Child Birth and Child Care Experiences among the Sherpas of Srikhola and Gurdum areas of District-Darjeeling, West Bengal

Chumu Sherpa[1] and Pinak Tarafdar[2]

Abstract :

Birth is a significant socio-cultural event that differs in several ways around the world as it is the symbol of the beginning of life. In every society we find certain amount of knowledge about the birth of a child; and the rituals are the conspicuous phenomena to understand the important construction of the society and its values. In anthropological point of view the process of birth and its related rituals form a great part of the whole process of socialization, which the new ones later get accustomed with. It is an observable fact that every society since time immemorial has been practicing some rituals and methods that help in taking special care of both mother and baby. This paper mainly focuses on the child birth experiences and its associated rituals among the Sherpa community of Srikhola and Gurdum areas of Darjeeling district in West Bengal.

Key Words: Birth, Sherpa, Rituals, Experiences, Mother, Child.

Introduction :

Birth is an important event as it is the symbol of the beginning of life and in spite of its extraordinary nature occurs daily throughout the world. Birth is the process by which off springs are produced by means of reproduction in biological terms but according to anthropological perspective the process of birth and its related rituals form a great part of the whole process of socialization, which the new ones later get accustomed with. In every society we find certain amount of knowledge about the birth of a child. The term birth is an observable fact and in human society, it comes under a series of rituals together as the rite-de-passage the term coined by French ethnographer Arnold Van (Gennep, A 1909).

A ritual is a sequence of activities involving gestures, words and objects, performed in a sequestered place and performed according to set sequence as suggested in Merrian–Webster dictionary. It may be prescribed by the traditions of a community, including a

religious community (Bell 1997).

In the view of Victor Turner (1968), 'only among those least influence by technological change is ritual able to maintain its function'. The British anthropologist Jack Goody (1961) claimed some forty years ago, the term "ritual", has been applied by anthropologists and others to a wide assortment of acts and beliefs.

According to Monica Wilson (1954), 'Rituals reveal value at their deepest level… men express in ritual what moves them most and since the form of expression is conventionalized and obligatory, it is the values of the group that are revealed'.

Maternal health refers to the health of women during pregnancy, childbirth and the postpartum period (Kundu & Tarafdar 2012). It encompasses the health-care dimensions of family planning, preconception, prenatal and postnatal care in order to ensure a positive and fulfilling experience in most cases and reduce maternal morbidity and mortality in other cases (who.int/maternal-health).While motherhood is often a positive and satisfying experience, but for some women it is associated with lots of suffering, ill-health and even sometimes causes death.

In today's world mother and child healthcare plays a vital role in the healthcare practices and lots of programs and measures have been framed for the wellbeing. It is an observable fact that every society since time immemorial has been practicing some rituals and methods that help in taking special care of both mother and baby. This paper mainly focuses on the childbirth and its associated rituals in relation to maternal and child healthcare experiences of the 'Sherpa' community.

Methodology

This article is an outcome of the research endeavour conducted among the Sherpas of Darjeeling district, West Bengal. In the present juncture, the word 'Sherpa' is very well known and also used synonymously to the profession related to mountain climbing and potters. But actually Sherpa consists of Tibetan origin community mostly found residing in high altitude regions having long migration history of some 300 years back. Ancestors of the present day Sherpa are the pastoral community from the eastern part of Tibet i.e. Kham. Other Tibetans summon them as the Sarwa or Sherpa which means 'people from the eastern part of Tibet'. Later on, this descriptive term is used to identify them as Sherpa or Sherwa. They speak Sino-Tibetan language and mostly are Buddhists by faith (Sherpa & Tarafdar 2018).

The study has been done specifically in the areas of Srikhola Daragaon Gram Panchayat which comes under the administration of Pulbazar, Bijanbari block in Darjeeling district. The study area is bifurcated by Srikhola River and Singhallia forest range considered one of the inaccessible areas of West Bengal connected with the outer world through means of a single wooden foot bridge. Two villages namely: Srikhola and Gurdum of Srikhola Daragaon gram panchayat have been selected for the present study. Total fifty six household samples have been collected out of those forty houses belonged to

Srikhola whereas sixteen houses are from Gurdum. Gurdum is purely khasmal area while the upper part of Srikhola borders with Singhallia forest belonging to khasmal area. According to native people, khasmal is an area belonging to forest area where they are not allowed to purchase and sell the land. The population under the study is primarily engaged in agriculture along with livestock rearing.

