

GSC Advanced Research and Reviews

eISSN: 2582-4597 CODEN (USA): GARRC2 Cross Ref DOI: 10.30574/gscarr

Journal homepage: https://gsconlinepress.com/journals/gscarr/



(RESEARCH ARTICLE)



Cultural practices of care during pregnancy in the Dayak Kanayatn tribe of west Kalimantan

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GSC Advanced Research and Reviews, 2024, 21(02), 478-486

Publication history: Received on 07 October 2024; revised on 16 November 2024; accepted on 19 November 2024

Article DOI: https://doi.org/10.30574/gscarr.2024.21.2.0435

Abstract

Every community must have its own culture, although its forms and characteristics vary from one community to another. Dayak culture is one of the "native" tribes that inhabit the island of Borneo. The Dayak tribe is indigenous to the island of Borneo, there are no Dayak people on other islands besides Borneo. The Dayak tribe has pregnancy care practices including abstinence such as food restrictions and abstinence from actions. The purpose of this study was to explore the Cultural Practices of Care During Pregnancy in the Dayak Kanayatn Tribe of West Kalimantan. This study used a qualitative method with a descriptive phenomenological qualitative research design. The number of participants was 15 pregnant women with an age range of 17-42 years. Data were obtained from in-depth interviews and analysed using the Collaizi method. The data processing technique used the NVivo 12 plus application. Results: This study resulted in three themes, namely the first theme of pregnancy care practices with sub-themes of medical pregnancy care and traditional pregnancy care. The second theme is abstinence during pregnancy with sub themes of abstinence from actions and abstinence from food, and the third theme is family support with sub themes of parental support, husband support, and self-will. The conclusion of this study is to provide an overview of the cultural practices of care during pregnancy, especially in the Dayak tribe.

Keyword: Cultural Practices; Dayak Tribe; Family Support; Pregnancy Care; Refusal Food

1. Introduction

Pregnancy care practices are one of the main factors that need to be considered by pregnant women, this is to prevent complications and death during childbirth and to determine the growth and health of the foetus in the womb, pregnancy care practices are very important because if inadequate pregnancy care practices are carried out, it will increase the risk of death [1]. Pregnancy care is important because in pregnancy care will be taught how to maintain a healthy pregnancy and monitored so that pregnancy conditions remain at low risk for complications.

West Kalimantan Province in 2018 had 86 cases of Maternal Mortality Rate (MMR), in 2019 there were 113 mothers died, and in 2020 there were 115 cases of Maternal Mortality Rate. The highest cases of MMR in West Kalimantan are in the Sintang, Ketapang, and Kubu Raya regions [2]. Based on data from the health department in the West Kalimantan region, the MMR case in 2021 was 214 per 10,000 live births, while in 2022 it experienced a significant decrease, namely 120 per 100,000 thousand live births MMR is one of the challenges that Indonesia must face so that it becomes one of the national priority commitments, namely ending maternal deaths during pregnancy and childbirth [3].

Factors that contribute to MMR include age, parity, LILA, pregnancy spacing, history of anemia, pre-eclampsia or eclampsia, bleeding, maternal nutritional status, heart disease, amniotic embolism, complications due to abortion, and delivery complications. Haemorrhage and eclampsia should be prevented and treated by experienced medical personnel working in adequate health facilities. Maternal mortality is caused by two factors, namely direct factors and

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indirect factors, in direct causal factors due to complications during pregnancy, childbirth, and puerperium while indirect factors are due to the impact of previous medical history that has developed since pregnancy [4]. The Maternal Mortality Rate (MMR) in West Kalimantan is caused by several main causative factors, namely postpartum haemorrhage (67%), infection (8%), preeclampsia (7%), and abortion (10%), the data is taken by the West Kalimantan profile data, namely almost 90% of postpartum haemorrhage mothers occur at home because they get delivery assistance by village quacks and 80% of haemorrhage cases are referred to the hospital due to postpartum haemorrhage [5].

