

ORIGINAL RESEARCH

A Qualitative Study: Infant Care in the Tolotang Community, Indonesia

Un estudio cualitativo: el cuidado de las y los lactantes en la comunidad tolotang, Indonesia

Ranti Ekasari. Public Health Department, Universitas Islam Negeri Alauddin Makassar, Indonesia.

Email: ranti.ekasari@uin-alauddin.ac.id, https://orcid.org/0000-0003-2914-7308

Ahmad Ahmad. English Literature Department, Universitas Islam Negeri Alauddin Makassar, Indonesia.

Email: ahmad.m@uin-alauddin.ac.id, https://orcid.org/0000-0002-7721-8927

Wahyuni Sahani. Environmental Sanitation Department, Polytechnic of Health Makassar, Indonesia.

Email: wahyunisahani372@gmail.com, https://orcid.org/0009-0003-0468-7911

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Abstract

Infancyis an important period for childhood growth. Infant parenting includes general knowledge from infant's mother and their family. The Tolotang community has their own way of parenting their infants, according to the values in their faith. The *Sanro* will give the people information about many things in life. This study aimed to know the way the Tolotang Community take care of their infants.

Keywords: Infant Care, Hygiene, Tolotang, Indonesia

Resumen

La infancia es un periodo importante para el crecimiento del niño. La crianza de los niños abarca los conocimientos generales de la madre y la familia. La comunidad tolotang tiene su propia forma de criar a sus hijos de acuerdo con los valores de su fe. *Sanro* les da información sobre muchas cosas de la vida. Este estudio tenía como objetivo conocer la forma en que la comunidad de Tolotang cuida a sus bebés.

Palabras clave: cuidado infantil, higiene, tolotang, Indonesia



Introduction

Infant care is one way to optimize the growth of a child. According to Suistainable Development Goals and targets of the 2030 agenda, in the third goal is stated an aim to ensure healthy lives and promote well-being for all people at every age. All countries aim to reduce neonatal mortality to at least as low as 12 per 1,000 live births and mortality under age 5 to at least as low as 25 per 1,000 live births.¹

Indonesia, as a developing country, in Demographic and Health Survey showed that there were 15 neonatal mortalitiesper 1000 live births. The global target has not yet been fulfilled. So, it is hoped that this number will gradually decrease, by some interventions that can support infants lives, and reach the national target, which is 10 neonatal mortalitiesper 1000 live births.²

One of the interventions to decrease neonatal mortality is to increase the exclusive breast-feeding ^{3–5}. EBF refers to the practice of providing only breast milk to infants, without any additional food or drink, for the first six months of life. EBF has been shown to have numerous health benefits for both the mother and the infant.⁶

Nationally, the coverage of exclusively breastfed infants for six month-olds in 2022 was 67.96%. This figure has exceeded the 2019 Strategic Plan target of 50%.⁷ Coverage of exclusively breastfed infants in South Sulawesi is 70.82%.² Meanwhile, specifically in Parepare City, the coverage of EBF was 67.15%.⁸

Socio-Cultural factors significantly influence mother conduct in infant parenting. ^{9,10}Those elements encompass the cultural ideals, norms, values, and social expectations present in a given society or community. They form the manner mothers perceive their roles and obligations, as well as how they interact with and take care of their babies. ^{11,12}

For the Tolotang, followers worship the God *Seuwae*, who they believe is God. However, on the resident identification card of the Tolotang community, it is written that their religion is Hinduism. This is because Indonesia only

recognizes five religions and does not legally recognize a cult like Tolotang. The Tolotang in Parepare are also a minority group. The Tolotang consider the *Sanro* in giving knowledge aboutinfant parenting.¹⁴

According to the previous study in TelluLimpoe, the pattern of the infant care meals (colostrum, and distinct breastfeeding, complementary breastfeeding) from the Tolotang community is derived from the mothers' understanding. Yet, their understanding is extraordinarily influenced by the Sanro, acting as a shaman or a professional in presenting the facts on everything life in Tolotang society¹⁴. Meanwhile, this study was conducted in the Tolotang Community in Laccoling, aiming to know how the Tolotang Community take care of their infants, in order to see the influence of socio-cultural factors in term of belief, for the improvement of health status.

Method

Research Design and Location

This research conducted in the Tolotang Community, Laccoling, Galung Maloang District, Parepare City, Indonesia on August 2017. This study was qualitative with in-depth interviews and observation method to obtain data. Infant care is described by looking at the predisposing, enabling, reinforcing factors of exclusive breastfeeding.

Informants

The total sample of 12 informants consists of five infants' mother, five infants' close family excluding the mothers, the *Sanro*, and the Maternal and Child Health Centre Cadre.

Data Collection

Informants were selected by snowball sampling, by in-depth interviews and brief observation. The interview mostly asked about the faith of informants with taboo things, their knowledge of breast-feeding, the implementation of breast-feeding and giving colostrum. Additionally, it was also asked about the role of infant's family on supporting breast-feeding. Through in-depth interview, the *Sanro*'s role and the cadre's role

was the supporting point of the implementation of breast-feeding. Other than that, this research also did an observation of informant's house to find out the sanitary hygiene conditions.

