The Porja: A Study on Pediatric Practices

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KEYWORDS

ABSTRACT
Pediatric Health in terms of Feeding Practices were recorded on 260 ever married women, who have at least a child in their reproductive span, belonging to the Porja, a Primitive Tribal Group of Visakhapatnam District, Andhra Pradesh. The sample hails from 18 villages of Munchangiputtu and Pedabayalu Mandals. The results show that almost all the mothers started breast feeding to their new born immediately. About 71 percent of the respondents squeezed out the 'colostrum' (milk) ere to start the feeding the baby, thereby depriving of their babies from 'colostrum', a thick yellow liquid rich in factors that provide natural immunity. This may be due to illiteracy and lack of awareness about the nutritive and immunity value of the colostrum. The duration of lactation was noticed mostly for 2years (42 percent) followed by 3years (38 percent) and 4years (17 percent). Very few mothers (3 percent) lactate their babies below the age of 1year due to conditions of ill health. The practice of supplementary feeding starts from 6 months onwards which is greater during 8-12 months (60 percent). The predominant type of supplementary feeding is 'Ambali' a liquid form of rice or chodi (87 percent) and a few of them are fed with rice in mashed solid form. The results are discussed in the light of available information on other local tribes besides focusing the relevance of illiteracy, status of awareness etc., on Pediatric health care practices.

INTRODUCTION
Healthy children are the real wealth of any community. Pediatric health care practices have become vital issue for the 3rd world countries where high foetal and child mortality were reported. Many studies (Ghosi 1989; Sinha and Pandey 1998) revealed that mother’s milk is the easiest to digest to the baby than any other substance. Even in many communities, where sweet water or honey is given, it is meant only for the purification of the child. The first feeding for any child is the mother’s milk. Breast-feeding has its socioeconomic, psychological, biological and immunological aspects (Neetimakanti 1991). Human milk is known to be an ideal, safe and complete food for infants and being available at a suitable temperature. It helps to promote normal dental and facial development. Tribals are a neglected lot and discriminated in terms of income distribution and social status. Most of them are desperately poor, backward, generally uneducated and lead a hard and miserable life (Thakur et al. 1991). In India, there are more than 400 tribal communities of which 75 are recognized as Primitive Tribal Groups (PTG) by the government in 1989 and the total Primitive Tribal population of the country is 24,12,666 as per 1991 census which constitutes 3.56 percent of total Scheduled tribes (Dash Sharma, 2006). Though there are reports on health and nutritional aspects of some Primitive Tribal Groups (see Dash Sharma 2006), no study exists on child health care practices from the Visaka agency area. Therefore, an endeavour is made, for the first time, to report the Pediatric health care practices such as breast feeding, and supplement feeding during weaning period among a primitive tribal group viz., the Porja of Visakhapatnam District, Andhra Pradesh.

The People
The Porja is a small hill tribe with a population size of 16,479 (Census, 1991) mainly distributed near the hill slopes of Munchangiputtu, Ananthagiri and Pedabayalu mandals of Visakhapatnam District of Andhra Pradesh. They are migrants from Orissa state for about 300 years back to the present habitat. They are said to be a section of Khond/Gadaba of Ganjam (Thurston,1975). There are 7 endogamous units who differ in language, food habits, customs and traditions. They are Barendi Jhodia (beaf eaters and speak Oriya), Pengo Poraja (buffaloe eaters and speak Oriya), Khondi or Kindi Poraja (a section of Khond who eat beef and buffalo but speak Khond), Parangi Poraja (a section of Gadaba
who may or may not eat buffalo, but speak Gada
daba dialect), Bonda or Nanga Poraja (a section of
the Gadaba and speak Gadaba dialect), Tagara
Poraja (a section of Koya and sepeak Koya or
Telugu), and Dur Poraja or Didayi Poraja (who
speak Oriya). However, there exists no marital
links yet they have commensal relations and
claim of higher social status by some units. They
speak Parji akin to Bhatri, a form of Oriya (Grier-
son 1906). The Porja living in Andhra Pradesh
belong to the Parengi Porja (Kumar and Narahari
1987, Sachi Devi and Naidu 2003) on whom the
present study has been conducted.

