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## Sociodemographic and Cultural Aspects of the Gayo Community in Exclusive Breastfeeding in the Work Area of the Pegasing Health Center, Central Aceh

Nova Ratna Dewi<sup>1\*</sup>, Hidayana<sup>1</sup>, Irdayani<sup>1</sup>

<sup>1</sup>Lecturer, Diploma of Midwifery Study Program, Politeknik Kesehatan Kemenkes, Aceh, Indonesia

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#### \*Corresponding author:

Nova Ratna Dewi

#### E-mail address:

[novaratnadewi675@gmail.com](mailto:novaratnadewi675@gmail.com)

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### ABSTRACT

Exclusive breastfeeding is breastfeeding only, without additional fluids and other foods for the first 6 months. Economic, cultural, and sociodemographic factors are thought to influence mothers to keep working even though their babies still need exclusive breastfeeding. This study aimed to describe cultural and sociodemographic factors related to exclusive breastfeeding in the working area of the Pegasing Health Center, Central Aceh. This research is an observational study. A total of 73 mothers participated in this study. The inclusion criteria are mothers who have children aged 0-5 years, domicile in the Pegasing Health Center work area, and are willing to participate in this study. Sociodemographic data and the level of knowledge of mothers regarding exclusive breastfeeding were measured using a structured interview and questionnaire. Cultural aspects related to exclusive breastfeeding were explored through focus group discussions and in-depth interviews. The majority of participants had senior high school education (57.5%), family income was below the Central Aceh regional minimum wage (95.89%), and mothers' knowledge regarding exclusive breastfeeding was considered good (50.7%). Meanwhile, mothers considered that family support in breastfeeding was good (50.7%). However, support from health workers was considered to be lacking regarding exclusive breastfeeding (38.4%). Based on the results of the interviews, there are habits making up and myths about *dena* which inhibit exclusive breastfeeding in infants in the Gayo area. In conclusion, family income and cultural factors have a role in exclusive breastfeeding in the working area of the Pegasing Health Center, Central Aceh.

### 1. Introduction

Based on Riskesdas data in 2017, there was a high infant mortality rate of 24/1000 live births, and the under-5 mortality rate was 32/1000 live births (Indonesian Ministry of Health, 2017). One of the risk factors for mortality in infants and toddlers is nutritional problems, especially related to exclusive breastfeeding (Ware et al., 2019). Exclusive breastfeeding is breastfeeding only, without additional fluids and other foods for the first 6 months. Only breastfeeding without any complementary food until the age of 6 months will have tremendous benefits for the development and growth of the baby and increase

the bond of affection between mother and baby (Adams, 2017).

The Gayo ethnic is an ethnic group that inhabits the Gayo highlands in the central part of Aceh province (Sukiman, 2021). The topography of the area, which is in the highlands, makes this area very fertile for growing coffee plants. Generally, the Gayo community in Pegasing District, Central Aceh, work as coffee farmers and coffee factory workers' mothers. Economic, cultural, and sociodemographic factors are thought to influence mothers to keep working even though their babies still need exclusive breastfeeding. Generally, babies are entrusted to grandmothers



(parents of the baby's mother) to be cared for while they work in the coffee plantations. Based on a preliminary survey in the working area of the Pegasing Health Center in 2021, exclusive breastfeeding at the Pegasing Health Center in 2021 was 148 (47.43%) of 312 mothers who gave birth. This is very low compared to the national exclusive breastfeeding coverage of 80%. This study aimed to describe cultural and sociodemographic factors related to exclusive breastfeeding in the working area of the Pegasing Health Center, Central Aceh.

## 2. Literature Review

Based on the behavioral theory put forward by Green, there are three factors that influence a person's behavior, namely predisposing factors in the form of knowledge, attitudes, and beliefs; facility factors such as facilities and infrastructure; and reinforcing factors such as the role of role models such as health workers, religious leaders and community leaders (Green, 1984). Exclusive breastfeeding in the Gayo community is strongly influenced by a local culture where most of the population adheres to customs (Ramaidani et al., 2022). Some of the causes of mothers not wanting to give exclusive breastfeeding are myths about breastfeeding *dena*. *Dena* is a hereditary myth among the Gayo ethnic that breast milk will cause the baby to vomit, itch on the baby's skin, and die, so many mothers are not allowed to breastfeed their in-laws (Kahayati et al., 2021).