Both primary and secondary data are considered while writing this paper. Primary data are collected through preliminary census schedule; besides that in this study some suitable anthropological methodologies have been applied keeping in mind every minute detail like population, location, viability, etc. As mentioned above, preliminary census has some structured questions in the form of schedule that tried to cover all sorts of basic question which is useful to get the general idea about the person like name, age, birth place, education, occupation, etc,. Schedule is filled by the researcher in presence of informer during the field visiting person door-to-door.

In this paper, case studies are used as models to explore the informant's personal experiences to elucidate the facts of the present study. Eight case studies are considered as most significant for the current discussion although there are other supportive cases studied by the researches for gathering comprehensive knowledge on the topic. The cases have been considered based on the informant's personal life history to support their view towards the overall aspects of birth in order to understand their cultural belief system and healthcare practices.

Birth

Birth (*Kewup*) is an important part of the Sherpa rituals that help in growing one's legacy. As birth helps one family to increase, it is considered a symbol of prosperity. According to elderly persons of the village, the birth of a child brings marriage to its successful conclusion. 86 years old mid-age man name Lakpa of Srikhola told- 'among Sherpa, the final stage of marriage ritual (zendi) is completed after the birth of a child'. He used to listen from the elders that until the birth of a child the couple stayed with the wife's family and the son-in-law (makpa) had to assist them. With birth of a child, they moved into the husband's house, but this kind of ritual is not observed in today's era as the Sherpa society even has undergone a social change.

In outlook of the under study community, parents held directly responsible for birth still the supernatural powers are supposed to be the sole and ultimate authority. The studied Sherpa population has a strong faith in Tibetan Buddhism. As per the teaching of Tibetan Buddhism, they believe in 'samsara' literally means 'continuing on' or 'wandering on' that indicates the repetitive cycle of birth, death, and rebirth. Samsara is symbolically represented by the wheel of life (srid pa'i khol lo) that can be found on the outside walls of Tibetan Buddhist monasteries. The wheel of life (srid pa'i khol lo) is depicted in the six regions of rebirth (gro ba rig-drug) namely, the three higher realms of God (lha), demi-God (lha-ma-Yin) and human being (mi) and three lower realms of

hell (dmyalba), hungry ghosts (yi-dvags) and animal (dus-'gro). The human (mi) realm is considered as the most fortunate realm because in this life/birth one can accumulate enough merit and attain enlightenment.

They also believe that karma plays a significant role in deciding and guiding one's destination in birth. The idea is what you plant, you harvest. The studied population of two villages believed that the couples conceiving the baby i.e. the soul or being who will be born are drawn together by circumstances of their previous lives (karma). Therefore, the circumstance of karma affects the condition of renaissance and what you become in the next life depends on what you did in this life; just like what you are in this life is a distillation of what you were in a previous life.

Infertility

Parenthood is a joyful occasion for the couple which satisfies natural eagerness of being the parents. The child is considered to be a gift of God while infertility a curse for the couple, especially for a woman. According to them, 'infertility (kama) is an inability to conceive or not being able to produce offspring'. Infertility is a great misery causing psychological distress not only for the young couple (nangtsang) but also the entire family. During fieldwork, it was found that infertility provided sufficient grounds for remarrying or divorce. Among them infertility regarding women and especially men has seldom experienced the prejudiced notion as nothing was said directly or openly to the couple. In case of infertility the under study people often suggest couples facing trouble in conceiving a baby to consult religious specialists (lama) or shamans or visit medical doctors.

Case Study 1: A 36 years old mid-age man, Nima and his 30 years old wife, Palmo has no children. After two years of marriage, when they failed to become parents, out of disappointment the couple has sought help from both traditional and modern method of treatments. Palmo stated, 'inability to become parent bears a stigma that causes lots of anxiety and disappointment for the couple particularly the woman'. In the hope of obtaining a positive outcome, they consult the lamas and also pilgrimage to holy shires for seeking blessing. Both of them also went to the doctor for check-ups. However, they discontinued the check-ups due to the high cost of treatment as their financial condition is not so well.

