# **Original** Article

# **Cultural practices of breast care among** breastfeeding mothers in the Sumba tribe: A descriptive qualitative study

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# ABSTRACT

Introduction: The study aims to explore how the cultural practice of breast care among breastfeeding mothers in the Sumba tribe, specifically in Kiritana Village, might impact the promotion of exclusive breastfeeding in the Nusa Tenggara Timur (NTT) province, with a potential influence estimated at 62.17%.

Methods: This research employs a descriptive qualitative approach, utilizing a purposive sampling method. The participants consist of mothers who are within the first six months postpartum and engage in breast care practices. Following the framework proposed by Miles and Huberman, the data analysis process involves data reduction, data display, and drawing conclusions or verifying the data through researcher involvement in the interpretation process to elucidate the significance of the presented data.

Results: There are two themes emerged: (1) Culture-based breast care of the Sumba Tribe in Kiritana Village is still being carried out from generation to generation, and (2) Cultural-based breast care practices in the Sumba Tribe, Kiritana Village which is still carried out by breastfeeding mothers are massaged using breastmilk, massaged using coconut oil, herbs which derived from plants and consuming fried corn and fried peanuts.

Conclusions: Sumbanese people in Kiritana Village believe that cultural-based breast care can facilitate breast milk and can cure several diseases of the breast, such as sore nipples and swollen, stiff, and hard breasts. It is recommended that health service workers carry out a culture-based approach strategy to the problem of breastfeeding mothers in the Sumba Tribe. Further research on the effects of traditional treatments during postpartum, especially for breast care, is recommended.

Keywords: breast care; cultural practice; exclusive breastfeeding

# **INTRODUCTION**

Breastfeeding is a cultural behavior where culture is inseparable from the views held for generations in its associated culture. Indonesian society, which consists of various ethnic groups, religions, and races with different cultural backgrounds, greatly influences the behavior of people's lives, including behavior in health; where many cultural practices harm public health behavior, so they are more at risk for health problems (Nugraheni et al., 2018). In some cultures, there are dietary restrictions for pregnant women that have a negative impact on nutritional intake and breast milk supply. Recommendations or prohibitions on food during breastfeeding can reduce maternal nutritional intake, affecting maternal health and milk production. This is not following the guidelines that recommend consuming foods containing carbohydrates, vegetables that contain lots of vitamin A, fruits, and meat every day, and drinking lots of water. Besides, the babies under six months are fed by honey and bananas (Fajar et al., 2018).

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Breastfeeding from the first day of birth can prevent about 16% of newborn deaths, and babies who are breastfed in the first two hours can reduce the risk of death (Balitbangkes, 2018; Kemenkes, 2018). This breastfeeding support is very much needed, considering the low breastfeeding rate as per the 2018 Riskesdas report by the Indonesian Ministry of Health, the national rate of exclusive breastfeeding stood at 44.36%. However, in the province of Nusa Tenggara Timur (NTT), the rate of exclusive breastfeeding was notably higher, reaching 62.17% (Balitbangkes, 2018). Healthcare providers may face challenges in achieving exclusive breastfeeding due to mothers' perceptions of insufficient breast milk supply, even in the absence of medical barriers related to maternal or infant illness, as well as breast problems. Additionally, sociocultural factors, such as maternal and significant others' beliefs about infant nutrition, often serve as significant barriers to exclusive breastfeeding (De Roza, 2019). The low prevalence of breastfeeding is also influenced by several factors, such as maternal age, education level, employment status, birth order of babies, mother's knowledge, husband/family support, and support from health workers (Kemenkes, 2015).

Traditions and beliefs that are less supportive can hinder the success of breastfeeding. Local approaches to breastfeeding can generally be ignored and malpractice. Unless the technique practiced by the community is dangerous, it needs to be supervised by hospital staff. The practice of exclusive breastfeeding is largely influenced by the mother's motivation and the effectiveness of breastfeeding management during their stay in medical facilities. As such, the role of culture in public health is of paramount importance

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and cannot be overlooked. The perception of illness within ethnic communities is intricately linked to their patterns of health-seeking behavior, further emphasizing the significance of cultural considerations in healthcare interventions (Angkasawati et al., 2013).

