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Mother's Decision for Postpartum Care at Home in Kupang Regency, East Nusa Tenggara Province: Cultural Analysis that Influences the Choice of Postpartum Care at Home

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ABSTRACT

Postpartum care at home is still common in some, including in Kupang Regency, East Nusa Tenggara (NTT) Province. many mothers in Kupang, postpartum care at home is not only practical but also part of a tradition that has been passed down from generation to generation. However, this choice can increase health risks without adequate medical support. Therefore, it is important to understand how local culture influences this decision so that solutions to improve maternal and infant health can be found.

This study examines the influence of local culture and traditions on mothers' decisions to choose postpartum care at home. Using a qualitative approach and ethnographic design, this study describes postpartum care practices in Kupang Regency. In-depth interviews were conducted with mothers undergoing postpartum care, traditional birth attendants, and health workers. Data were collected from August to October 2023 and analyzed using six steps of qualitative methods.

The study's results identified three local cultural themes that influence postpartum care at home: 1) Postpartum taboos, as well as postpartum care traditions; 2) Family support; and 3) Belief in traditional birth attendants. This practice hinders mothers from utilizing available health facilities. This study recommends cultural integration in health education programs, increased collaboration between medical personnel and traditional birth attendants, and policies that support culturally friendly health access.

I. INTRODUCTION

Pregnancy, childbirth and the postpartum period are biological phenomena that are influenced by a person's socio-cultural beliefs and constructions. In particular, the postnatal period is shaped by these influences, particularly for maternal postnatal confinement practices. In the culture of the NTT community, "warm" care by means of "fire grills and tatobi" is a practice that lasts for 40 days after giving birth, which has become a hereditary habit in several areas in NTT (Seran et al., 2022; Mantula et al., 2023). The postnatal period is very important for the mother's health status after giving birth. Postpartum care is a crucial phase in a mother's reproductive cycle after giving birth. This phase covers the period from birth to full recovery of the mother's health, which usually lasts for the first six weeks. In this period, the quality of care greatly influences the health of mothers and newborns (Xin et al., 2024). However, in several regions in Indonesia, including Kupang Regency, East Nusa Tenggara, there are variations in post-natal care practices which are influenced by cultural, economic and social factors.

Mothers' choice to carry out postpartum care at home is often influenced by local traditions and cultural norms passed down from generation to generation, especially in rural areas. Local culture has an important role in determining how mothers experience the post-natal recovery period. Some traditional practices, such as limiting types of food and activities, are still commonly practiced and are considered important in the healing process. However, these practices sometimes do not align with modern medical recommendations and potentially increase the risk of health complications for both mother and baby (Xin et al., 2024).

This research will examine mothers' decisions in choosing post-natal care at home in Kupang Regency, as well as exploring the cultural factors that influence this choice. By understanding more deeply how culture influences these decisions, research is expected to provide greater insight into the role of culture in maternal health after giving birth in the East Nusa Tenggara region (Seran et al., n.d., 2023; White et al., 2023)

Previous research suggests that cultural habits strongly influence maternal health behavior during the postpartum period, especially in areas with limited access to formal health services. Belief in traditional practices strongly influences health care decisions in rural areas of Indonesia. Additionally, health education adapted to local culture can increase maternal acceptance of formal health services during the post-natal period (Beňová et al., 2023).

Therefore, this study aims to further explore how cultural norms in Kupang Regency influence mothers' decisions in choosing post-natal care at home and how this approach can be integrated with modern, safer health care.

II. METHODS

This type of research is descriptive with a survey method. Sampling was carried out randomly *Cross Sectional* (Suhron, 2024) And this study adopted an ethnographic approach and was carried out in the work area of the Tarus Health Center, Kupang Regency, NTT. The research lasted for 3 months (August-October 2023). In this research, the selection of informants was carried out purposively to dig up information related to the main topic, namely 10 postpartum mothers 0-3 months, 2 midwives, and 2 birth attendants. Data collection took place over the same period. The researchers were directly involved in the life of the communities studied through observations and in-depth interviews lasting between 45 and 90 minutes. Researcher and informant interviews were recorded, and verbally active informants were interviewed twice. Interview questions are

designed to deepen the phenomenon under study using descriptive, structural and confrontational questions. Data analysis was carried out through thematic analysis which aims to compile, systematize and describe the findings. The analysis process includes: 1) An overview is obtained through reading interview transcripts and observations; 2) Determine initial themes with initial data analysis; 3) Highlighting meaningful text segments for the coding process; 4) Discuss and revise themes to identify connections; 5) determine the relationship between codes and themes to gain a deeper understanding of the relationship between themes and sub-themes, which is carried out until the data saturation point is reached (Creswell & Creswell, 2018).