Data Analysis

The data was analyzed through content analysis. Content analysis is a method for analyzing the content of a variety of data, such as visual and verbal data. The researchers listen, write and record the information from informants, but before this, the researchers make sure that informants accept the informed consent and give permission to record the interview. The researchers made interview matrices for each informants, and summarize that into the table. Additionally, the researchers also collect the information from observation by filling out the observation sheet. After that, the researchers analyzed all the information to make a conclusion.

Results

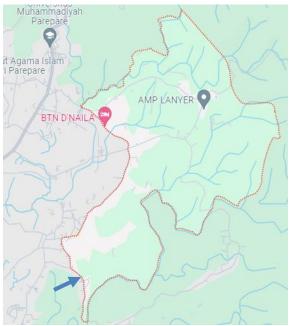
This study involved 12 informants consisted of five infants' mothers, five infants' close family, one *Sanro*, and one health cadre. Based on the age categories, the informants are ranging from 18 to 67 years old. Half of respondents were in elderly group category (50%). Based on the informants' education, most of respondents have graduated from the primary school (41.7%) and only one person has graduated from senior high school (8.3%).

In addition, most of respondents' occupation is entrepreneur (33.3%). The type of entrepreneurship they do is mostly itinerant vegetable sellers. Other types of labor include stone-breaking laborers and lifting stones into trucks, because there is a river near where they live

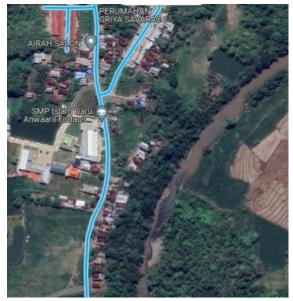
Table 1. Respondent's Individual Characteristics

Characteristic	Frequency (n=12)	Percentage (%)
Roles		
Mother	5	41.7
Close Family	5	41.7
Health Cadre	1	8.3
Sanro	1	8.3
Age		
Teenager (12-25 years old)	3	25.0
Adult (26-45 years old)	3	25.0
Elderly (> 45 years old)	6	50.0
Education		
Not Graduated from Primary School	3	25.0
Graduated from Primary Schoold	5	41.7
Graduated from Junior High School	3	25.0
Graduated from Senior High School	1	8.3
Occupation		
Housewife	3	25.0
Driver	1	8.3
Labor	2	16.7
Entrepreneur	4	33.3
Health Cadre	1	8.3
Sanro	1	8.3

Figure 1. Map of Laccoling, Galung Maloang Sub-district



Laccoling, Google Maps



Map of Galung Maloang Sub-district, Google Maps

Below is the Laccoling area on a map taken via Google Map. Basically, the area of Laccoling is not very large. Laccoling itself is located in Galung Maloang Sub-district, Bacukiki District, Parepare City, South Sulawesi province. The majority of the Tolotang community resides in Laccoling in the Parepare City area.

Infant care behavior in this study is described through predisposing, enabling, and reinforcing factors of EBF from mothers with toddlers who are in the Tolotang community in Laccoling. The following are the results of in-depth interviews and observations conducted at the Tolotang Community in Laccoling. Informants speak in Indonesian and also Buginese.

Predisposing Factors

This study showed that there were some predisposing factors lead to the infant parenting, including faith, knowledge, EBF and the practice of giving colostrum. In terms of faith, all informants believed in taboos or what they call *pammali*. Here are some interview results related to the belief in something taboo related to infant parenting.

Haruspi 40 hari baru bisa turun di bawah. Ibunya juga. Di cera ji juga tapi nda sama kayak islam. Tidak mabbarasanji Makkunoniromitau ki panoanata (ID, 47 years old, Mother).

Translation: ...we may not take our infant out from home before 40 days. The infant may come out only to the balcony but may not go down to the ground. We afraid to take the infant out because usually there is *Parakang* (the name of a Ghost name in whom they believed).

Iye, uaciangi ko jokkalabuesoanana. Ko labuesouaceangi. Biasagareero ko labuessoengkapenyakitkennai, engka aga makhlukhalus, anu maulewat, jangkikitajalan (DM, 44 years old, Infant's Aunt).

Translation: Usually in the twilight, there some disease will infect the infant if the infant is outside the house. The ghost will be outside the house so we may not go out.

Informants also believe that babies should not leave the house before 40 days because they believe there are ghosts that can cause their babies to get sick. There were taboo things that informants believe, that can also influence their way to raise their infants.

Knowledge is a factor that can influence the way of infant parenting in the Tolotang Community in Laccoling. All informants thought that breast-feeding is important to their infants. Here are some interview results related to the knowledge of mother and also infant's family related to infant parenting.

Pentingsah. Erona anreangnaananae (ID, 47 years old, Mother).

Translation:...important for the infant as their food....

Pentingsah. Lebihbagus kasi ASI daripada susu bubukharuslagidibelli (EK, 18 years old, Mother).