Breastfeeding can present various challenges for mothers, including mastitis, breast abscess, engorgement of milk, sore nipples, inverted nipples, swollen breasts, blocked ducts, and nipple confusion. These issues can impact both the comfort of the mother and the effectiveness of breastfeeding, requiring appropriate management and support. Massage as an external therapy from medical treatment or without the intervention of medical personnel is a habit by the community in caring for postpartum mothers. Massage after childbirth can provide several advantages or benefits, such as accelerating the mother's healing during the postpartum period, relieving some fatigue points in the body, relaxing stiff muscles, improving blood circulation, relaxing joint movement, and pampering the body. Massage can increase relaxation, reduce stress, launch breast milk production in breastfeeding mothers, and accelerate hormonal balance after childbirth (Ambarwati et al., 2013).

This study focuses on the local concept of breast care, in contrast to health research in general. As an illustration, the cultural practices of the Sumbanese people diverge slightly from contemporary health norms, particularly concerning breastfeeding. Traditionally, the Sumbanese culture advises breastfeeding mothers to adhere to specific dietary restrictions and recommends consuming fried corn, fried beans, limes, and employing treatments for breast-related issues. These cultural beliefs and practices may influence the dietary choices and healthcare decisions made by breastfeeding mothers in the Sumbanese community. Traditional full-body massages with coconut oil and other ingredients formulated by traditional birth attendants (dukun bayi), which the community has long trusted, increase milk production in breastfeeding mothers. The primary function of traditional birth attendance is to treat breasts with massage and herbal techniques. Therefore, researchers are interested in conducting research titled "Breast Care Cultural Practices for Breastfeeding Mothers in the Sumba Tribe. The objective of this study is to provide a detailed description of the cultural practices related to breast care among breastfeeding mothers within the Sumba tribe, specifically focusing on Kiritana Village.

# **METHODS**

#### Design

This research adopts a descriptive qualitative approach and was carried out in Kiritana Village, located in the East Nusa Tenggara Province, during November 2021. Data collection methods involved conducting in-depth interviews with research participants who met the predefined inclusion criteria. These interviews took place within the homes of the research subjects.

## Sample and Setting

The population under study comprised all breastfeeding mothers residing in Kiratana Village, Kambera District, East Sumba Regency. The sample for this research was selected using a purposive sampling method. Nine participants were included in the study, chosen based on specific inclusion criteria established for this research: (1) Have done breast care during the postpartum period until six months after birth, (2) Domiciled in the research area, (3) Willing to be a participant.

## Instruments

The instruments used in this research are vital and assist instruments using a qualitative approach—researchers, who play an important role and key instruments involved in research. Researchers must obtain valid data so that not just any informants are interviewed. Assist instruments to support researcher key instruments in gathering information are semi-structured interview guides and field notes. After the interview, triangulation was carried out to maintain data validation. Existing triangulation includes source, method, analytical, and data triangulation.

Trigger questions for interview guides are: 1) What kind of breast care did the mother do during the exclusive breastfeeding period from the perspective of Sumba culture? 2) Is there a positive impact on the mother, child, and family with that breast care behavior?

## Procedure

The data was collected using a semi-structured interview with the researchers as the main instrument. The interviews were conducted in Kiritana Village, East Nusa Tenggara Province, in November 2021, at the participants' homes for their convenience. The interviews lasted about 60 minutes each, and they were recorded by smartphone and then transcribed into text. The researcher also made notes to help complete the data.

## **Data Analysis**

Following the framework outlined by Miles and Huberman, the data analysis process involves three primary steps: data reduction, data display, and drawing conclusions or verifying findings. In this approach, researchers actively interpret the data to elucidate its significance. The initial data collection involves interviews with informants. Following the interviews, the data is analyzed by creating transcripts or rewriting the interview results. This step serves as data reduction, capturing and condensing essential information relevant to the research context. The subsequent stage involves systematically presenting the data by organizing pertinent information and drawing from various sources. Finally, a conclusion is drawn based on the tested validity of the data.

## **Ethical Considerations**

The researcher had approval from the Head of Kiritana Village. East Sumba with number 433/SKP/DK/IX/2021. Participants are provided with information about the study and are informed of their right to withdraw at any time, ensuring their voluntary participation and ethical treatment throughout the research process. The participants submitted written consent before the interview. The researcher also paid attention to the other research ethics, including anonymity, confidentiality, and fidelity.