In Indonesia, culture is a universal phenomenon. Every society must have its own culture, although its forms and characteristics vary from one society to another [6]. Culture and social systems in the community are part of what contributes to maternal mortality rates in addition to health facilities and services [7]. One of the cultures owned by Indonesia is the Dayak tribe. Dayak culture is one of the "native" tribes that inhabit the island of Borneo, the Dayak tribe is the original inhabitants of the island of Kalimantan, there are no Dayak people on other islands besides Kalimantan. Kalimantan itself is divided into several regions, namely West Kalimantan, East Kalimantan, North Kalimantan, Central Kalimantan, South Kalimantan. However, the Dayak tribe itself is further divided into 405 sub-tribes, each Dayak sub-tribe has its own characteristics of customs and culture that are almost similar according to their respective communities, characteristics, and languages [8].

Care during pregnancy in the Dayak tribe, pregnant women can carry out activities as usual but at 7 months of pregnancy there are several customs that must be carried out, one of which is the Kendit tradition, which is a traditional process that requires pregnant women and their families to provide betel nut and black bracelets which will be prayed for 3 consecutive nights with the aim that the delivery process runs smoothly [9].

The culture of the Dayak tribe has its characteristics in the form of abstinence and care, one of which is during pregnancy, this is still believed by the Dayak tribe itself because it will affect the pregnancy period. Some of the taboos that are still believed by the Dayak tribe are various kinds of taboos such as behaviour, words, and diet, although if seen from a health point of view abstaining from certain foods may not be justified especially when the food is highly nutritious [10]. The purpose of this study was to explore the Cultural Practices of Care During Pregnancy in the Dayak Kanayatn Tribe of West Kalimantan.

2. Materials and methods

This study uses a type of qualitative research with a qualitative research design and uses a descriptive phenomenological approach. The population in this study were 35 pregnant women from Samalantan District, West Kalimantan, with a sample size of 15 participants with an age range of 17-42 years, sampling in this study using purposive sampling. In this study, data were obtained from in-depth interviews and analysed using the Collaizi method, then data processing techniques using the NVivo 12 plus application.

3. Results

3.1. Participant Characteristics

The number of participants in this study was 15 women and the age range of the participants was 17-42 years, the majority of the participant's work was a householder and the final level of education was SD-Bachelor. All participants were pregnant mothers of trimester 1-3.

Table 1 Participant Characteristics

Name	Religion	Age	Education	Occupation	Age of Pregnancy	Pregnant Child to
P1	Catholic	23	Elementary	Housewife	6 month	2
P2	Christian	40	Elementary	Housewife	3 month	6
Р3	Christian	34	Senior High	Housewife	7 month	5
P4	Moslem	34	Junior High	Housewife	6 month	3
P5	Christian	29	Senior High	Housewife	5 month	7
P6	Moslem	17	Junior High	Housewife	8 month	1
P7	Christian	30	Elementary	Housewife	3 month	3
P8	Christian	42	Graduate	Teacher	4 month	3
Р9	Christian	28	Graduate	Priest	8 month	1
P10	Catholic	28	Junior High	Housewife	5 month	2
P11	Catholic	31	Senior High	Housewife	4 month	5
P12	Catholic	30	Elementary	Housewife	5 month	4
P13	Christian	20	Junior High	Housewife	7 month	1
P14	Christian	37	Elementary	Housewife	3 month	4
P15	Christian	41	Junior High	Housewife	7 month	3

3.2. Results of Research Analysis

In this section, researchers will discuss care during pregnancy. Based on the findings in the field, three main themes are obtained: practice of care for pregnancies, abstinence during gestation, and family support. The three themes will be described as follows:

3.2.1. Pregnancy Care Practice

Pregnancy care practice can be understood as a practice carried out based on local communities, both medically and traditionally, with the aim of keeping the foetus in the womb, so that the mother and the foetus are healthy as well as preparing the mother to understand the growing baby that is present in its womb. Pregnancy care practices are divided into two categories: medical care and traditional care.