Pregnancy

Case study 2: Sangdoma (35 years) a mid-aged lady from Srikhola area, mother of two children shared her experience on how timid she was the first time on finding about her pregnancy (puzhung)…. 'After one year of marriage when I first got pregnant, I had no idea regarding pregnancy as very less is talked about those things openly with anyone. I cannot understand what was happening when I missed my menstrual cycle for two months. I shared the problem with my husband's sister (aaji or aai) who was married in

the same locality. She is a year older than me so, I easily share everything with her. After listening to my problem, she further interrogated me for providing details regarding the symptoms that I had faced through the duration. Immediately, she shared the news with the elder female members of the family when she became assured regarding my pregnancy. Later, all family members came to know about my pregnancy.' Along with her husband Sangdoma went to monasteries (gumba) to get blessings for safe delivery of the baby. During pregnancy she performed all her day-to-day chores regularly. Later, from the seventh month she started performing easier works. She regularly consumed plain and simple type of healthy meals such as rice, vegetables, legumes, meat, etc. Throughout pregnancy, she avoided going to the forest and river after sunset. Besides family members her pregnancy was kept a secret from outsiders. After completing nine months of pregnancy, she gave birth to a son at home.

As the population under the study does not observe any particular pregnancy rituals within the house so, the couples on finding about the pregnancy visit the monasteries and the religious heads (lama) for blessing to get a healthy baby. At times, they consult the lama for amulet (butti), etc. that can protect their upcoming child and also for safe delivery. The food of an expectant woman is not very special. She takes a regular meal, as whatever they eat on a regular basis. In some circumstances, if the expecting woman shows a desire for unusual edible things, then the family or husband tries to provide it if they are available and harmless to eat.

- ✦ According to most of the informants a pregnant woman should observe the following prohibitions: The pregnant women are not allowed to go out of the house, across the river, forest, burial ground and lonely places after sunset. They believe that after sunset some evil spirits linger in those kinds of areas and pregnant women can get victimised easily.
- ✦ The pregnancy of the women are kept secret outside the family as they fear that if the news of pregnancy spreads something unfortunate would occur. So, they do not take chances and usually hide it from the outsiders.
- ✦ During pregnancy apart from the family members, the pregnant women are prohibited to consume food from anyone. They believe that negative energy mainly from the food can be inserted to the pregnant woman and the growing baby.
- ✦ They believe that listening, thinking and speaking good things throughout the pregnancy period makes a great influences to the mental health of an upcoming child.
- ✦ The expectant mother visits holy shrines and offers prayers for the safe delivery and well-being of the upcoming baby.
- ✦ Until and unless the baby is born it is considered inauspicious to prepare too much or too far in advance.

More preferred boy/girl child

Case study 3: A mid-aged couple Tenzi (54 years) and Doma (41 years) from Shirkhola village have a total of six children, five daughters and one son. They are farmers and the husband also works as a day labourer in the village and adjacent area. In spite of the poor financial conditions the couple had a desire of having a son (pujung) along with the five daughters (pumu). After several years of waiting the sixth child was born as a son (pujung).

Case Study 4: Gyabul (49 years male) and Lakpha (42 years female) of Shrikhola village have four daughters. They married at the age of 29 years and 22 years. Lakpha was 24 years old when their first child was born. Gyabul was a retired army man, now working in their agricultural field along with his wife. They had not done any family planning. Currently, the four daughters of Gyabul are studying at Rimbick. Talking on the desire of son both husband and wife stated that they were happy with what they received and it is the wish of God. He believes that now days both daughters and sons are equal. They cannot afford more babies, as their financial condition is not well and the couple is happy with whatever they got. Same scenario has been found in other areas too. There is no hard rule regarding the preference of the child. Every child is welcomed with great joy and provided equal amount of love, care and opportunity as most of them think it is upon the willingness of God. It was also found that they did not have any specifications on number of children as it was found that some have more than ten children and some have only one or two.

Sherpa population is patrilineal in nature and considers the son (pujung) as the foremost successor of one's clan (ru). From the study, it is clear that the family at least wants one son to move further their lineage. Although they do not differentiate between the male and female child for offering the same amount of love, care, opportunity and absence of gender bias. The preference regarding the gender of a newborn entirely depends on the concerned couple and the family. Some parents prefer first born child as a girl child because she would be helpful for household work and taking care of younger siblings. The first born girl child is considered auspicious for both parents as it signifies longevity.

Fore-telling sex of the baby

Among them, there are different ways or signs to determine or fore- telling the sex of the child prior to birth:

- ✦ They seek the help of the incarnated lama's clairvoyant insight and prediction powers to determine the sex of the baby.
- ✦ If the left side of the mother's stomach is higher during pregnancy, this indicates the child is a girl and right side for the boy.
- ✦ They assume that if the pregnant woman has a pointed belly it would be a son, while in case of daughter her stomach would be round in shape.

- ✦ If the foetus lies on the right side of the belly, it would be a boy and left side for a girl.