# RESULTS

This research included the following participant characteristics in Table 1: 1) age, 2) education level, 3) occupation, and 4) age of the baby. Table 2 revealed that participants indicated that culture currently did not have a direct impact on breastfeeding. However, some participants expressed uncertainty regarding the cultural influence on

| Characteristics    |                            | Participants | n | %     |
|--------------------|----------------------------|--------------|---|-------|
| Age                |                            |              |   |       |
| 24                 | P2                         |              | 1 | 11.11 |
| 25                 | Р9                         |              | 1 | 11.11 |
| 26                 | P4, P6                     |              | 2 | 22.22 |
| 27                 | P1, P3, P7                 |              | 3 | 33.34 |
| 29                 | P8                         |              | 1 | 11.11 |
| 30                 | Р9                         |              | 1 | 11,11 |
| Education          |                            |              |   |       |
| Primary school     | P5                         |              | 1 | 11.11 |
| Junior high school | P4                         |              | 1 | 11.11 |
| Senior high school | P1, P2, P3, P6, P7, P8, P9 |              | 7 | 77.78 |
| Occupation         |                            |              |   |       |
| Housewife          | P2, P3, P5, P6, P7         |              | 5 | 55.56 |
| Employee           | P1, P4, P9                 |              | 3 | 33.33 |
| Self-employed      | P8                         |              | 1 | 11.11 |
| Baby's age         |                            |              |   |       |
| $\leq$ 6 months    | P1, P3, P4, P7, P8         |              | 5 | 55.56 |
| 6-12 months        | P2, P5, P6                 |              | 3 | 33.33 |
| >12-24 months      | P7                         |              | 1 | 11.11 |

**Table 1.** Characteristics of Respondents (n = 9)

Table 2. The Influence of Breast Care on Breastfeeding Duration from the Cultural Perspective of the Sumba Tribe

| Participant | Statements   | Subtheme   | Theme  |
|-------------|--|--|--|
| P1          | "Yes, if there is a cultural impact because I<br>implement that. My attitude is the same as that<br>of culture; while it is beneficial for me and my<br>baby, I will follow it. The current culture does<br>not have much influence and has become a<br>health problem". | Follow cultural breast care<br>if good for the mother and<br>baby. | Culture-based breast care of<br>the Sumba Tribe in Kiritana<br>Village is still being carried<br>out from generation to<br>generation. |
| P2          | "If the culture is good for me and my children,<br>I will implement it."   | Following cultural breast care is good for the mother and baby.    |  |
| Р3          | "I don't know if there is a cultural impact on<br>health, I don't knowUm, the culture here<br>doesn't directly impact breastfeeding, I think."   | There is no impact on breastfeeding directly.                      |  |
| P4          | "In my opinion, the current culture does not affect breastfeeding. "   |  |  |
| Р5          | "The impact of culture on breastfeeding may-<br>be doesn't impact directly, but the culture here<br>is good for health too."   |  |  |
| P6          | "If there is no cultural impact on breastfeeding today, it's okay.   |  |  |
| Р7          | "Culture here has no impact on breastfeeding<br>directly, depending on the individual who<br>wants to join the culture or not."  |  |  |
| Р8          | "For the impact of culture, there is no effect on<br>breastfeeding directly, but the culture here is<br>beneficial for our health."  |  |  |
| Р9          | "There is a culture that is impact or not, I<br>don't know; I just follow the existing culture<br>because it's our habit here.'  | Just follow the existing culture.                                  |  |

| Table 3. Breast | Care Practices During the B | reastfeeding Period from the Cultural Pe | erspective of the Sumba Tribe |
|-----------------|-----------------------------|--|-------------------------------|
|                 |                             |  |                               |