Translation: Important. It's better to give breastfeeding than formula milk that we must buy.

Ya...memang, harusmemangpenting, daripadadibelikan susu. Kebanyakandisinikebanyakan orang tidakmampu **Translation:** Yes...it's obviously important, otherwise we have to buy formula milk. Most of people here have low income.

EBF and the practice of giving colostrum are also a good predisposing factor to lead to a good way of infant parenting. All infant's mothers gave EBF to their infant, and gave colostrum, even though they did not know what colostrum is. Here is some interview results related to EBF and giving colostrum practice.

Langsung ASI." (RN, 20 years old, Mother).

Translation: Directly give the infant exclusive breastfeeding.

Dari pertamalahir, langsung ji, langsung ji lancer (SR, 22 years old, Mother).

Translation: Since the infant's was born, I directly give him exclusive breastfeeding, the flow is good.

According to the result of interview, it showed that informants give their infant EBF directly from the time that the infant is born. Statements related to foods consumed by mothers to make breast milk flow are as follows:

Sayuran. Kangkung. Karena Padare lare mertuaku. Sayur campur juga biasa.(RN, 20 years old, mother).

Translation: Vegetables, kale because my father-in-law is kale farmer, mix vegetables is also good (Food that is consumed by the mother to make the the flow of breastfeeding easy to come out).

Manremikaju-kaju ta. Kaju campuramminaasengidi, makanjamoseddin ko purakimanre (SI, 37 years old, mother).

Translation: I consume vegetable, mix vegetable. I feel good after consuming it.

Based on the result, most of informants consume vegetables such as kale to boost their milk production. Colostrum, which is part of exclusive breast milk, is also given by mothers to their babies.

Deuiseng I uwalengbawang deg naujampangiualengieroridi-ridi e (ID, 47 years old, mother).

Translation: I don't know, I just give breastfeeding to the infant. I don't care at the time whether the colour of breastfeeding is yellowish (colostrum) or not.

Iya dikasi, karenakan di RS lahirjadiselaludikontrolsamabidanjadibilangbidan e,

kalauadasusumukasimianaktakarenabagusuntukper tumbuhannya (SR, 22 years old, mother).

Translation: I give it (colostrum). Becasuse I gave birth in Hospital and it is always controlled by midwife and She said that if your breastfeeding has already come out, give the infant directly because it's good for the infant's growth.

Maja, pastiiabbeangijoloyeromalita, iamimakanja e nappaialeng, mawaribaisa, malita. Iabbeangijoloapamajai, mapute I nappaialeng(NK, 64 years old, Sanro).

Translation: Bad (colostrum), they have to throw it away because it might be decay. They can give breastfeeding if the color is pure white as the milk should be.

Based on the provision of colostrum, all informants had given colostrum to their babies. This came from the informants'statements of giving the first milk to their babies. Some informants were directed by health workers to give colostrum, while others just gave colostrum without knowing the characteristics and benefits of colostrum.

Enabling Factors

Regarding enabling factors, it is known that there are several health resources availability that allow the Tolotang community to access health facilities to improve maternal and child health. Observations show that in Laccoling, where the Tolotang community lives, there is a regularly operating Maternal and Child Health Office, or commonly known as *posyandu*, that can be reached on foot. The *Posyandu* is in the house of a

health appointed by the *Puskesmas*. There is also a Community Health Clinic, or commonly known as *puskesmas*, and a hospital in the district that can be reached by vehicle or motorcycle.

Lo okkoe sanro e. Nappaa na okkoro ni na ita anana e. Ko purani i cera. Na sappa i manu. Engka manu tuo dua engka to manu mate dua. Nappa na alekki darahna okko akkue na ananae (dahi)" (RN, 20 years old, mother).

Translation: The infant and the mother must be 40 days of age to go out from house. The infant is also do *cera* (a ceremonial way of welcoming the baby) but not in the Islamic way. No barazanji (the Islamic way). Go to the *Sanro*. Then the baby will be seen by the *Sanro*. When the *cera* activity is finished. The baby's family will look for a chicken. Two live chickens and two dead chickens. The blood of the chickens is given on the baby's forehead.

Informants believe that mothers who have just given birth and their babies can only go outside the house (most houses in Laccoling are houses on stilts) after 40 days postpartum. They also havea ceremonial way of welcoming the baby called *cera*, donein a particular way.

Figure 2. Maternal and Child Health Office(*Posyandu*) in Laccoling



Besides that, there are also sanitary hygiene conditions that can improve the quality of infants' care. In terms of sanitary hygiene conditions, it was observed through infant bathing location and breast hygiene. All informants bathed their infants on top of the house, precisely in the same location as the place to wash dishes. Informants use a basin as a container to bathe their infants. In the aspect of breast hygiene, some informants would wash

their hands and wash their breasts with drinking water after leaving the house before breastfeeding their infants.