The protocol in this study was approved by the STIKES Ngudia Husada Husada Madura Health Research Committee with letter number: 1889/KEPK/STIKES-NHM/EC/VIII/2023 dated 01 August 2023. Research informants signed a consent form before participating and were assured that informants could withdraw themselves, if they wish.

III. RESULT

1. Food and drink restrictions (cold) and Postpartum Care Traditions

During the postpartum period, mothers are prohibited from consuming cold food and drinks. This habit has become a local postpartum care practice for people in rural areas of Kupaten, Kupang. The practice of eating and drinking hot is in line with other local practices, namely that postpartum mothers always keep their bodies and the baby's bodies warm by using hot water tattoos and grilling over fire. The local community believes that if the mother's body is hot, dirty blood (Lokia) will come out of the uterine cavity and/or the birth canal more smoothly. If all the lochia have come out of the uterine cavity then the clean uterus will not cause crazy pain or severe pain that causes the mother to die during childbirth. The following are excerpts from interviews from postpartum mothers and birth attendants:

"... after giving birth, dirty blood in the womb should come out so as not to get sick ...

"Mothers can suffer from giddiness because dirty blood rises to the head (Mrs. S, 23 years old)"

"... eating and drinking hot things... the blood vessels will become wide until the blood it comes out dirty, there is nothing frozen in the womb (Mother A, birth healer)"

This practice of eating and drinking hot food is also still carried out by postpartum mothers who have received care and treatment because the mother gave birth in a health service facility such as a health center or hospital and or was assisted by a midwife, after returning to her home. Postpartum mothers during the fire roasting period (40 days), eating and drinking must also be hot food and drinks. Roasting/burning a fire (Figure 1) is a community tradition in Kupang Regency, namely that a fire is always placed next to the bed or while sleeping and/or burning embers are placed under the bed of the postpartum mother and her baby to keep the body warm of the mother and baby immediately after giving birth for up to 40 days. postpartum period. Meanwhile, tatobi (figure 2) is a ritual for postpartum mothers, namely that the postpartum mother always bathes in boiling hot water, sometimes mixed with traditional herbs during the postpartum period, as well as bathing the baby in warm water.

"Even though (they) give birth in a community health center or hospital, they still give birth

I have to eat and drink hot water, even boiling water. (midwife y)"

"... Eat and drink as long as they are still roasting on fire or tatobi... yes 3 months or 40 days (Midwife A)"



Figure 1. Mother and baby roasting on fire (fire roasting tradition)

Apart from eating and drinking hot foods helping to expel lochia smoothly, not causing disease (insanity) or death in postpartum mothers, hot food and drinks consumed by postpartum mothers are believed to facilitate the release of breast milk, because the blood vessels around the breasts widen. The following is the statement of the shaman and postpartum mother.

"... this heat widens the blood vessels ... so that the milk also runs smoothly.
(Shaman
B.A, 32 Years)"

"... There's a lot of milk... so ketong (we) have to eat and drink hot (Mrs P, 35 years old)"

2. Family support

The family culture of the people of Kupang Regency is still very strong. This can be seen from the loyalty of family members accompanying or accompanying the mother during the birthing process. They will not leave the birthing mother's house as long as the mother has not given birth to her child or has not gone to give birth at a health facility.

"... the new mother feels stomach pain even though she doesn't yet know how strong it is... all the family and neighbors will be full at the birthing mother's house until the child is born. (Midwife A)

"... Never mind at home... those who accompany the mother to the hospital... her mother, mother-in-law (in-laws), sisters, father, and many will follow her there (puskesmas or hospital) (Midwife Y)

During the postpartum period, the mother and baby will be assisted by their mother, mother-in-law, older sister, or other family in caring for them during the postpartum period.