| articipant | Statements   | Subtheme   | Theme  |
|------------|--|--|--|
| Ρ1         | "Umm usually it's a week after<br>birth when the nipples sore, the<br>pain is terrible, I'm usually afraid to<br>breastfeed, that's why my mother-in-<br>law said when breastmilk smeared<br>repeatedly can be solved breast prob-<br>lem, so I tried it without having to<br>go to the doctor again Usually, my<br>mother-in-law rubs it it is applied<br>repeatedly and massaged like that."   | Breast massage using breast-<br>milk to reduce nipple sore   | Cultural-based breast care prac-<br>tices in the Sumba Tribe, Kiritana<br>Village, which are still carried out by<br>breastfeeding mothers, are massaged<br>using breastmilk, massaged using<br>coconut oil, herbs derived from plants<br>and consuming fried corn and fried<br>peanuts. |
| P2         | "Yes, usually after giving birth, it<br>feels like big stiff breasts, right?<br>When my mom massages them, we<br>use herbal medicines that we usually<br>use in the village, such as betel,<br>areca nut, and lime, which is chewed<br>once, and the pulp is attached to the<br>edge of the nipple so that the stiff<br>breasts become weak."  | Breast massage using betel,<br>areca nut, and lime chew<br>paste reduces stiff breasts.                      |  |
| Р3         | "Yesterday, after giving birth, my<br>mother was told to eat fried corn<br>or peanuts to increase milk supply,<br>compress with warm water, some-<br>times massage so the breastmilk<br>flows smoothly and relax the hard<br>breasts than the milk flows smooth-<br>ly".   | Massage and eat fried corn<br>and peanuts to increase<br>breast milk intake.                                 |  |
| P4         | "The treatment usually massage using coconut oil too."   | Massage with coconut oil.  |  |
| Ρ5         | "For breast care, people here usually<br>massage at traditional birth atten-<br>dance. Sometimes also use the med-<br>icine if the breasts are hard or sore;<br>the medicine is winger (turmeric)<br>which is crushed or grated then put<br>on a spoon and mixed with a little<br>cooking oil and then heated over<br>the fire until boiled and wait to cool<br>a little and then paste it on the sore<br>and hard breast so that the hard and<br>painful pain goes away." | Massage by traditional birth<br>attendants and use turmeric<br>oil paste to reduce stiff and<br>breast pain. |  |
| P6         | "Yes, I often go to the traditional<br>birth attendants. If the milk gets<br>stuck or doesn't come out, I massage<br>it to her so that the milk comes out."  | Massage by traditional birth attendants to increase breast-<br>milk flow.                                    |  |
| P7         | "If my breast milk isn't coming out,<br>I massage myself using oil to make<br>it slippery. Sometimes, I massage<br>with the help of traditional birth<br>attendance."  | Massage by traditional birth attendants to increase breast-<br>milk flow.                                    |  |
| P8         | For breast care, massage is the best."   | Massage for breast care.   |  |
| Р9         | "Usually we, the mothers here, if<br>there is a problem with the breast,<br>such as breastmilk is not smooth<br>delivery, at the earliest we have to<br>go to traditional birth attendance for<br>massage or ask for traditional medi-<br>cine so that the milk runs smoothly.   | Massage by traditional birth attendants to increase breast-<br>milk flow.                                    |  |

breastfeeding. Despite this, participants reported adhering to cultural breast care practices, even though they may not directly affect breastfeeding.

Table 3 indicated that all participants engaged in various methods of breast care, either independently or with the assistance of others, such as their mother, mother-in-law, or traditional birth attendants. These methods included massage, compression with warm water, application of crushed turmeric, and the use of herbal remedies such as lime, betel, or areca nut, which are chewed and applied to the nipple. Additionally, participants reported consuming fried corn, fried peanuts, and herbal medicines to facilitate smooth delivery of breast milk during breast care. Participants expressed a belief in the efficacy of cultural breast care practices for treating various breast conditions, such as sore nipples and swollen or stiff breasts, as well as for facilitating breastfeeding.

## DISCUSSION

The results showed that culture (habits, customs, beliefs, knowledge, and attitudes) significantly affected care during breastfeeding. Even though only two participants that only two participants experienced a positive impact, participants still carried out a breast care-based culture. This result of interviews with participants with good habits, customs, beliefs, knowledge, and attitudes generally perform good breast care. The habit of participants is that if they feel pain in the breast, they go to traditional birth attendants or people who have experience in the breastfeeding period (Sosseh, 2023).

According to Notoatmodjo (2011), an attitude alone does not necessarily translate into action. It requires a supporting factor or an enabling condition to facilitate the transformation of an attitude into action. The findings of this study indicate that belief in cultural and traditional postpartum care persists among postpartum mothers, even though not all of them adhere strictly to these traditions. Postpartum mothers from the Sumba Tribe, Kiritana Village, usually carry out several traditions and cultures. Postpartum care involves practices such as massages using traditional herbs or medicines and consuming breastfeeding-supportive foods like fried corn and peanuts. These treatments are believed to offer health benefits for postpartum mothers within a culture that emphasizes healthy living behaviors (Mediastari, 2020).