Figure 3. Informant's House (Tolotang Community) in Laccoling



Figure 4. Place to Bath Infant Informant



Reinforcing Factors

Based on the results of interviews and observations, it is known that there are several variables that become reinforcing factors. The reinforcing factors in this study include the role of the infant's family (other than the mother), the role of shaman commonly known as the *Sanro*, and the role of health cadres.

In the role of the infant's family, it is known that most of the infant's family supports and tells the infant's mother to provide breast milk to her infant, with various reasons. Additionally, some families of infants who smoke, choose not to smoke next to the infant. The following interview results support this statement.

Iya, dipentingkananae, komaterriana e usuroniemmanalaopasusui. Sama anurena mi nasibang. Majjama ka iya (RL, 48years old, infant's father).

Translation: I told my wife to take care of our infant first. If the infant is crying I told the mother to give breastfeeding directly. She went to the Health Facility with her cousin. I work.

Ehehe, iyapenting". Isurumurusianana, apalagi ko terrii. Iye, kenro-kenroudapi, okkoiawa bola aga. Deg tuappelo, no' ka (LM, 67 years old, infant's grandfather).

Translation:It is important (breast-feeding). I told the mother to take care of the infant especially when he is crying. Wherever I can. Under the house also possible (smoking). If the infant is there (I didn't smoke, I go under the house).

In addition to the role of the family, there is also the role of *Sanro* (shaman) who is trusted by the Tolotang community to assist in the process of childbirth until postpartum. Based on the results of the interview, the *Sanro* has a role to provide massage for pregnant women and to bury the infant's placenta. The following are the results of interviews with the *Sanro* who assisted the Tolotang community in the delivery process and gave advice to mothers regarding infant care.

Oo, kalau di bawahitukandungannyadikasi naiknaik I, jadidiurut-urut I supaya naik I kanndaenak orang duduk to kalauturuni.

Irunna, icucisupayasampebersih, kalautidakbersihbiasaanana e bintik-bintik. Purani rekeng, mapaccingni ,dikasimasukniokkobeleng e, wajang tanah, nappaitarui garam, padi, semuadisitu, ikan supayatidaklaparananaekalautidakditaruhapapadis itu.

Ari-aridikubur kalo laki-laki di depanrumah, kalauperempuandisampingdekatjendela. Deg marigaga, yang pentingusuroimakkampeangenbangkungokkotanah e okko iolo. Bara mitau I maja-maja e, setang e.

Ya, apputeangitasseleng, jajiitalurung, 1 kalukumarakkosibawagolla.

Ia mi ko isungkuananekalukumalolo. Ko gollaipasideppiokkoananae. Kalukue li

lettaniirogollae aga ipakkoro(NK, 64 years old, Sanro).

Translation: ...do massage to the mother if the uterus little bit drop. The placenta will be washed as clean as possible. If it's not clean, there will be dot in the skin of the infant. After that we put in on a clay cans and put salt, paddy on it, fish so that the infant will not be hungry. The location of burying placenta according to sex of the infant. For boy, I bury it in front of the house, for girl I bury it beside the house close to the window. Actually, the infant can go out before 40 days but we have to throw the sword from upstairs so that the bad will go away. We don't want to make the infants shock so we have to make them adapt with the situation. One coconut and brown sugar with a round of shape then we make it near from infant's ear and we hit it to the wall of the house. Brown sugar is used to make the feelings of the infant become sweet as sugar".

In relation to improving the quality of maternal and childhood health in the Tolotang community, researchers also looked at the role of health cadres appointed by the *Puskesmas* to assist in monitoring maternal and childhood health in the Laccoling area. Based on the results of interviews, health cadres play a role in visiting the homes of pregnant women and mothers who have infants, measuring the weight and length of babies, and providing advice to mothers and families of infants in the care of babies.

Jangansembarang kasi makansebelum 6 bulan. Jangan kasi susu sebelum, susu kitasendiribegitu.

Penting (colostrum), iya yang kuning. Kalau pertamalahirananadisimpan di dada

Pernahmakkadadengkualenadoi e iyapa jamai, tapi deg naelowarga e okkopuskesmas e, jadi deg pa gaga, turiiawabolaku mi.

I emo ro, I temple ji bawang Karena di depanngi, tapidisni (di rumahkader) diperiksa. Maukikapank polio jadiipasangngi.

Bersih, selalukesi anu kesikering-keringanana, kasi kennamatahari, jaga kebersihansupayasehatselalu.

Bilangtidakbolehsembarang, sirup tidakboleh. Susu juga bolehla, begitu, jangansembarangankalaumasihbayianana,

susu lebihbagus.

Anu dilarangbilangjangan kasi makansembarang, pergikiimunisasi, campak, selalupergidisuntik (DG, 29 years old, Health Cadre).

Translation: I will tell the mother that the first breastfeeding must be given to the infant. It is important. When the infant was born, keep the infant on mother's chest so they will [be] connected.

The Maternal and Child Health Office is under my house. There is no official building for it in this area. Community Health Clinic Officer didn't want to build it. So, I use under my house as kind of building of it.

