

INDIAN ETHNICITY AND BACKGROUND

Communication

- Patients from an Indian background may say yes in order to please the health professional, even if they do not understand the medical concept or treatment plan. Health professionals should ensure the patient understands.
- People of Indian background often expect that a physician will gather a complete history and perform a thorough examination.

Health related beliefs and practices

- Health related behaviours mainly derive from traditional Ayurvedic (ayur – longevity, veda – science) principles. According to Ayurvedic theory, good health requires that there is a balance of three humours: bile (fire), phlegm (water) and wind. Disturbance of this homeostatic condition causes illness.
- Certain foods can aggravate a particular humour, causing a loss of balance.
- Blood may be perceived as the life force and treated as precious.
- In India, western medicine is increasingly popular among the educated and wealthy. Immigrants of Indian background usually have both a western and Ayurvedic understanding of health and illness. Indians from Fiji, Malaysia or South Africa may have less understanding of Ayurvedic principles.

Pregnancy

- In India, pregnancy is usually viewed as a normal physiologic phenomenon that does not require any intervention by health care professionals. Only in the event of a problem will pregnant women seek medical advice.
- A fatalistic view about life can extend to pregnancy. Many Indian women believe they have little or no control over their pregnancies or outcomes.

Sons are often preferred to daughters. This has implications where parents know the sex of the foetus. Women could decide to terminate pregnancy if they believe the foetus is female.

- Nutrition-related practices during pregnancy are based on a belief that 'hot' foods are harmful and 'cold' foods are beneficial. Because pregnancy generates a hot state, pregnant women are advised to attain balance by eating cold food and avoiding hot food. Cold foods are recommended in early pregnancy to avoid miscarriage. Hot foods are encouraged during the last stages of pregnancy to facilitate labour.
- Some women believe that excessive eating during pregnancy may result in a large foetus and difficult labour.
- Fiji-Indians may believe that it is the responsibility of others to satisfy a pregnant woman's cravings. A baby which dribbles excessively indicates that the mother was not taken care of properly during her pregnancy.
- There are no restrictions applied to physical activity during pregnancy. Women from lower socioeconomic classes may continue their daily activities until labour starts, including carrying heavy loads. Women from higher socioeconomic classes are usually nurtured by their families.
- Twins and other multiple pregnancies may be viewed as unlucky.
- Some women may take herbal medicines to promote the development of a male foetus.

Population of India-born people in Australia:
147,110 people

Population in Queensland: 10,976 people

Population in Brisbane: 7,546 people

Gender ratio: 123.2 males per 100 females

Median age: 35.8 years

Age	%
0-14	7.3
15-24	14.8
25-44	45
45-64	22.8
≥ 65	10.2

Languages spoken: English, Hindi, Punjabi, Tamil

The majority (94%) of people who were born in India, who spoke a language other than English at home (96 010), spoke English very well or well.

Main ancestries: Indian, English and Anglo-Indian

The top three religions: Hinduism, Catholic, Sikhism. While the majority of Indians in Australia are Hindus, some are followers of other religious faiths such as Christianity, Islam, Sikhism, Buddhism and Jainism.

The number of Anglo-Indians and India-born British citizens immigrating to Australia increased following India's independence from Britain in 1947. Since 1966, many skilled professionals have migrated to Australia.

The three major countries of immigration are Pakistan, Bangladesh, and Sri Lanka. Immigrants of Indian background also come from Fiji, UK, USA, Canada, New Zealand, Singapore, Malaysia, Indonesia, Philippines, Middle East, Mauritius, South Africa, East Africa, Madagascar and the Caribbean.

The Indian community is well established. Many recent arrivals to Queensland have been skilled migrants and overseas students.

Birth

- Labouring women are isolated due to birth-related pollution beliefs.
- Women usually cry in pain and scream as the birth approaches.
- Some women may prefer lying on a bed during delivery, while others may prefer to squat, either on the floor or on a stool.
- Profuse bleeding after delivery may be viewed as a good sign linked to the purification of the uterus

After birth

- The mother and the child are usually isolated immediately after delivery, due to beliefs about pollution and impurity linked to the delivery process.
- The period of seclusion and confinement of postpartum women varies across regions. In many regions, the confinement period of postpartum women can be up to 40 days.
- Confinement is practiced to protect mother and infant from exposure to disease and from evil spirits. Both mother and child are considered to be in a vulnerable state after birth.
- Postpartum practices are usually upheld and enforced by mothers-in-law, aunts and other elderly female relatives. These women may decide the kinds of food a postpartum woman can consume.
- Some women may be required to follow a diet of puffed rice, tea and hot water for the first three days after delivery.
- The consumption of milk, butter, ghee and some types of fish is encouraged due to the belief that these foods will increase the quantity and quality of breast milk.
- Postpartum women may consume a large quantity of garlic, to aid in the contraction of the uterus or to 'dry the womb'.
- Common foods that are traditionally avoided by postpartum women include certain varieties of green leafy vegetables, fibrous vegetables, melons, pumpkin, papaya, eggplant, shell fish, eggs (in certain castes and communities), certain varieties of fish, lemons, limes, oranges, grapes, chillies, bell peppers, spices, bananas, yoghurt, and oily food.
- The placenta may be disposed of by burying it under the floor of the room where the birth occurred, or in the courtyard of the house. The placenta is buried to keep an enemy or evil spirit from seizing it and influencing the well-being and longevity of the child. Health professionals should offer the placenta to a postpartum woman.
- Cold baths or showers are avoided. In the hospital, a postpartum woman may accept a warm bath, but may be reluctant to have a warm shower.

Infant care

- It is believed newborns are highly susceptible to *nujur* (evil eye). Admiring a newborn is discouraged because it may cause envy and cast the evil eye.
- Physical examination of the newborn may also be considered casting the evil eye, and some Indian families may be reluctant even to have their newborns weighed for this reason.
- There are some precautions practiced to prevent the consequences of evil eye (eg. applying kohl on the infant's forehead – (Hindus only).
- Infants are usually placed in the maternal bed, and mother and child stay together for up to 40 days.
- Infants are usually massaged with oils on a daily basis.
- Some ethnicities practice giving honey mixed with ghee to evacuate the meconium. In Australian hospitals, this practice is prohibited because of the risk of bacterial infection and increasing the level of blood sugar. Health professionals should inform women of this policy, explain the potential risks and discourage this practice after discharge.

Infant feeding

- Breastfeeding in India is universal and prolonged.
- In India, cultural practices related to lactation and breastfeeding are based upon the concept of ritual purity and hot and cold foods, restricted diet after childbirth, and postpartum isolation due to the polluting effects of childbirth.
- Initiation of breastfeeding by Indian women is usually prolonged, and starts when colostrum is fully expressed. Health professionals should inform women of the benefits of colostrum feeding and encourage them to feed their infant.
- Before the initiation of breastfeeding, infants may be given prelacteal feeds, including boiled water, sugar-water, tea, honey, cow or goat milk and mustard seed oil. These foods are given to cleanse the infant's digestive system from impurities of the womb that have been swallowed during childbirth, and to substitute breastfeeding before colostrum is completely expressed. These practices should be discouraged.
- Infants are usually fed when they cry at any time during the day or night.
- Foods supplementary to breast milk are given to the majority of infants within the first six months.
- Of the 165 India-born women who delivered in Queensland Health facilities in 2006, at the time of discharge, 86% (142) exclusively breastfed, 11% (18) breastfed and formula fed and 3% (5) exclusively formula fed.

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