People still believe that there are mixed herbs that massage the whole body. This practice is driven by the values, customs, beliefs, and attitudes prevalent within the community, all of which constitute cultural factors influencing the care of postpartum mothers (Rahayu et al., 2017). The Sumbanese people, especially in Kiritana Village, have a cultural habit of caring for postpartum mothers. This tradition has been perpetuated over time and has been passed down from generation to generation, continuing to be observed to the present day; there are several traditions of caring for postpartum mothers when viewed from a health perspective, such as massage, which are also beneficial (Siregar, 2021). The whole body includes breasts and other ingredients that make the body healthier and promote breast milk, but this still needs further research (Tumansery, 2018).

The results of research conducted in the Sumba Tribe, Kiritana Village, found that all participants said that cultural behavior positively impacted mothers, children, and families. Participants considered culture as something that could be done if it benefits them, but on the contrary, culture was not implemented if it did not provide any benefit. This means that the mother is still living the culture in the area. All health impacts on mothers and babies are related to the traditions of society (Aygor, 2021).

The strength of the community in maintaining this tradition is in line with Notoatmodjo's opinion that a person accepts the trust of parents and grandparents based on belief and without any prior proof (Notoatmodjo, 2011). Cultural practices and strong belief in tradition are common among ethnic groups, including Indonesia. Out of the 1,331 ethnic groups in Indonesia, approximately 370 of them continue to uphold and practice their cultural traditions (Prasodjo et al., 2015). Thus, health culture is an attitude or science that focuses on the biological and socio-cultural elements of human behavior, especially on how to interact between the two throughout human life regarding human health and disease. Culture ensures the progress and decline of the health.

During the postpartum period in the Sumba Tribe of Kirtana Village, culture-based breast care practiced by mothers is categorized into three main components: massage, utilization of herbs, and dietary choices.

#### Massage

Massage is one of the self-care methods carried out by breastfeeding mothers from the Sumba Tribe in Kiritana Village. Massage can be done alone or assisted by traditional birth assistants and mothers. The ingredients commonly used for massage are coconut oil and other traditional medicine. Massage therapy (massage) is very popular in Indonesia, not only for postpartum mothers treating sick babies with fractures but also using massage therapy. One of the goals of doing massage is to launch breast milk.

Massage using coconut oil and other traditional medicine is included as external therapy from medical treatment or without the intervention of medical personnel, which is a habit that is trusted by the community in caring for postpartum mothers because massage after childbirth can provide several advantages and disadvantages. Massage during the breastfeeding period can aid in the mother's recovery by alleviating fatigue, relieving muscle tension, enhancing blood circulation, promoting joint mobility, rejuvenating the body, inducing relaxation, reducing stress, stimulating breast milk production, and expediting hormonal balance after childbirth. This traditional practice of body massage serves to accelerate postpartum recovery (Ibrahim & Asiah, 2018).

Based on this study, traditional massage by a traditional birth assistant or mother for postpartum mothers is different from the oxytocin massage technique recommended in health sciences in general. Massage by traditional birth attendance is distributed with traditional medicine on the back with a technique passed down from generation to generation until now. It is different from oxytocin massage, which focuses on massage along the spine. The traditional birth attendants have a major post-delivery role, such as massaging the mother, helping to bathe the baby, massaging the baby, and so on; one of the main roles of the traditional birth attendant is to assist breast care with massage techniques as well as using potions (Barni & Sulistyorini, 2019).

## Using traditional herbs

The data analysis revealed that one form of breast care practiced during the postpartum period in the Sumba Tribe of Kiritana Village involves the use of herbal ingredients. These ingredients include turmeric, betel, areca nut, lime, and various other plants. Another traditional treatment mothers do during the postpartum period in Kiritana Village is using winger (turmeric) and lime, betel, and areca nut, commonly called Pahapa by the people in Kiritana Village. The way to do this treatment is that lime, betel nut, and areca nut chewed simultaneously until completely crushed and red. The pulp from the chewing to the edges of the nipples that are hard and sore, according to the results of interviews with participants, can help restore large and firm breasts.