Medical Pregnancy Care

The medical pregnancy care that is often done is to come to health services such as consultation to the midwife and to the doctor to perform examinations such as ultrasound and get vitamins and blood enhancing drugs from the health services. This is explained by the participant:

- "I have to check the mother every month, if there are complaints, I will check it every time, if we have to expose it, so that nothing unwanted will happen." (P10).
- "I can check the daughter every month" (P13).

Then besides the consultation with the mother, some participants chose to consult with the doctor, this is expressed by some participants:

- "Every month to the doctor for two months or three months" (P8).
- "I check the doctor" (P9).

In addition to consulting the mother and the doctor a few participants also passed the medical examination; the statement was made by the participants.

- "Yesterday I went to the public health centre to see the mother of Ina, checked to find out the condition of my baby with a special device that I don't understand how it sounds crack-crack that ha-ha what is an ultrasound that" (P4).
- "Since the age of 5 months or 6 months yesterday has been doing ultrasounds" (P9).

As for the other medical examination, some of the participants were given vitamins and blood additives aimed at increasing stamina during pregnancy, the following are various expressions from the participants:

- "Requesting vitamins or extra stamina" (P1).
- "Ask the midwife to ask for medication because yesterday asked to be given medication, blood additive, because my blood is low so I asked for medications, keep asking for vitamins to increase stamina. Yesterday I was given four tablets." (P4).

Therefore, many medical examinations have been carried out by pregnant mothers, on the grounds that the examination is safe for the pregnant mother and her baby.

Pregnancy Care Traditionally

Pregnancy care can also be understood as treatment carried out in accordance with local beliefs and customs especially in the tribe of Dayak, tribe Dayak believes that if a woman is pregnant then they will do pregnant treatment like going to the nursery to improve the position of the baby, following the various phrases delivered by some participants:

- "I often ran for the improvement of the child's position in the womb, and the reason is good eh and its reason for the well-being of me and my baby in the uterus." (P1).
- "Yes, I have a spit in the village, my stomach spit because it tastes good when it's all spit" (P4).

In addition to the witch doctor, there are also treatments that are performed using protective media such as nails, pin, and black threads with the purpose of protecting the pregnant mother and her baby, this is expressed by the participants:

- "Yes, because the people of old said he said we were "Dayak" guards if we go out or wherever we have to use pin" (P14).
- "There's pin, this is to take care of the baby and our own bodies" (P4).

Another thing was revealed to the participants that black threads and nails were also often used as protective protections:

• "The black thread was wrapped in the clothes to protect me and my baby" (P4), "Don't forget to take it anywhere and take care of it at all" (P14).

Thus, pregnancy care is still traditionally carried out by the local community with the aim of protecting the pregnant mother and her baby from the influence of evil spirits.

3.2.2. Abstinence During Pregnancy

Abstinence during pregnancy can be understood as a behavior and belief of a custom in the tribe of the Dayak where this is still practiced in various other areas. Abstinence during pregnancy is intended to protect the health of the mother and the baby in the womb so that at the time of delivery goes smoothly. Abortion during pregnancy is divided into two: abortion of deeds and abstinence of food.

Refusal of Action

Refusal of acts can be understood as an attitude that should not be taken by a person on the grounds of avoiding evil things that could threaten him or others around him, it is also done by a pregnant mother of the tribe of the Dayak who still believes in the existence of refusal during pregnancy and one of them is the refusal of actions. The rejection of the act that is still being done, namely not to sit in front of the door on the grounds that it would make the childbirth inappropriate, is expressed by the participants:

• "Sit in front of the door if you say that you shouldn't have a baby that should have come out and entered into the belly again." (P2)

• "Don't sit in the door too so that you will be able to give birth." (P15).