"... if the tatobi (hot water bath) is assisted by a shaman or beta pung nona (female) sister (Mrs. F, 30 years old)

"... the beginning of the tatobi was done by the shaman's mother, after that the mother and/or aunt (siblings of the father's parents) (Mrs. K, 29 years old)

Meanwhile, household work is taken over by family members during the postpartum period

"... work in the house, mom helps, sometimes Miss's aunt and older sister (Mrs AD, 30 years)

"... the husband too: he fetches water, takes dry wood, or cooks water for tatobi... (Mother SH, 34 years old)

3. Belief in birth healers

Postpartum mothers and their families, as well as local communities in Kupang Regency, have a tradition or belief that requires the selection and decision on the care of the postpartum child and their baby to be carried out by a dukun beranak.

"...I was born with the help of my great grandmother's mother.....not helped by a midwife (Mrs. AH, 33 years old)

"... beta pung mama, beta with beta pung first child helped mama shaman (Mother NS, 31 years old)

The local community recognizes and believes in the traditional ingredients held by dukun beranak which can facilitate the birthing process and the recovery/health of postpartum mothers and babies.

"Mama tua (birth healer) has a good concoction to facilitate labor and if it is sprayed on the stomach and waist, it won't hurt too much (Mother BA, 36 years old)

"We trust midwives and hospital medicine, but we also trust mother's medicine
Shaman (IH Mother, 39 Years)

Local people stated that their approach was more personal and close, because birth attendants came from their own family members and/or the local community was still fanatical about birth attendants.

"... all the children from this family, I'm the one who helps... and they call me big grandma. (Child birth healer A)

IV. DISCUSSION

1. Food and drink restrictions (cold) and Postpartum Care Traditions

Recent research reveals that rural communities in Kupang Regency still strongly believe in the taboo on consuming cold food and drinks for postpartum mothers. This belief is closely related to local care traditions passed down from generation to generation (Seran et al., 2022b; S, 2022). During the postpartum period, mothers are advised to consume hot food and drinks which are believed to facilitate the discharge of dirty blood (lochia) from the uterus. This is considered very important in maintaining maternal health after giving birth (Hodgins et al., 2023). This practice of keeping the body warm is clearly visible in local traditions such as tatobi and fire roasting, where the postpartum mother and her baby are kept warm with a fire or hot bath for around 40 days after giving birth (Alemayehu et al., 2020).

This public belief is based on the assumption that the mother's body heat will enlarge the blood vessels, so that the lochia can come out more smoothly. This is also considered a way to prevent dirty blood from rising to the head, which is believed to cause mental disorders or even death (Atukunda et al., 2020). In interviews with postpartum women and birth attendants, it was clear that there was concern about the risk of serious illness if dirty blood was not removed properly (Xin et al., 2024).

Even though many mothers give birth in modern health facilities such as community health centers or hospitals, after returning home, this traditional practice is still carried out. This reflects the strong influence of local traditions, even though the mother had received modern medical care (Atukunda et al., 2020).

Apart from that, hot food and drinks are also believed to increase breast milk production, because heat is thought to help enlarge the blood vessels around the breasts. This strengthens the belief that consumption of hot food and drinks is very necessary during the postpartum period (Singh et al., 2021; Almeida & Fernandes, 2021).

In conclusion, this study highlights the importance of understanding local culture in the care of postpartum women. Traditional practices such as keeping the body warm with fire and consuming hot foods are still considered essential for the mother's health after giving birth. This is a challenge in itself in integrating modern medical practices with strong traditional beliefs in society (Garcia et al., 2020; Hernandez & Oliveira, 2022).

2. Family support

In the context of Kupang Regency society, close family values are not just part of tradition, but are also a deep social practice, especially during critical times such as birth. In this setting, the role of family and neighbors goes beyond simply being witnesses to the birth process; they become pillars of emotional and physical support for mothers. The presence of family members filling the house when a mother is preparing to give birth is a manifestation of strong community solidarity and their vital role in creating a supportive and loving environment (Beňová et al., 2023).