Dream

Dreams (nalam) are observed as a connection to the unconscious mind and have a varying nature, such as being frightening, exciting, magical, melancholic, adventurous or sexual. Different types of dreams seen by the expectant mother at the time of pregnancy are considered auspicious and inauspicious. Sherpas under the study assume that certain dreams such as consuming fruits; wearing expensive ornaments or garments; a white conch shell; seeing enlightened people (lama); sunrise; seeing animals and playing of musical devices are considered the auspicious signs during pregnancy. The things such as falling off a cliff: a sunset, darkness; wandering without ornaments; deserted places; quarreling with others; weeping; being carried by water are considered as inauspicious dreams. In case of an inauspicious dream, the expected parent or the mother may go to a lama for balancing out any potential negativity through divination and prescribe rituals or prayers.

Parturition or Childbirth

In the studied area, most of the parturition usually takes place at home. With the introduction of modern medical facilities, some of them prefer to go to the hospitals. We found from the study that most of them have given birth at home on their own or with the help of experienced females, relatives or neighbours. Most of the villagers prefer parturition at home as basic modern facilities and hospital remains distant with difficult accessibility of transport and communication. Since the livelihood is also not well people mostly cannot afford being charged bulk of the money in moving to and fro so they prefer the above means.

Case study 5: During the field visit one mid-aged lady (52 years old) shared her experience regarding delivery of her fourth child. For the first time she conceived at the age of eighteen but unfortunately got miscarriage. Later, she had four children: two daughters (pumu) and two sons (pujung). All of her three older children were delivered at home with the help of her neighbouring friend. At the time of her fourth child, as she started to feel the labour pain, she sent her elder daughter to call her friend from the neighbourhood to help in the delivery process. After realizing some complication, they decided to transfer her to the nearby Rimbick Primary Health Center. Her husband summoned other male members of the village and arranged a carrier made of a bamboo basket (dhoko) to carry the patient till the periphery of Shrikhola wooden footbridge. After that a vehicle had been arranged to take her from Sepi till Rimbick.

However, halfway to the hospital, she gave birth to a baby boy in the vehicle. Thereafter, they took her to the primary health center. Later, she got discharged after the necessary checkup. She thinks herself fortunate that nothing happened to her and

the baby because some misfortunes had occurred previously in the village where the pregnant mother died during parturition due to lack of proper health care facilities available in the area. 'There are lots of problems regarding the access to the hospital, like transportation, financial situation and lack of proper medical facilities', she replied while showing apathy to institutional parturition. She further said, 'like her most of the expected mothers in the village had done their parturition at home by themselves or with the help of an experienced woman of the family or neighbour. We mostly visit the hospital in the most helpless or distress situations only'.

Case study 6: 61 years old Karma and his 48 years old, wife Diki had adopted their current daughter Nima (12 years old) from one of their relatives. Talking about adoption in more detail with Diki we find that Nima was her younger sister's daughter. They adopted her after mother passed away during parturition. Her sister died due to unavailability of good transportation and healthcare facilities in the area. After her death, there was no one to take care of the newborn baby (Nima) so, Diki and her husband decided to look after the baby. She took care and breastfed the baby as a foster mother. As they had only two sons, the couple decided to adopt the baby through consent of the family, relatives, and community. Interviewee couple further stated, 'This kind of case rarely happens in the area. It was the fate of both mother and child that one only survived and destiny wanted us to be her parents'.

Mostly, in Srikhola Daragaon gram panchayat childbirth happens at home, though in some cases the parturition occurs at the hospital. From the previous two case studies, it is clear that this kind of situation is very common in the region. As the studied area is located in one of the isolated parts of West Bengal so the basic facilities of day-to-day life is not up to the mark and it is very tough for the villagers to sustain in these conditions. The situation becomes worst during the rainy season especially for sick and aged people. In case of emergency, sometimes because of lack of amenities and transportation pregnant women face enormous trouble. Most villagers due to their economic condition and scarcity of time avoid attending the hospital for treatment as they have to spend large sums of money on travel and meals.

The expectant mother and the family wait anxiously to welcome the new member of the family. During the pregnancy period, the female members of the family prepare the traditional liquor (chyang) for the pregnant lady to drink after the childbirth. The chyang is kept in a safe container covered tightly with a lid. Birth of the baby generally happens after nine months, although seldom it may occur in a seventh or eighth month. In case of delivery at home, as soon as the expectant mother starts having labor pains, either matured or experienced female members of the family or neighbours help in parturition. If the expectant mother is taken to the hospital, the doctor and nurse perform the parturition process. There is no mid-wife in any of the villages under the study. Hence, the job of midwife is chiefly done by old and experienced women of the respected villages.