Let the baby [be] shined by sunshine. Keep being healthy so the baby can be healthy.

They may not smoke around the infant randomly before six months. Don't give any other drinking beside breastfeeding.

Do immunization, do injection.

Discussion

The Tolotang Community Center is located in Amparita, Sidrap Regency, Indonesia. But in Parepare, the Tolotang Community located in Laccoling. There are unique traditions for people with the Tolotang faith. One of the unique traditions is that if a Tolotang community member dies, he will be taken out of the house through the window and not the door of the house. The Tolotang people have made a wooden ladder for the window in preparation for when a family member dies. There is a Tolotang community shrine located in Amparita called *Perri Nyameng*. Based on the results of in-depth interviews and observations, 3 factors can be discussed that influence infant care in the Tolotang Community.

Predisposing Factors

Predisposing factors in infant care refer to the various factors that can influence the way parents or caregivers provide care and support to infants 16,17. In this research, it was found that faith, knowledge, EBF and the practice of giving colostrum are the part of predisposing factors related to infant care.

Faith

According to faith, the Tolotang community itself is religious, and is categorized as Hinduism in Indonesia. The Tolotang Hindus are mostly dominated by Bugis tribe, in the formation of

Bugis settlements. This understanding affects the appearance of people's residences according to their social status, namely norm holders (*uwatta*), *uwa*, and ordinary people. Most of the Tolotang Community in Laccoling believe in taboo things related to the infant care, such as the mother and the baby may not go out of the home until 40 days after give birth, because there is certain ghost that can cause disease to their infant. Also, they also believe that in twilight, some disease will infect the infant. Besides the forbidden things, they also do *cera* as a ceremony to welcome their baby. It is completed putting blood from a dead chicken on the baby's forehead.

According to the previous study, the religious beliefs and practices of patients play an important position inside the care of the patient. Religiosity should be a key factor of training fitness care specialists with a view to understand the non-secular wishes in their clients and offer holistic care. The pregnant women and women in labour must be supported to exercise their religious beliefs and practices.¹⁹

In line with that, a study conducted by Withers et al(2018)²⁰ showed that many Asian women keep practicing a huge variety of traditional ideals and practices in the course of pregnancy, childbirth, and the postpartum period. Through spotting and appreciating these common local beliefs, carriers may be better placed to provide culturally ready care. Rather than reducing the options available to women in the course of the beginning experience, providers ought to recognize, respect, and integrate cultural interpretations of childbirth and the desires of women and their households.

Knowledge

Based on knowledge, all informants in this research know that EBF is very important to their infant. Not only the mothers but also other family, and the *Sanro*, knowthat breast-feeding is better and cheaper than formula milk. These care practices are embedded in deep rooted non secular, conventional, cultural and social values.²¹

The knowledge of informants also tended to their last education. Although most respondents only had a primary school education, they still chose to

exclusively breastfeed their babies. Breast milk is given for various reasons such as because it does not have to be bought or because people say breast milk is good for babies. However, they did not really know the benefits of breastfeeding beyond economic considerations and the assumptions of people around them.

Previous studies have shown that lower education levels are associated with lower EBF practices. A study of mothers in Dhaka showed that the prevalence of EBF can be attributed to the number of educated mothers, the availability of health facilities, and the presence of NGOs implementing programs aimed at increasing breastfeeding and reducing child malnutrition.²²

Exclusive Breast-feeding (EBF) and Colostrum

EBF refers to the practice of feeding an infant nothing but breast milk for the first six months of life, with no additional food or drink, except for necessary medications.²³ This practice is crucial for the optimal health and development of infants. Breast milk is uniquely designed to provide all the necessary nutrients and antibodies that a baby needs in the first few months of life. Furthermore, EBF has numerous benefits for the baby, including a reduced risk of infections, allergies, and chronic diseases such as obesity and diabetes later in life.²⁴

Since mothers know the importance of breastfeeding, they implement it. All informants provided EBF to their infants. In addition to breast milk, all mothers had also given colostrum as early nutrition to their infants, although the Sanro said that colostrum is not good and should be discarded. However, informants, in this case the infant's mother, continued to give colostrum to their infants because of the support from other family members and health cadres in the area where they lived.

Colostrum, the early milk produced by mammals, is a vital substance that plays a crucial role in the health and development of newborns.²⁵ It is rich in antibodies and provides important immune protection to the newborn, helping them fight off infections and diseases.²⁶ Moreover, colostrum contains essential nutrients and growth factors that support the growth and development of the newborn.²⁷

Enabling Factors

Enabling factors in infant care refer to the various elements and conditions that support and facilitate caregivers in providing nurturing care for young children. These factors can include policies, services, and community supports that ensure caregivers have the necessary time, resources, and knowledge to meet the needs of infants. By having enabling factors in place, caregivers are able to fulfill not only the physical needs of infants but also their social, emotional, and developmental needs.²⁸

Posyandu

According to this research, it was shown that enabling factors of infant care are adequate. The facilities that allow the Tolotang community to improve the quality of maternal and child health are the posyandu, which is located close to the community, even though the place of the posyandu is not permanent. However, posyandu is held regularly every month. In addition, if informants need more serious services, they can access the nearest health center or hospital that can be reached by car or motorcycle.