Existing research suggests that social support is strong during

Childbirth greatly affects the mental and physical health of the mother. A study confirms that solid social support can reduce the risk of postnatal depression and increase the mother's level of satisfaction with her birth experience. Warm and encouraging interactions from family members during this challenging time provide much-needed comfort and security (Abuk et al., 2024). Furthermore, family support continues after birth throughout the postpartum period. In this stage, the family provides assistance to the mother in a variety of ways, including traditional care such as the hot water bathing ritual tattoo which is believed to facilitate physical recovery to caring for the baby and handling domestic tasks. Prenatal and postnatal support from close relatives, such as the mother and mother-in-law, has a positive impact on the recovery and well-being of the mother and baby (Le Roux et al., 2020).

The husband's role in supporting postpartum is very crucial. Their involvement in household tasks and baby care reflects a shift towards gender equality in the distribution of domestic responsibilities, providing physical and emotional support. The father's active participation in caring for the baby not only relieves the mother's burden but also strengthens family ties and benefits all family members (Cho et al., 2022).

Overall, family support during labor and postpartum in Kupang Regency shows how important close social and cultural networks are in helping mothers face one of the most challenging periods in their lives. This phenomenon indicates that in this culture, the process of birth and recovery is not only the responsibility of the mother, but the entire community actively participates in support, confirming that family support is an important key in providing positive health outcomes for mother and baby (White et al., 2023). This is a manifestation of the rich cultural practices and deep understanding of health and wellbeing that the people of Kupang Regency hold in high regard.

3. Belief in birth healers

The people of Kupang Regency still strongly trust traditional birth attendants as an integral part of reproductive health care, especially during childbirth and the postpartum period. Trust in midwives and the use of traditional potions among the community is not only seen from a medical perspective, but also illustrates the importance of cultural and social aspects that are strongly attached (White et al., 2023).

Midwives in Kupang Regency are usually individuals who are highly trusted by the community because they have knowledge that has been passed down from generation to generation. Their expertise in handling childbirth makes people feel more comfortable, because they are seen as providing a more personal and caring approach. Many mothers who have experienced childbirth with the assistance of a

dukun, as postpartum mothers and birth attendants have stated that they feel safer and more natural when accompanied by a dukun than with modern health workers. Emotional factors and personal beliefs greatly influence their decision to continue using the services of a midwife.

It is also known that giving birth uses various traditional herbs which are thought to help speed up the birthing process and reduce pain. This herb is believed by the public to have proven properties from generation to generation. Mrs. BA, one of the respondents, said that the concoction given by the midwife really helped smooth her delivery. Even though people are familiar with modern health services, as stated by Mrs. IH, many still choose to use traditional ingredients because they consider them to be part of their cultural heritage that cannot be replaced.

One of the main strengths of dukun beranak is the close emotional connection with the community. TBAs are often part of the family or immediate environment, so the personal and emotional ties that exist are very strong. This creates a warm and trusting care atmosphere. As explained by the midwife, the support provided is not only physical but also emotional, which according to her is an important factor in the success of childbirth. In the context of public health, it is important to integrate modern medical approaches with traditional practices. Sudhinaraset et al. (2019) revealed that respecting cultural beliefs and providing education about safe health practices can significantly improve maternal and infant health outcomes.

V. CONCLUSION

Based on the results and discussion, it can be concluded that TBAs are often part of the family or immediate environment, so the personal and emotional ties that exist are very strong. This creates a warm and trusting care atmosphere. As explained by the midwife, the support provided is not only physical but also emotional, which according to her is an important factor in the success of childbirth.