Case study 7: A couple of Shrikhola, Passang 28 years and Dolma 19 years eloped in their early teens. When first suspected about the pregnancy, she was only 16 years and her husband was 20 years old. As Passang worked in Indian armed force, his wife's pregnancy and parturition were monitored by his family members. Every month, Dolma went to the Darjeeling district hospital for check-up along with her sister-in-law (aaji or aai). After the doctor provided an estimated date of delivery, her husband also came for one month leave. Two days prior to the given date they went to Darjeeling town and stayed in relative's house.

At that time her mother-in-law asked the lama at the monastery to perform a special prayer for both her daughter-in-law and upcoming child for easy delivery. During my (first author) the first visit to the area, the baby was twenty-two days old and bought from the town a few days back after delivery. As she was not mature enough to understand and handle everything, therefore all the care was taken by mother-in-law and sister-in-law.

As discussed earlier, the studied area is far flung area of West Bengal and most of the delivery takes place at home and few occur in hospital. Total 307 populations of two villages: Shrikhola and Gurdum are studied, out of which 224 persons are born at home while 83 persons are born in the hospital. The study shows that usually parturition takes place at home and they only visit the hospital if complication occurs. Most of the people visit either the Darjeeling district hospital or hospitals located in the adjoining areas of neighbouring state of Sikkim for delivery. The reason for visiting the hospitals in Sikkim is the close location of the village to the area and also some of the women from the Sikkim got married in the studied area. While other villagers visit the Darjeeling hospital for delivery and related aid.

Rituals of childbirth

None of the males are allowed to attend parturition of the child (anga) as it is exclusively a female responsibility. It is said, that if the father stays during parturition then the upcoming child feels shy and not ready to come out from the mother's womb. Parturition usually takes place in a separate room of the house or the cow-shed so, it depends on the family choice and accessibility of the place in the house for delivery.

Prior to the labour pain, one of the family members takes some butter to a lama for blessings. The lama recites a mantra and then blows over the butter. As per belief, by doing so the energy of the spell (mantras) is transferred into the butter (mar). The blessed butter can be kept on the mother's hand during parturition or given to swallow and even rubbed on the body to reduce labour pain. For easy parturition, a small piece of butter is molded into the form of a fish (nya). Later, the lama or one of the family members recite a mantra over it and blows the energy of the prayer into the butter. The fish is given to the mother to swallow head first, without biting.

They believe that taking the blessed butter fish makes the woman feel blessed, stronger

and supportive which also encourage her to stop bothering labour pain and consequently make the parturition easier. In spite of the important role played by the lama in every aspect of childbirth and subsequent rituals his is presence is not required in the process of parturition. This is mainly because the process of birth is considered unclean and polluting (teep). If there is any kind of difficulty during parturition, lama may be asked to do special prayers at the monastery certainly not at the place of childbirth.

After-birth

With the coming out of the baby from the mother's womb, at first the umbilical cord is cut with the help of bamboo or kitchen knife. Then whole body of the baby is wiped with warm water and a piece of cloth. Depending upon the parent's personal choice a newborn is covered into neat clothes usually made from mother's clothes, bed sheets or new clothes.

After the birth of a baby, the newly mother is usually not allowed to touch her own hair and any other things present nearby until she cleans herself in warm water and changes her cloths too. As per belief of the villagers, after childbirth whatever things the new mother touches would fade out or lose quickly so, to get rid of she is given stone or wood to be held in hand for a few hours. Later, few drops of honey (rang) and butter (mar) are put in the tongue of newborn, as they consider it would bless the life of the baby with sweetness and prosperity. Butter is a symbol for nourishment, good health, and longevity.

After cutting of the umbilical cord (shaya), paste of turmeric (sermu) and mustard oil is applied in the navel of newborn as it is considered an anti-bacterial medicine. Umbilical cord of the baby is kept safe in piece of cloth at home, as it has the power to cure the diseases that occur to the child. Umbilical cord is used for making amulets (buti) to protect the baby from evil spirits and diseases. If the baby gets sick, a small part of the umbilical cord is given to drink with water.

After the delivery the placenta of a baby is carefully dispose away from the house. To dispose the placenta an empty place near the house is dug where the placenta is kept covered properly with mud. It is to be ensured that the area must not be reachable for animals to dig out. According to their belief, the placenta must be buried, as deep as possible because it plays a significant role during the development of a baby in the mother's womb. If an animal eats the placenta, the new mother may fall ill.