Previous studies have shown that the enabling factors identified as influencing infant care, especially exclusive breastfeeding, are having education, and attending antenatal care recommended for gestational age four years and above, and giving birth to a male infant. Maternal care pathway retention observed across the maternal care pathway continuum remains low, with one in four mothers not receiving antenatal care and more than half not receiving postpartum care that is crucial to the health and survival of both mother and infant.²⁹

Posyandu as a public health information center provides great benefits to the community. Community participation in the posyandu program is quite high, because posyandu has an important role in improving the quality of public health and maternal and child health through various service processes that are maximally beneficial. The role of posyandu as an agent of social change is reflected in the way the community views health, especially maternal and child health, monitoring

child growth and development, early detection of disease, and other benefits that lead to changes in the community's perspective on health.³⁰

Sanitary Hygiene

In terms of sanitary hygiene, some things still need to be improved, such as the location of the baby's bathing place, where the majority of Tolotang communities bathe babies in the same location as the place to wash dishes. However, in terms of personal hygiene for breast hygiene, the majority of informants have paid attention to their breast hygiene.

Previous study showed that infants are believed to be vulnerable to various diseases and evil forces. Preventive practices take precedence over treatment. Plants are most often used to keep young children strong and healthy. Infant care has strong magical connotations. Bathing proved to be the most important type of application, often combined with drinking a small amount of bathwater.³¹

An important element of breastfeeding that can also contribute to the quality of breastmilk is breast hygiene. Appropriate breast hygiene can help improve milk quality by minimizing the risk of infection and by ensuring that the milk is clean and safe for the infant to consume.³²

Reinforcing Factors

In the context of infant care, reinforcing factors can refer to various ways or stimuli that can enhance or strengthen the relationship between parents and infants, such as family support and self-efficacy. This involves a variety of actions or responses that provide positive experiences for babies, thus, they feel safe, loved and connected to their parents.³³

Infant's Family Role

The reinforcing factors in this study included the role of the baby's family in addition to the mother, the shaman (*Sanro*), and the health cadres. The role of the baby's family in implementing EBF is characterized by always reminding and supporting

the mother to give breast milk to the baby, instead of formula milk. According to them, breast milk is more nutritious and cheaper than formula milk. If a family member smokes, they will find a place away from the baby so that the baby does not inhale the cigarette smoke.

Supportive partner/father actions can positively increase breastfeeding practices. So, to maximize the impact of breastfeeding policies and interventions among new mothers, breastfeeding programs should also take into consideration the involvement of partners/fathers and their particular roles.³⁴

Sanro Role

The role of the *Sanro* in infant care is to accompany the mother before and after childbirth. Before the childbirth, the *Sanro* provides massage during the pregnancy. Indeed, the massage is given only when the position of the womb is down, before the estimated due date of birth. The *Sanro* is also in charge of burying the baby's placenta when it has been born by considering the location of the burial based on the baby's gender. In addition, the *Sanro* gives some advice such as hitting a dried coconut and coconut sugar near the baby's ear so that the baby gets used to loud sounds. Also, sugar is likened to giving life and a feeling of sweetness to the baby.

Previous research has also shown that the *Sanro* plays a significant role in shaping perspectives and actions taken during pregnancy. The *Sanro* is needed by the mother from the beginning to the delivery process. The *Sanro* acts as a caregiver, companion and guide during rituals in the early and late stages. In addition, the *Sanro* is also a source of information related to diet and relevant abstinence behavior.³⁵

Health Cadre Role

There is also the role of health cadres who contribute in visiting the homes of pregnant women and mothers with babies, measuring the height and weight of babies, and providing some advice related to maternal and child health.

Posyandu cadres are health workers who have an important role in facilitating health services to the community, specifically in rural areas. In this study, health cadre in Laccoling is also a member of Tolotang community. *Posyandu* cadres are required to provide information and health education to the community, including mothers, about optimal infant care.³⁶

Conclusion

The conclusion of this study is that the Tolotang community takes care of their infants according to their faith, knowledge, and the availability of the supporting facilities related to infant care. They also have their own way to keep their sanitary hygiene. The *Sanro* and Cadres play crucial roles in influencing behavior of infant's family in parenting. According to their faith, their *Sanro* tends to have a similar paradigm to their Maternal and Child Health Centre Cadre. The obstacle of this research is in security of informants regarding their privacy.