REFERENCES

1. Abuk, A., Meriaty, M., Luh, Diah, & Anggraeningsih. (2024). Traditions of the Forty Days of the Postpartum Period: Postpartum Cultural Practices on Timor Island, East Nusa Tenggara. *Optimal Midwife Journal*, 1(1), 45–58.
2. Alemayehu, M., Gebrehiwot, T. G., Medhanyie, A. A., Desta, A., Alemu, T., Abrha, A., & Godefy, H. (2020). Utilization and factors associated with antenatal, delivery and postnatal Care Services in Tigray Region, Ethiopia: A community-based cross-sectional study. *BMC Pregnancy and Childbirth*, 20(1), 1–13. <https://doi.org/10.1186/s12884-020-03031-6>
3. Atukunda, E. C., Mugenyi, G. R., Obua, C., Musiimenta, A., Agaba, E., Najjuma, J. N., Ware, N. C., & Matthews, L. T. (2020). Women's Choice to Deliver at Home: Understanding the Psychosocial and Cultural Factors Influencing Birthing Choices for Unskilled Home Delivery among Women in Southwestern Uganda. *Journal of Pregnancy*, 2020. <https://doi.org/10.1155/2020/6596394>
4. Beňová, L., Semaan, A., Portela, A., Bonet, M., van den Akker, T., Pembe, A. B., Moran, A., & Duclos, D. (2023). Facilitators and barriers of implementation of routine postnatal care guidelines for women: A systematic scoping review using critical interpretive synthesis. *Journal of Global Health*, 13, 1–17. <https://doi.org/10.7189/jogh.13.04176>
5. Cho, H., Lee, K., Choi, E., Cho, H. N., Park, B., Suh, M., Rhee, Y., & Choi, K. S. (2022). Association between social support and postpartum depression. *Scientific Reports*, 12(1), 1–9. <https://doi.org/10.1038/s41598-022-07248-7>
6. Hodgins, S., Mcpherson, R., & Kerber, K. (n.d.). Hodgins S, McPherson R, Kerber K. Postnatal care with a focus on home visitation: A design decision-aid for policymakers and program managers. *J Global Health*. 2018;8(1).
7. Le Roux, K. W., Almirol, E., Rezvan, P. H., Le Roux, I. M., Mbewu, N., Dippenaar, E., Stansert- Katzen, L., Baker, V., Tomlinson, M., & Rotheram-Borus, M. J. (2020). Community health workers impact on maternal and child health outcomes in rural South Africa - a non- randomized two-group comparison study. *BMC Public Health*, 20(1), 1–14. <https://doi.org/10.1186/s12889-020-09468-w>
8. Mantula, F., Chamisa, J. A., Nunu, W. N., & Nyanhongo, P. S. (2023). Women's Perspectives on Cultural Sensitivity of Midwives During Intrapartum Care at a Maternity Ward in a National Referral Hospital in Zimbabwe. *SAGE Open Nursing*, 9, 23779608231160476.
9. S, V. N. (2022). *Journal of Nursing*. 14(September), 891–902.
10. Seran, A. A., Artaria, M. D., Haksama, S., Setijaningrum, E., Boimau, A., Boimau, S. V., Huru, M. M., & Manalor, L. L. (2022a). Maternal decision-making in Malacca East Nusa Tenggara: How do demographic factors influence? *Chinese Journal of Medical Genetics*, 32(3), 152–157.
11. Seran, A. A., Dyah Antaria, M., Haksama, S., & Setijaningrum, E. (n.d.). How health service? Perspective of maternal in east nusa tenggara province, Indonesia. *International Journal of Psychosocial Rehabilitation*, 24, 2020.
12. Suhron, M. 2024. *Public Health Epidemiology Research Book*. SABDA EDU PRESS.
13. White, L. K., Kornfield, S. L., Himes, M. M., Forkpa, M., Waller, R., Njoroge, W. F. M., Barzilay, R., Chaiyachati, B. H., Burris, H. H., Duncan, A. F., Seidlitz, J., Parish-Morris, J., Elovitz, M. A., & Gur, R. E. (2023). The impact of postpartum social support on postpartum mental health outcomes during the COVID-19 pandemic. *Archives of Women's Mental Health*, 26(4), 531–541.

<https://doi.org/10.1007/s00737-023-01330-3>

14. Xin, J. K. Y., Shian, G. Y., Han, T. T., & San, W. T. W. (2024). Experiences of postpartum Chinese women undergoing confinement practices: A qualitative meta- synthesis. *International Journal of Nursing Practice*, January,. *International Journal of Nursing Practice*, January, 1–14. <https://doi.org/10.1111/ijn.13251>