Various studies have proven that antibodies contained in breast milk can reduce the risk of babies getting infections such as ear infections, pneumonia, intestinal infections, and meningitis or inflammation of the brain (Brandtzaeg, 2003; MacGillivray et al., 2014; Czosnykowska-Lukacka et al., 2020). When a mother breastfeeds a baby, not only is the nutrition fulfilled, but also the emotional bond that exists between mother and child gets stronger. However, along the way, breastfeeding mothers must face various challenges that drain their energy and even

their emotions. Emotional disturbances such as baby blues syndrome and postpartum depression can reduce exclusive breastfeeding (Andrina, 2021).

The next factor that plays a role in exclusive breastfeeding is facilities, in this case, health and delivery facilities. A study states that the higher the coverage of prenatal and antenatal care in a health facility, the higher the coverage of babies receiving exclusive breastfeeding (Lahdji et al., 2022). Data on the coverage of exclusive breastfeeding in the Pegasing Health Center work area shows a decrease from year to year. In 2018, exclusive breastfeeding coverage of 50.80% decreased to 47.43% in 2021.

Health workers play an important role in motivating mothers and providing information to breastfeeding mothers about the importance of exclusive breastfeeding for babies (Rosidi et al., 2021; Lahdji et al., 2022). So far, there have been various wrong perceptions regarding exclusive breastfeeding. It is undeniable that this is a burden for breastfeeding mothers so the breastfeeding process is disrupted. Some people still think that breastfeeding is only a matter for the mother and her baby, even though the role of the family and health workers in exclusive breastfeeding is very large.

The role of health workers in exclusive breastfeeding is needed, namely by providing information and education about the importance of exclusive breastfeeding to breastfeeding mothers. Government Regulation of the Republic of Indonesia Number 33 of 2012 concerning exclusive breastfeeding explains that in order to achieve optimal utilization of exclusive breastfeeding, health workers and providers of health service facilities are required to provide information and education on exclusive breastfeeding to the mother and or family members of the baby concerned since the pregnancy check. Until the exclusive breastfeeding period is complete (Indonesian Ministry of Health, 2014), providing information and education on exclusive breastfeeding can be done through counseling, counseling, and assistance.



Health workers are expected to be able to support the success of the exclusive breastfeeding program so as to reduce the habit of giving their babies food other than breast milk.

### 3. Methods

This research is an observational study. The population of this study was mothers with toddlers in the working area of the Pegasing District Health Center, Central Aceh Regency, Indonesia. This research was conducted in June-July 2022. A total of 73 mothers participated in this study. The inclusion criteria are mothers who have children aged 0-5 years, domicile in the Pegasing Health Center work area, and are willing to participate in this study. This research has received approval from the ethical committee of the Politeknik Kesehatan Kemenkes Aceh.

Sociodemographic data and the level of knowledge of mothers regarding exclusive breastfeeding were measured using a structured interview and questionnaire. Cultural aspects related to exclusive breastfeeding were explored through focus group

discussions and in-depth interviews. Sociodemographic data measured were the mother's education level, knowledge, family income, family support, and health workers for exclusive breastfeeding. The data obtained will be presented in the form of tables and narratives.

### 4. Results and Discussion

#### Sociodemographic characteristics

A total of 73 participants took part in this study. Table 1 presents the sociodemographic data of research participants in the working area of the Pegasing Health Center. The majority of mothers had senior high school education (57.5%), family income is below the Central Aceh regional minimum wage (95.89%), and mothers' knowledge regarding exclusive breastfeeding is considered good (50.7%). Meanwhile, mothers considered that family support in breastfeeding was good (50.7%). However, support from health workers was considered to be lacking regarding exclusive breastfeeding (38.4%).

Table 1. Sociodemographic characteristics of the participants.

Characteristics	Frequency (%)
Mother's education level	
Senior high school	42 (57.5)
Junior high school	31 (42.5)
Family income	
Above the regional minimum wage (UMR)*	3 (4.11)
Under UMR*	70 (95.89)
Mother's knowledge regarding exclusive breastfeeding	
Good	37 (50.7)
Enough	19 (26.0)
Less	17 (23.3)
Family support	
Good	37 (50.7)
Enough	17 (23.3)
Less	19 (26.0)
Health worker support	
Good	25 (34.2)
Enough	20 (27.4)
Less	28 (38.4)

Notes: The regional minimum wage for Central Aceh Regency in 2022 is IDR 3,413,666 per month.



Based on the results of the study, the majority of mothers are in families with low incomes or below the UMR. Family income is a factor related to financial conditions related to food purchasing power (Scarpa et al., 2022). Low family income will encourage mothers to seek additional income so that exclusive breastfeeding is hampered (Muchaca et al., 2015).