References

- 1. United Nations. Global indicator framework for the Sustainable Development Goals and targets of the 2030 Agenda for Sustainable Development [Internet]. New York; 2020 [cited 2020 Sep 21]. Available from: https://unstats.un.org/sdgs/indicators/indicators-list/
- 2. Health Ministry of Indonesia. Profil Kesehatan Indonesia [Internet]. Vol. 42, NASPA Journal. Jakarta: Health Ministry of Indonesia; 2019. Available from: https://pusdatin.kemkes.go.id/resources/download/pusdatin/profil-kesehatan-indonesia/Profil-Kesehatan-indonesia-2019.pdf
- 3. Siraneh Y, Woldie M, Birhanu Z. Effectiveness of positive deviance approach to promote exclusive breastfeeding practice: a cluster randomized controlled trial. Risk Manag Healthc Policy. 2021;14:3483–503.
- 4. Lassi ZS, Rind F, Irfan O, Hadi R, Das JK, Bhutta ZA. Impact of infant and young child feeding (Iycf) nutrition interventions on breastfeeding practices, growth and mortality in low-and middle-income countries: Systematic review. Nutrients. 2020;12(3).
- 5. Abdulahi M, Fretheim A, Argaw A, Magnus JH. Breastfeeding education and support to improve early initiation and exclusive breastfeeding practices and infant growth: A cluster randomized controlled trial

- from a rural ethiopian setting. Nutrients. 2021;13(4):1–15.
- 6. Pitoyo AJ, Saputri A, Agustina RE, Handayani T. Analysis of Determinan of Stunting Prevalence among Stunted Toddlers in Indonesia. Populasi. 2022;30(1):36.
- 7. Kemenkes RI. Laporan Akuntabilitas Kinerja Instansi Pemerintah (LAKIP) Tahun 2022. Kementeri Kesehat Republik Indones [Internet]. 2023;1–89. Available from: https://kesmas.kemkes.go.id/assets/uploads/contents/oth ers/LAKIP_DITJEN_KESMAS_rev1.pdf
- 8. Health Officer of South Sulawesi Province. Health Profile of South Sulawesi Province [Internet]. Journal of Chemical Information and Modeling. South Sulawesi; 2018. Available from: https://pusdatin.kemkes.go.id/resources/download/pusdatin/profil-kesehatan-indonesia/Profil-Kesehatan-indonesia-2019.pdf
- 9. Hervilia D, Dhini, Munifa. Pandangan Sosial Budaya terhadap ASI Eksklusif di Wilayah Panarung Palangkaraya. Indones J Hum Nutr [Internet]. 2016; Vol. 3(No. 1):63–70. Available from: ijhn.ub.ac.id/index.php/ijhn/article/download/144/154
- 10. Hamzah A, Hariani S. Perilaku Menyusui Bayi pada Etnik Bugis di Pekkae, 2003. Pendidik Kesehat Ilmu Perilaku [Internet]. 2007;1(5):195–201. Available from: https://media.neliti.com/media/publications/39644-ID-perilaku-menyusui-bayi-pada-etnik-bugis-di-pekkae-2003.pdf
- 11. Leyendecker B. Child Care and Development across Cultures. In: Wright JDBTIE of the S& BS (Second E, editor. Oxford: Elsevier; 2015. p. 395–8. Available from: https://www.sciencedirect.com/science/article/pii/B978 0080970868232200
- 12. Moscardino U, Nwobu O, Axia G. Cultural beliefs and practices related to infant health and development among Nigerian immigrant mothers in Italy. J Reprod Infant Psychol [Internet]. 2006 Aug 1;24(3):241–55. Available from: https://doi.org/10.1080/02646830600821280
- 13. Sugiarti. Dinamika Komunitas Hindu Towani Tolotang di Sulawesi Selatan. Purwadita J Agama dan Budaya. 2020;4(1):23–32.
- 14. Noer N, Arsunan AA, Syafar M, Sirajuddin S. Parenting Baby on Tolotang Community in Amparita District, Tellu Limpoe Sub District, Sidrap Regency. Int J Sci Basic Appl Res [Internet]. 2016;4531(2):191–9. Available from: http://gssrr.org/index.php?journal=JournalOfBasicAnd