Then there are other things that are not to be sewn, the various expressions of the participants are:

- "The sewing shouldn't be included in the refusal" (P4)
- "But if I refuse to do something like not to sew it, I will do it, but if I don't do it by accident or by forgetting, I'm sure I'll do it right away "ba'sampang", which means that if we've been sewing, we'll apologize to God that I didn't know what to do." (P5).
- "If it's a sewing thing, there's no refusal to do it." (P14)

Besides, there are night baths that should not be done, here's the expression from the participants:

- "You shall not take a bath after six o'clock in the afternoon" (P1)
- "Don't take a shower in the middle of the night if you have a bath in the midnight with a fine spirit" (P15).

As for the other abstinence, not to go out at night and not to wrap a towel on the neck, this was expressed by some participants:

- "Out of the night can't, then licking the towel eee this brother can cause his long placenta usually can lick the body of the baby in the womb, if custom is like the Java people there are 7 months or other such it is not in the tribe of the Dayak, unless the child has been born new there is a ritual of his example like bataa'ah / pain flour if the girl like in giving earrings in her ears is, yaa like that, if like Java who is 7 months, or 9 months it is no " (P8).
- "If you're out at six o'clock at night, you can't be angry." (P10).

Food refusal

Refusal of food can be understood as a habit, culture, or habit that is not allowed to consume certain kinds of food; this is of course found in the Dayak tribe where refusal is still a habit that must be done during pregnancy. As for the unlawful refusal to eat pineapple, this is the statement of the participants:

- "If you refuse to eat at all, it's like eating a young pineapple." (P6)
- "Don't eat like a pineapple if your pregnancy is young and you're going to have a miscarriage." (P8)
- "There are, for instance, if the abstinence from eating from the age of one month of childbirth is not automatically allowed as if the fruit pineapple is not allowed because it affects the womb." (P10).

And besides not to eat pineapple, there is also a recommended abstinence: you shall not eat cinnamon, drink coffee, eat residues of food, and not eat repeatedly, do not eat animals that live in holes, of course it is confirmed by the words of the participants.

- "Hmmm... there must be something I should take care of for the safety of mother and child, if the refusal of food, for example, the residues of food should not be" (P2).
- "Then if I refuse to eat, I also mean to do it like eating cabbage," said the old man, "that's why the baby's eyes can't be opened because his mother often eats cabbages and then his son's eye can't be open, so I'm sorry, keep drinking coffee, don't drink too often." (P8).

Other rejections were also expressed by other participants:

• "The challenge of eating especially if we have to eat filled not over and over again if he repeatedly said that giving birth pain over and again also continued not to eat animals that live in holes for example rats and sharks," (P15).

Thus, the abstinence of food can also affect the health of the mother and the baby and affect the process of childbirth later, it of course depends on each individual who makes the abstention.

3.2.3. Family Support

Family support can be defined as attitudes, acts of acceptance of the family towards other family members, which can be judgmental support and emotional support. Family support is also the help given to other family members by means of goods, services, information and advice that will make the family feel loved, appreciated and welcomed. Family

support is needed in decision-making, in this study some participants revealed that the practice of pregnancy care is also based on family support, husband's support, and self-will.

Parental support

Parental support can be understood as help given by parents in the form of responsibility or advising their children in making decisions, some participants revealed that as long as they do pregnancy care is supported by parents, where the role of parents is essential in advising during pregnancies. Here are some expressions from the participants:

- "Let's ask the family first, let's go to the parents who are older than us." (P10)
- "Following the advice of the parents" (P6).

Thus, the support of parents greatly influences the behaviour of their children in making a good decision during pregnancy with the aim of the safety of the mother and the baby in the womb.

Husband support

In addition to parental support, the husband's support can also motivate and encourage his wife to make moral and internal decisions. The presence of a husband for a pregnant mother can reduce the burden felt and can be invited to discuss the treatment of the chosen pregnancy. Here are some expressions from the participants:

- "We're making another compromise with our husband about pregnancy care" (P10).
- "Both of you are like that with a husband who wants to discuss it" (P11).