The lack of family support especially supports from the baby's father and parents, results in the baby not getting exclusive breastfeeding (Natalia et al., 2022). To be able to provide exclusive breastfeeding, a mother must get support from various parties. The family, in this case, the husband, plays an important role in supporting his wife to breastfeed exclusively. Besides that, success and failure in motivating mothers to breastfeed exclusively demand the role of the father. The process of giving milk to babies requires involvement between the father, mother, and baby. The father must be the balancer of the relationship while the mother provides breast milk to the baby. However, it is not uncommon to encounter fathers who have the wrong opinion, and they feel they do not need to interfere in the breastfeeding process, and it is enough to be passive observers. They think that breastfeeding is the business of the mother and the baby only.

Health workers play an important role in the success of exclusive breastfeeding. Health workers contribute to providing education and counseling to breastfeeding mothers. Health facilities are expected to provide increased understanding to mothers and their families of the importance of breastfeeding for babies (Rosidi et al., 2021).

### **Cultural aspects of the Gayo community toward exclusive breastfeeding**

The Gayo communities are known to uphold their customs and cultural values. Exclusive breastfeeding cannot be separated from the influence of habits colored by local customs. In Gayo culture, there are known that there is a custom of *mangupa-upa* or give

the baby honey before breastfeeding (Puspitawati et al., 2016). This is intended so one day after growing up, the child looks sweet or beautiful, and his/her life is sweet. Giving honey, plain water, honey water/brown sugar water, bananas, porridge, and biscuits to infants at an early age is a behavior pattern that has been passed down from generation to generation based on the values of the local community so that this causes mothers not to be able to give exclusive breastfeeding. (Mahyudin et al., 2018).

In addition, there are also myths about *dena*, which situations or conditions experienced by breastfeeding mothers regarding their breast milk, where breastfeeding mothers believe that there are germs in breast milk (Kahayati et al., 2021). The mother feels that there will be germs in her breast milk when the mother feels an itching sensation on the nipples. These symptoms are not only experienced by the mother, but *dena* symptoms can also be experienced in infants, namely, when the baby does not want to be breastfed, the baby becomes fussy, red spots appear on the baby's skin, blisters on the skin, and vomiting. As quoted in the following interview;

*"Dena is a germ that is in breast milk, and sometimes red spots come out all over the body. Usually, the mother also feels itching around the breast"* [Mother A, 29 years old].

In conditions experienced like this, mothers tend to ask people who are more experienced, such as mothers or village elders, about this condition. Mothers who believe they have affected *dena* will stop her from breastfeeding. From the perspective of a trusting family *dena*, they convinced the mother that stopping breastfeeding because of *Dena* was better than continuing breastfeeding, which was considered dirty. Because this is what is possible, *dena* is still trusted and thriving there. According to the Gayo community, if a mother and her baby are infected, they must be treated, either medically or by a traditional



healer, as the results of the following interview excerpts;

*"Yes, sister, it's not a medical disease. It's a village disease, sister. It was the shaman who said, sis. Dena's is not a hospital disease...spells."* [Mother S, 25 years old].

Mothers believe that *dena* will recover if breastfeeding is stopped. It is not uncommon for breast milk to be stopped forever because mothers believe their milk contains germs, allergies, and substances that are not good for babies. As expressed by one of the mothers participating in this study;

*"At first I continued to breastfeed, sis, but I saw that it was getting worse, in the end, I stopped sis, I couldn't bear to see her. She kept vomiting, sometimes she had shortness of breath, and now I've replaced it with bottle milk."* [Mother B, 26 years old].

A study conducted by Auni et al., (2022), states that customs have strong bonds and influence in society. Their binding strength depends on the community that supports these customs, which are primarily based on their feelings of justice. Cultural values are ideas or ideas about certain things that are considered important for a community. For example, cultural values such as respecting one's parents or mutual cooperation with others.

The role of parents and in-laws in making decisions on the problems at hand is very large. Mothers tend to obey their parents-in-law's decision to stop breastfeeding because they are worried about myths *dena*. The role of health workers in educating mothers and their families will support exclusive breastfeeding at the Pegasing Health Center. Community leaders also play an important role in conveying health promotion regarding exclusive breastfeeding because community leaders are role models whose advice is widely heard and implemented by the community.

A health promotion job that takes time and patience in providing counseling to the public that

*dena* it's actually not breast milk that contains germs, not a cursed disease that only exists in the Gayo area, but *dena* is an allergy to food protein found in breast milk according to the mother's nutritional intake, or an allergy to milk protein (Mesters et al., 2018; Kahayati et al., 2021). Allergies can occur when a person's immune system has excessive sensitivity to foreign proteins, which for other people, do not cause problems.

## 5. Conclusion

Family income and cultural factors have a role in exclusive breastfeeding in the working area of the Pegasing Health Center, Central Aceh.

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