Applied

- 15. Harwood TG, Garry T. An overview of content analysis. Mark Rev. 2003;3(4):479–98.
- 16. Vik K, Daudi VZ, Kajula LJ, Rohde R, Ubuguyu OS, Saibulu JN. Infancy and Caring: Descriptions from Motherless Infants' Caregivers in an Institution in Rural Tanzania. Psychol Dev Soc J [Internet]. 2018 Feb 5;30(1):105–25. Available from: https://doi.org/10.1177/0971333617749141
- 17. Ortiz JA, Schiró EDB dei, Blanco OAC, Koller SH. Interventions for Enhancing Parenting Quality in Early Infancy. In: Seidl-de-Moura ML, editor. Rijeka: IntechOpen; 2013. p. Ch. 9. Available from: https://doi.org/10.5772/56974
- 18. Pujiastuti D, Osman WW, Arifin M. Penataan Permukiman Komunitas Hindu Tolotang sebagai Kawasan Wisata Budaya Studi Kasus: Komunitas Hindu Tolotang Kelurahan Amparita Kecamatan. Pros Temu Ilm IPLBI [Internet]. 2015; Available from: http://temuilmiah.iplbi.or.id/wp-content/uploads/2015/11/TI2015-C-071-076-Penataan-Permukiman-Komunitas-Hindu-Tolotang.pdf
- 19. Aziato L, Odai PNA, Omenyo CN. Religious beliefs and practices in pregnancy and labour: An inductive qualitative study among post-partum women in Ghana. BMC Pregnancy Childbirth [Internet]. 2016;16(1):1–10. Available from: http://dx.doi.org/10.1186/s12884-016-0920-1
- 20. Withers M, Kharazmi N, Lim E. Traditional beliefs and practices in pregnancy, childbirth and postpartum: A review of the evidence from Asian countries. Midwifery [Internet]. 2018;56:158–70. Available from: https://www.sciencedirect.com/science/article/pii/S026 6613817302012
- 21. Rasool M, Angmo R, Salim Khan SM, Haq I. Infant Care Practices in A Community of Srinagar City. Int J Contemp Med Res ISSN [Internet]. 2016;3(December 2017):2393–915. Available from: www.ijcmr.com
- 22. Hasan M, Hassan MN, Khan MSI, Tareq MA, Afroj MS. Prevalence, knowledge, attitudes and factors associated with exclusive breastfeeding among mothers in Dhaka, Bangladesh: A cross-sectional study. Popul Med. 2021;3(Who 2018):1–7.
- 23. Motee A, Jeewon R. Importance of exclusive breastfeeding and complementary feeding among infants. Curr Res Nutr Food Sci J. 2014;2(2):56–72.
- 24. Oddy WH. Breastfeeding, childhood asthma, and allergic disease. Ann Nutr Metab. 2017;70(Suppl. 2):26–36.

- 25. Polidori P, Rapaccetti R, Klimanova Y, Zhang JJ, Santini G, Vincenzetti S. Nutritional parameters in colostrum of different mammalian species. Beverages. 2022;8(3):54.
- 26. Yang M, Zou Y, Wu ZH, Li SL, Cao ZJ. Colostrum quality affects immune system establishment and intestinal development of neonatal calves. J Dairy Sci. 2015;98(10):7153–63.
- 27. Puppel K, Gołębiewski M, Grodkowski G, Slósarz J, Kunowska-Slósarz M, Solarczyk P, et al. Composition and factors affecting quality of bovine colostrum: A review. Animals. 2019;9(12):1070.
- 28. Richter LM, Lye SJ, Proulx K. Nurturing Care for Young Children under Conditions of Fragility and Conflict. New Dir Child Adolesc Dev [Internet]. 2018 Mar 1;2018(159):13–26. Available from: https://doi.org/10.1002/cad.20232
- 29. Kumera M, Haidar J. Level of exclusive breastfeeding and its enabling factors among lactating women who delivered in health facilities of Asosa town, Ethiopia: a cross sectional study. BMC Womens Health [Internet]. 2021;21(1):1–7. Available from: https://doi.org/10.1186/s12905-021-01580-2
- 30. Kusuma AN. The Presence of Posyandu as an Approach in Improving Health Development in the Community-Andiko Nugraha Kusuma. J Eduhealt [Internet]. 2022;13(01):137–46. Available from: http://ejournal.seaninstitute.or.id/index.php/healt
- 31. Ruysschaert S, van Andel T, Van de Putte K, Van Damme P. Bathe the baby to make it strong and healthy: Plant use and child care among Saramaccan Maroons in Suriname. J Ethnopharmacol [Internet]. 2009;121(1):148–70. Available from: https://www.sciencedirect.com/science/article/pii/S037 8874108005734
- 32. Delores JCS, Dobson B. Position of the American Dietetic Association: Promoting and Supporting Breastfeeding. J Am Diet Assoc [Internet]. 2005 May 1;105(5):810–8. Available from: https://doi.org/10.1016/j.jada.2005.03.015
- 33. Jayanti N, Sulaeman ES, Pamungkasari EP. Effects of Predisposing, Enabling, and Reinforcing Factors on Completeness of Child Immunization in Pamekasan, Madura. J Epidemiol Public Heal (2017), [Internet]. 2017;2(2):107–19. Available from: https://www.jepublichealth.com/index.php/jepublichealth/article/view/39
- 34. Ogbo FA, Akombi BJ, Ahmed KY, Rwabilimbo AG, Ogbo AO, Uwaibi NE, et al. Breastfeeding in the community—how can partners/fathers help? A

systematic review. Int J Environ Res Public Health. 2020;17(2).

- 35. Suriah S, Adriani S. Perspectives of pregnancy care in rural areas by pregnant women of Bugis ethnicity. Sci Eng Heal Stud. 2022;16:1–7.
- 36. Nurhayati N. The Influence of Holistic Health Services by PosyanduCadres in Increasing Aspects of

Mothers' Knowledge Regarding Optimal Baby Care at Posyandu Rajawali, Maniis Village, Maniis District, Purwakarta Regency, Indonesia. Arch Med Case Reports [Internet]. 2024;5(1). Available from: https://hmpublisher.com/index.php/AMCR/article/view/487/808