Purification process

With the birth of a baby various socio-religious rituals are observed. The studied population observes pollution period after the birth of a baby till three days in case of boys and four days for girls. During this period entire family is considered polluted and people usually avoid getting in touch with the affected family until purification is completed. As per their belief, if they visit or come into contact during pollution period,

they might suffer from invisible, unclean or polluting things commonly called as teep (Sherpa & Tarafdar 2018).

Lama of the village is invited beforehand for purifying from the pollution period by offering traditional liquor (chyang) and ceremonial scarf (kada). On the day of purification (anga pasum), Lama visits the house early in the morning as purification process must be done in morning session through some religious worship and ritualistic performance. At first lama offers pray in the holy shrine (chasum) and then burn the incenses (teep-sang) especially prepared for purification of birth pollution. Teep-sang are the mixture of different plants like dhupi, sunpathi, vhalayo (sag), harobaro found in the hilly regions along with other items like butter (mar), yogurt (sho), rock sugar (ngarcha), honey (rang), sandalwood (tsenden), mixture of grains (sadhbew palbew) and small piece of silk cloth (kochin ra). These items are mixed altogether with incenses and burnt to purify the house.

Later on, a half meter white (karmu) colour piece of cloth is tied in a bamboo (yungma or nygalo) stem named as tharchu which is placed in the main entrance of the house as it represents the birth of a child in the house. They believe that it guards the mother and child against malevolent spirits. The tharchu also signifies the gender of the child born in that family. In case of the daughter (pumu) the tharchu is kept at the right side of the main door and left side for the son (pujung). Next, the lama makes holy water (thui) with a mixture of kesar, camphor, and jaiphal then the bowl (kara) with red (marmu) soil (sa) and charcoal (soltok) are placed in the ground for providing the thui to mother and a newborn. Red soil represents the bond of a child with the earth and charcoal to ward off evil forces. Further, the lama puts butter (mar) in the forehead (trala) of both the mother and a child as a blessing.

Name - giving ceremony

On the same day of purification name giving ceremony (mindoup) is also observed. In view of Barbara (2006) naming is a decisive part of converting anybody into somebody that reveals crucial information about gender, kinship, geographical origin or religion. The name giving ceremony (mindoup) of a Sherpa child is an important event; it provides us some interesting information about the person. After childbirth, the parent usually consults with the respected religious figure (lama) to name a child as it is found that the lama plays a crucial role in life cycle related rituals. The lama is provided with the information about the birth time, date and day that it occurred. On that basis, the lama consults the religious book (dhato) and determines the child's name with the consent of the parents in presence of the relatives.

After finalizing the appropriate name, the maternal uncle (aajang) is called as he plays a significant role in the name giving ceremony (mindoup) of the child. The child's family first offers pong of chyang and ceremonial scarf (kata) to the maternal uncle (aajang) as a sign of respect. He summoned the baby with finalized name thrice and in the baby's

behalf mother (mama) responds by saying 'yes' (laso/hajur) three times. Likewise lama, relatives, and neighbours are invited to celebrate the purification and name-giving at a feast. The invitees bring gifts (kyeka) and ceremonial silk scarf (kata) for seeing the newborn baby for the first time.

Generally, the population under the study gives name according to the day of birth of a week. For example, a baby born on Monday would be named as Dawa (Sherpa word for Monday). It is found among them that mostly they have names with two words. Along with the first name, the middle name is also added, though one can also find a single word name. It totally depends on parental preference as there is no such rule. The names such as Passang, Migma, Tashi, Dawa, Tshering, Phurba are used for both males and females. In that case, the middle name can help to determine the gender of the person. For instance, if it is a girl child then Lamu, Doma while for boy child Tundu, Wangdi, Narbu, Sonam, etc are added as middle name along with first name. Besides name, the lama also determines the baby's element (kham) and year (lo). Lo and kham are determined by the animal year and element in which the baby was born. The lama also determines the child element (kham) and year (lo). Both kham and lo are useful during the time of marriage. According to Tibetan calendar, if a baby is born in the year 2017 then it will be firebird year (may, chya lo).