Thus, the husband's support is very important during pregnancy because with the support of the husband, the pregnant mother will feel more comfortable when making decisions.

Self-will

Self-will can be interpreted as decisions made by self-willing and guided by their own thoughts and feelings, it is also done by some participants in performing treatment during pregnancy where they make their own decisions to do such treatment. Here's an expression from the participants:

- "Yaaa maybe my own faith also exists" (P1).
- "It's my own will" (P11).

Thus self-determination can also be done by the pregnant mother in making decisions in carrying out care during pregnancy.

4. Discussion

Based on the analysis of the research, the themes related to care during pregnancy are obtained. The themes acquired will be discussed in detail such as practice of care for pregnancies, abstinence during pregnant Ness, and family support.

4.1. Pregnancy Care Practice

Pregnancy care practices are one of the main factors that a pregnant mother needs to pay attention to, in order to prevent the occurrence of complications and deaths during childbirth as well as to know the growth and health of the foetus that is in the womb, pregnancy treatment practice is very important to do because if the practice of pregnant care done inadequately will increase the risk of death [1]. Pregnancy care is important because the pregnancy narrative will teach you how to keep pregnancies healthy and monitored so that the condition remains low risk of complications.

Based on the results of the interviews that have been conducted, the practice of pregnancy care is divided into two, namely, medical and traditional pregnancies. This was expressed directly by some of the participants who said that during pregnancy they frequently checked her contents in health services such as consultations to the midwife and to the doctor, in addition to consultations with health workers, participants also revealed doing medical examinations such as doing an ultrasound and getting vitamins and blood enhancing drugs. The results of this study are also in line with the study [11]. The states that the medical treatment of pregnancy by conducting a pregnant examination is one of the important steps that the pregnant mother should undertake. Pregnancy screening can be done through a obstetrician or a midwife and with a minimum of 4 screening during pregnancy from trimester one to trimester three.

Treatment practices have traditionally also been the choice of pregnant mothers during pregnancy, it was expressed by some participants who said that during pregnant Ness they often do spit on the baby's neck with the pretext of regulating the position of the baby. The results of this study are similar to Arlis [12] which states that some pregnant mothers are still practicing a culture of care during pregnancy by examining the baby's necklace to perform a spit and repair the position of the baby if they feel uncomfortable during pregnant Ness.

In addition to spit on the baby, the participants also revealed the use of protective media during pregnancy such as using needle, nails, and black threads tied to clothes with the pretext of protecting mothers and babies from evil spirits, the expression of the participants is consistent with the study by Juariah [13] which stated that the habits of pregnant women must remain followed, such as wearing a pen, nail, and scissors tied to a pregnant mother's clothing to keep mothers or babies away from unwanted things such as subtle beings and evil spirit. This custom of course has come down after the community, especially in the tribe of the Dayak.

4.2. Abstinence during pregnancy

Refusal is a prohibition that to this day is still believed in some parts of Indonesia. Rejection is believed to protect individuals from malice. According to Rodman (1988: 279), a taboo or abstinence is a social prohibition that focuses on words, objects, actions by a group, culture, or society [14]. During pregnancy, there were two abstentions: the abstinence of acts and the abstention of food, which is still done to this day because of the suggestion of the parents and has been done in order to respect the local customs especially in the Dayak tribe.

The participants revealed that the refusal to do things that should not be done is sewing, not sitting in front of the door, not taking a bath at night, not wearing a towel on the neck, and not going out at night on the grounds of avoiding evil spirits that could threaten the mother and the baby and this refusal was made so that during pregnancy until later delivery went smoothly. The results of this study are in line with the study by Firnanda & Andalas [15] which stated that the denial or prohibition of acts is still being carried out to this day by the community of Tlogorejo, East Java as may not go out during maghrib because it will cause the baby in the womb will die then if out at maghrib will be frightened by evil spirits so some participants choose to be at home alone, then should not be in front of the door on the grounds that it will complicate the process of delivery so this refusal must be obeyed by the pregnant mother. Then there is a prohibition not to stretch a towel in the neck that can cause a child in the womb to be wrapped in a rope, medically this occurs because of the hyperactivity carried out by the baby in the uterus so that it can lead to wrapping of the rope.