The tradition of treating using a mixture of whiting and lime is also found in the southern part of Malaysia, known as "barut perut". According to birth assistance attendance, lime, and turmeric are commonly used for stomach ulcers. The purpose of a belly button is to return a woman's stomach to its original shape to deflate it (Bidin, 2012). Meanwhile, how to restore stiff and sore breasts, can use bulbous plants such as winger in the Sumbanese language for turmeric. This winger or turmeric can be crushed using a grater or pounded later. Pour it over a frying pan mixed with enough cooking oil and heat over a fire until it boils; remove it and leave it for a while after boiling. The hot temperature of the processed turmeric becomes warm, and there are no burns to the breasts with heated turmeric. According to the participants, the treatment aims to heal hard and sore breasts. The dangerous thing about treatment using heated winger (turmeric) is the risk of possible burns because there is no definite determination of how long the potion is heated and how long the potion is placed on the breast. Burns are the response of the skin and subcutaneous tissue to thermal trauma. Burns with partial thickness are burns that do not damage the skin epithelium or only partially damage the skin epithelium (Tumansery, 2018).

According to Government Regulation No. 103 of 2014 of the Republic of Indonesia concerning traditional health services, traditional medicine refers to ingredients or substances derived from animals, minerals, herbal preparations, or combinations thereof. These materials have been used for generations as treatments and are applied in accordance with local community norms. Knowledge about illness and disease within society is shaped by a combination of traditional values and the impact of advancements in modern medical science. Traditional values contribute to cultural understandings of health and illness, while modern medical science introduces new perspectives and treatments that may alter societal perceptions and practices regarding health and disease (Sembiring, 2015), likewise, with the treatment of illness and disease. Indonesian people commonly use traditional medicines to maintain health and treat diseases. Meanwhile, previous research shows that 55.7% of households use traditional health services by utilizing readymade traditional ingredients by processing as much as 48% and 31.8% using traditional ingredients made by themselves (Tumansery, 2018). Indeed, the care of postpartum mothers is deeply influenced by the values, customs, beliefs, and attitudes prevalent within the community. These cultural factors play a significant role in shaping the practices and approaches adopted to support and care for postpartum mothers (Rahayu et al., 2017).

#### Food Consumed

Participants in this study said that fried corn and fried peanuts are other traditional treatments for mothers during the postpartum period to promote breast milk. Corn and peanuts fry at the same time. They can be fried separately as desired, and, after frying, can be directly consumed, according to participants who said that the purpose of consuming fried corn and peanuts was to promote breast milk in postpartum mothers or breastfeeding mothers.

Changing people's behavior and views on health problems is not easy. Things that look dangerous in the view of modern health are not necessarily things that are dangerous for society. The theory of transcultural nursing, according to Leininger and McFarlane, is a universal cultural nursing theory, the result of a merger between anthropology and nursing that focuses on analysis and comparative studies between differences in culture and subculture with respect for caring behavior, nursing care, health-ill value, trust, and local community behavior patterns. The actions of participants in breast care, such as massages, using traditional herbs, and food consumed based on the culture of the Sumba Tribe, need to be adapted following government recommendations as stated in the 2020 Maternal and Child Health Book. Therefore, a good understanding of transcultural nursing care is certainly needed by community nurses. Further research on the negative and positive effects of traditional treatments during postpartum is recommended.

# CONCLUSION

The results of the research on the cultural practice of breast care for breastfeeding mothers in the Sumba tribe, Kiritana Village, concluded that types of breast care based on the culture carried out by breastfeeding mothers are massage, using traditional herbs, and consuming fried corn and peanuts. Breast care based on the culture of the Sumba tribe in Kiritana Village is still carried out from generation to generation because it is believed to be able to cure several diseases of the breast, such as sore nipples, swollen, stiff, hard breasts, and facilitate breastfeeding even though it does not have a direct and immediate impact. Further research on the effects of traditional treatments during postpartum is recommended.

## **Declaration of Interest**

This study is integrated into the research roadmap of the Department of Maternal Health, Faculty of Health, Tribhuwana Tunggadewi University. Data collection was conducted impartially, with explanations provided to participants on behalf of the researcher, who maintained a neutral stance to prevent conflicts of interest.

#### Funding

None.

#### Data Availability

The datasets generated during and/or analyzed during the current study are available from the corresponding author on reasonable request.

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