A temporary name is given to the new born child if any prior mishap occurs with the same parents. Later, when he/she attains a certain age, the lama gives a new name. In some cases if a child gets frequently sick, then the parent might rive the child a name of that person who is considered to be of low rank like blacksmith, potter. Suppose, if the parent give the blacksmith's summon name to the child they belief that the child may get rid of all the sickness. In return the child's parents offer that person some cash or goods. They believe that this is a way of tricking malevolent spirit to leaving the child alone. One can also witness similar kinds of practices among the other groups of Tibetans.

Clothing of baby

As per the belief, throughout pregnancy new clothes (namsa) are not prepared in advance. It is considered inauspicious or bad omen to buy or stitch clothes for the unborn baby. If it happens, the unborn child might die within the short span of time. After the birth of a baby new clothes are bought and stitched and it totally depends on the economic condition of the family either to use old clothes or new ones. Although sharing of baby clothes with one another is also done but it is considered inauspicious to dress a newborn baby in used clothes.

Ear- Piercing

After the baby becomes above three months old, the ear-piercing is done but there was no specific ritual followed. The elder person of the family pierces the ear (namjok) of the baby. At first, the needle (khap) tip is heated in the fire as they assume it would

prevent festering the pierced area. The thread is put on the eye of the needle which then pierces the ear. After that turmeric and mustard oil paste are applied to evade the fester for healing the pierced part soon. As per the saying goes, if one is not pierced the ear, after the death, she/he is forced to wear earthworm (bu-gyaltang) in the earlobe.

Hair- Cutting (Tachnet)

Hair cutting is an auspicious event of the child among the Sherpas .After the child attains a certain age like three to five years, parents consult the lama for suitable age, day and time for haircutting (tachnet). The lama checks his religious book (dhatu) and accordingly, the process of tachnet is observed.

On a particular day, the maternal uncle (aajang) is summoned, for cutting the hair. In case the uncle is absent the lama too can observe the same. The people believe that cutting of hair (ra) helps a child to get rid of diseases that he/she obtains at the mother's womb. By cutting that hair the child may live a healthy life. Womb hairs are also considered as unclean and thought to hinder natural growth of the baby.

Appearance of first tooth

If the first tooth (sa) of the baby appeared in eighth or twelfth months, it is considered inauspicious. As per belief, appearance of the first tooth in eighth and twelfth months is an ominous sign for mother's brother (aajang). To bypass that bad omen, aajang offers a copper plate (katir) and a bowl (thangar) to the child from the window (karung) which would reduce the harmful effects upon him.

Food

The increased physiological necessity of all nutrients during pregnancy is essential to i) support the growth and development of both maternal and fetal tissues and ii) builds normal maternal and fetal reserves of selected nutrients. So, nutrition is a critical variable both during and outcome of pregnancy (Eleanor. F. Eckstein, 1980). The Sherpa population under the study is not well-known with the nutritive value of different food items to be given to pregnant women. However, they have their own beliefs and practices in the context of the accepting of food items that define their preferences. It is observed that not so much importance is given in the diet of the expected mother during pregnancy. They believe that the growth process of a fetus is natural and not influenced by the intake of additional food.

The under study Sherpa women believe that during pregnancy if the women do their daily works (such as household chores, collecting fodder and woods from the forest, work in the agricultural field) then the expectant mother to be physically and mentally strong. It also helps in better growth and development of the fetus and would reduce the pang during delivery.

Case study 8: A grandmother (ma-gaga) of 82 years old from Gurdum village shared

her view that pregnant woman should be active and doing work would help in parturition of a healthy baby. If she takes more rest and does not work she might face problems during her delivery. She remembered her pregnancy days when she had to do the entire household and agricultural work just like her daily normal routine till the sixth or seventh months. Her in-laws never told her to take rest during pregnancy. Her mother and mother-in-law both used to say, 'As much as you work during pregnancy time you will have fewer problems in giving birth'. After having a baby, she took a rest for a few days and back to her normal routine. Throughout the pregnancy period, she took regular food as usual with less spice. After parturition, she was given several kinds of soup with meats (shya), butter (mar), and traditional liquor (chyang) to retain her lost energy.

According to her, present day women are very fortunate as they are not pressured to do much work in their pregnancy time. Family members are also very supportive in taking special care and allowing them to rest. However, she also believes that whatever her in-law had said previously is true. As these days very less workload is offered to expectant mothers lots of them have complications during delivery. Researchers found out that elderly women of the studied villages also shared a similar kind of experiences and opinions as Gaga.

