจีวเจียง เจียงซี ประเทศจีน โดยทำการศึกษาในหมู่บ้านของเขตการปกครองท้องถิ่นของเมือง และจังหวัด ในเมืองจีวเจียง จังหวัดเจียงซี ประเทศจีน เก็บรวบรวมข้อมูลตั้งแต่เดือนกรกฎาคม 2560 ถึงเดือนกรกฎาคม 2560 โดยใช้วิธีการสัมภาษณ์เชิงลึกในสตรีหลังคลอดซึ่งเป็นผู้ให้ข้อมูลหลักจำนวน 18 คน วิเคราะห์ข้อมูลโดยใช้หลักการวิเคราะห์ข้อมูลเชิงคุณภาพ 6 ขั้นตอน ผลการศึกษาพบ สามเกณฑ์สาระที่เกิดขึ้นจากการปฏิบัติตัวหลังคลอดแบบดั้งเดิม ได้แก่ การเพิ่มความสมดุลย์ของหิน-หยาง การป้องกันปัจจัยที่ทำให้เกิดโรคเข้าสู่ร่างกาย และการเพิ่มการผลิตน้ำนม ซึ่งความหลากหลายของความเชื่อและการปฏิบัติตัวหลังคลอดแบบดั้งเดิมได้รับอิทธิพลมาจากบริบทสังคมวัฒนธรรมของท้องถิ่น องค์ความรู้ถึงความสำคัญทางวัฒนธรรมของความเชื่อและการปฏิบัติตัวหลังคลอดแบบดั้งเดิมของสตรีในชนบทจีน เป็นสิ่งที่จำเป็นสำหรับพยาบาลในการปฏิบัติการพยาบาลที่มีความไว้วางใจ

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คำสำคัญ: สตรีชาวจีน การวิจัยเชิงชาติพันธุ์วรรณนา การปฏิบัติตัวหลังคลอด ความเชื่อ วัฒนธรรม

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