The diversity in patterns of consumption of food, especially to pregnant mothers, accompanied by the belief in the refusal of food to certain types of food is still done by pregnant women in some regions of Indonesia, especially in Western Kalimantan, which of course is still a lot done to this day, as well as food refusal that is not allowed to be eaten by the pregnant mother, namely pineapples, cannot eat cabbage, drink coffee, consume residual food, and not eat repeatedly, do not eat animals that live in holes such as mice and sharks. The results of this study are in line with a study by Putri [16] that states that the foods most often avoided during pregnancy are oranges and other fruits that are identical in yellow colour like pineapples that can cause miscarriage. Other research from Siswadi et al. [17] also states that pregnant mothers are prohibited from eating animals that live in holes such as snakes, rats, frogs, and other hot foods that can cause defects in the baby as well as avoid difficulties in childbirth.

Other food rejects should also not eat cabbage, from this study some participants say that if consuming spicy food will cause the baby in the body of the eyes will peel, this expression is in line with the study by Intan [14] which explains that pregnant women are forbidden to consume spiced food because it will affect the condition of the child in the womb.

4.3. Family support

Family support is an attitude, action in giving advice and motivation and acceptance of the family to the family member. Besides, family support is essential in making decisions especially on pregnancy care, in this study some participants revealed that the practice of pregnant care is also based on family support, husband's support, and self-will. This is in line with research by Ananda [18] that explains that family support is crucial during pregnancy because family support can provide information, provide solutions if there is a problem, provide advice and guidance on what the pregnant mother does, which will affect the health of the mother and the baby. The husband's support during pregnancy is also essential, especially in determining the treatment of the choice of pregnancies, the support of the husband in both emotional support, informational support as well as instrumental support that covers with financial, the results of this study are similar to the research's Estuningtyas [19] that states that the support and role of husband is necessary where the role of a husband can provide advice, advice, information and guidance. Family support, in this case, is needed by pregnant women, because mothers have to prepare mentally, physically to face a pregnancy that can put emotional stress or stress on the mother. This family support can be in the form of making mothers check their pregnancies

regularly, helping meet nutritional needs, and providing emotional and spiritual support. The high family support makes a pregnant woman not quickly judge the situation with anxiety because she realizes that there is a family that supports and listens to her outpouring heart [20]. Support from other family members, including financial support and support from health workers, is also needed to monitor pregnant women and their babies' health [21]. In addition, the husband also serves as a problem solver, which means he can solve problems and provide solutions to any problems that occur. The husband's support is useful for the process of pregnancy, childbirth and even breathing which is also the role of the husband can give advice related to care during pregnancies.

5. Conclusion

This study provides an overview of cultural practices of care during pregnancy. Based on the results of the analysis obtained three themes that reveal the care during pregnancy, namely the practice of the care of pregnancies, one of the main factors that the pregnant mother should pay attention to, it is to prevent the occurrence of complications and deaths during delivery as well as to know the growth and health of the fetus that is present in the womb. The pregnancy care practices found are divided into two: medical and traditional. The second theme is abstinence during pregnancy. A refusal is a prohibition that is believed to protect individuals from hazards especially in pregnant mothers who are still abstaining from acts and food. Third theme is family support. During pregnancy, family support is essential, whether it be support from parents or husbands, because the support of parents will have a positive impact on the pregnant mother so that during the pregnancies until later delivery will go well.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

Statement of ethical approval

Researchers have also obtained ethical approval from Ethics Commission of Health Research and Development Sint Carolus School of Health Sciences with number 023/KEPPKSTIKSC/II/2023.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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