During pregnancy, food intakes of women of the studied area do not witness any changes. Pregnant women take simple daily meals and also believe that no special care is required before the birth of a child as it is a natural process. Women are cautious in eating cold foods and the foods that are severely acidic, fermented, raw and very spicy. They consume all sorts of edible food items which are available to them in their surroundings. Too much raw or fibrous food is also not advised to consume as per the belief that the extra effort in digestion takes away the strength from the fetus. The pregnant mother should avoid or reduce the intake of spices like chill (marcha) and pepper (ermang) that generates creates heat.

Even though alcohol is not considered as a food taboo most women of the studied villages stop consuming alcohol throughout the pregnancy period. Alcohol or any fermented foods are considered toxic to a growing embryo because it can produce unhealthy bacteria, so usually, women do not consume fermented foods while pregnant. During pregnancy women craving for unusual food are considered natural. In the early phase of pregnancy, women often crave for sour and bitter food. These kinds of foods were considered helpful to pregnant women for decreasing headache and nausea because it has balancing, healing and cooling effects.

After the parturition of a baby, the mother is provided to eat something warm or hot to keep her warm as she uses all her energy in giving birth to the baby and become cold. During post-delivery period, the mother is provided with rich and ample nutrient foods like meats (shya), butter (maru), etc. so that she can retrieve her physical condition and produce lot of milk for nurturing the child. According to them, after parturition all the bones (ru) become flexible and teeth (sa) are loose. She is given only warm liquid and

soft foods like porridge, meat (shya) soups, and tsampa for a couple of days. The new mother is also provided traditional drink (chyang) at the post-delivery stage.

Varieties of grains like rice, millet, barley, buckwheat and whatever is available to prepare the chyang. Fenugreek is fried in hot butter and added in chyang to provide warmth to the mother for helping in lactation. They believe that when the mother drinks chyang her milk consumed by the baby which helps them both to take enough rest. It also helps in healing the uterus more quickly. The newborn baby consumes mother's milk (homa) for two or three years.

Lactating mother avoids certain foods which are regarded as cold such as curds, tubers, pumpkin, gourds, lemons, etc. The under study women opines, the attack of cold and cough may occur if one takes above food during such period. If the mother eats certain foods as stated above the baby would also suffer from diarrhoea, constipation, gas, vomiting, nasal cold, fever.

Conclusion

The birth process of a child is a significant socio-cultural event that differs in several ways around the world. Childbirth is observed, as an important part of the Sherpa society. For the birth of a child both supernatural forces and their parents are considered responsible. The participation of family members, relatives and neighbours provide evidence of community involvement in childrearing. The whole family getting involved in childbirth experiences shows close connection between family members and a child. The population under the study assumes childbirth is the only process by which a woman can be a member of her husband's family and achieve the status of womanhood. Birth of a child also allows the women to become close to herself and her family. Women's experience in birth depends on their individual views and social and economic conditions.

From the study, it came to know that most births occurred at home. The area under the study is situated in one of the remote parts of West Bengal where modern healthcare facilities are beyond the reach. The rituals and symbolic practices of the Sherpa community cannot be ignored. Some rituals and practices observed by the population are highlighted here to understand their perspective on looking upon the childbirth. During the entire duration of childbirth, the incantation is performed by the lama for safe delivery and protection of both mother and baby against malicious forces. The Tharchu (bamboo pole with white flag) hang at the main door for protecting the newborn from the evil forces and also indicate the birth of a baby in the family. They used the umbilical cord of the baby for treatment during sickness and in an amulet too for the protection against evil forces. At the time of purification, many different varieties of plants (names are already given) are burned to prevent the house and surrounding area clean and free from diseases. The mother is given a Chyang (traditional liquor) to consume after childbirth for lactation and healing of uterus quickly. After childbirth, the women avoid

some food items viewed as cold like curds, tubers, pumpkin, squashes, lemons, etc. for protecting a newborn from any sort of ailment.

Hence, their own ways of handling the circumstances helps them to cope up in such a difficult situation with the inadequate amenities available to them. The childbirth and its rituals not only celebrate and acknowledge the child, but also serve as an important way for families to solidify their connection to their community, heritage and culture. These rituals and practices are as a backbone of one's culture. Thus, one must nurture and preserve it for the upcoming generation which adds uniqueness to one's identity from the rest of the population.

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Bio Profile of the Authors :

1. Rajiv Gandhi National Senior Research Fellow, Department of Anthropology, University of North Bengal.

   e-mail: sherpachumu@gmail.com

2. Associate Professor, Department of Anthropology, University of North Bengal

   e-mail: pinaknbu@gmail.com, pinak_tarafdar@rediffmail.com