MATERIAL AND METHODS

Data pertaining to breast feeding practices, duration
of lactation, supplementary feeding were collected
from 260 ever-married women (aged 18+ years) who
have atleast a child, belonging to Porja, a Primitive
Tribal Group of Andhra Pradesh. The sample is
drawn from a total of 18 villages including 16 villages
from Munchangiputtu and 2 villages from Pedabay-
alu Mandal of Visakhapatnam District. The pur-
poseive sampling method was adopted. Field
work was conducted during January-March,
2006. An Interview based on structured ques-
tionnaire method was employed during the data
collection.

RESULTS AND DISCUSSION

Tribal women in India are at a great disad-
vantage due to illiteracy and ignorance. Various
research studies on tribal population of India
revealed that their diets are nutritionally deficient
(Kupputhai and Mallika 1993) Most of the stud-
ies proved that the first milk i.e. the colostrum
is good for the healthy growing of a newborn (Khan
1990; Ghosh 1993; Deka 2004). But, the tribals
treat it as impure and not easily digested to the
newborn. So they throw it away and give sugar
water or Amudam (Castor Oil) or honey to the
children, which cleans the baby’s digestive sys-
tem. The pre-lactation liquid was given with the
help of cotton or small piece of cloth soaked, in
the solution. It was reported that the tribes of
Gujarat (Tavkar 1983), Rajasthan (Gupta and
Singh 1985) and Irlas of Nilgiris (Maurya 1987)
put the new borns to breast for their first feed
within 24 hours to 96 hours after birth. This phe-
nomenon is clearly reported (Table 1) in the
present study as 71 percent of women said that
they have initiated the breast milk to their new
born babies immediately after delivery (i.e., after
2-4 hours) but squeezed out, before initiation,
the first milk that contain colostrum, which is
nutritious and immunity provider in the new
borns. Only 29 percent of the mothers, who are
generally educated by the local ANM, fed their
new born with first breast milk containing colos-
trums. A similar finding was noted for the Gada-
ba tribe of Vizianagaram District (Hemalatha, 2005)
and the Savaras of Srikakulam District (Narahari
et al. 2006) where 72 percent and 80 percent of
the lactating mothers, respectively practice the
squeezing out of the first breast milk. In con-
trast, Nanibabu et al. (2006) observed that
among the Koyadora tribe of East Godavari Dis-
trict, Andhra Pradesh, only 20 percent of the
lactating mothers squeezed out the first breast
milk before initiation. Thus, the Primitive Tribal
groups, the Porja, the Gadaba and the Savara
deprive colostrums to their new borns due to
not only high illiteracy but also blind beliefs
and customs towards colostrum even today.

The Supplementary feeding and duration of
lactation are interdependent. Further, there is an
inverse relationship between the two i.e., as
breast feeding or lactation period increases it
delays the start of supplementary feeding. Among
the Porjas, an average lactation period
is found to be 2 years (41.50 percent) followed
by 3 years (37.69 percent) and 4 years (17.31 per-
cent), which shows a comparatively longer peri-
od of lactation (Table1). Because of the pro-
longed period of lactation, the supplementary
feeding is delayed by 8-12 months (60.39 per-
cent) to above 1 year (23.46 percent) in this tribal
population. Moreover, the Porjas believe that
the supplementary feeding should be started
then only when the child is supposed to walk.
Regarding the type of supplementary feeding,
most of the respondents (88.46 percent) said that
they fed liquid in the form of ‘ambali’ or gruel or
mashed rice liquid to their children (Table 1).

CONCLUSION

Therefore, due to high illiteracy level, deep
routed customs, beliefs and practices, the Porja
children seem to be deprived of colostrum dur-
ing infancy, improper supply of nutrients during
weaning period also hampers on their growth
and development. Further, the WHO (2001) rec-
ommendation of practice of breast feeding at least for 6 months as an appropriate period for normal growth, free from gastro-intestinal infections and prolonged post-partum amenorrhea though exceeds the said specified period in the present population, yet the unhygienic conditions prevailed during breast feeding as well weaning periods, and malnutrition of the mothers during pre- and post-natal periods affect pediatric health status are also to be considered which demands intervention programs, to monitor infant growth and improve maternal nutritional status among the Porjas. 

**ACKNOWLEDGEMENTS**

The author (SNH) is highly grateful to the University Grants Commission, New Delhi for the financial support under the Major Research Project scheme (vide letter no. F.5-173/2004(HRP) dated 21-10-2004). Thanks are due to ITDA, Paderu and the tribal people for their cooperation and help during the data collection.

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