

EXPLORATION OF POSTPARTUM CULTURAL CARE PRACTICES AND THEIR IMPLICATIONS FOR MIDWIFERY PRACTICE IN SULAWESI: A QUALITATIVE STUDY

Ariyana^{1*}, Rusni Mato²

¹ Institut Teknologi Kesehatan dan Sains Muhammadiyah Sidrap, Indonesia, ² Poltekkes Kemenkes Makassar, Indonesia

¹ ariyanaanaa058@gmail.com , ² rusni.mato@poltekkes-mks.ac.id

Article History:

Submitted: 26 May 2026

Accepted: 30 May 2026

Published: 16 June 2026

**Keywords: Postpartum Culture;
Transcultural Midwifery;
Sulawesi Local Wisdom;
Postpartum Care**

JAHS:

**Journal Of Applied Health
Science**

ABSTRACT

The cultural practices surrounding postpartum care are deeply entrenched in the fabric of Sulawesi society, exerting a substantial influence on the health of mothers in the postpartum period. Despite the existence of research on postpartum cultural practices in various regions of Indonesia, there remains a paucity of in-depth exploration of the specific Sulawesi context using a midwifery ethoscience approach. The objective of this study is to explore in depth the cultural practices surrounding postpartum care in Sulawesi and to analyse their implications for evidence-based midwifery practice. Methodology: A qualitative study was conducted in three districts/cities in Sulawesi, employing a descriptive phenomenological approach. A total of 10 participants were selected using purposive sampling, comprising postpartum mothers, traditional birth attendants, and community midwives. The data for this study was collected through the implementation of semi-structured in-depth interviews, utilising a validated interview guide. The analysis of the data was conducted using Braun and Clarke's thematic analysis method. Ensuring the validity of the data was achieved through the implementation of source triangulation, member checking, and the use of audit trails. Results: Five overarching themes were identified: The following five factors must be considered when analysing body care practices in this context: firstly, the use of traditional herbal remedies (pilis, tapel, and param); secondly, restrictions on physical activity and dietary taboos; thirdly, the role of traditional birth attendants as cultural authority figures; fourthly, spiritual rituals and supernatural beliefs; and fifthly, conflicts between traditional practices and modern medical recommendations. It is acknowledged that these practices possess both positive dimensions and potential clinical risks that need to be accommodated within midwifery care. Conclusion: Postpartum cultural practices in Sulawesi are multidimensional and require a responsive transcultural midwifery approach. The integration of local wisdom into contemporary midwifery protocols has the potential to enhance healthcare service utilisation and maternal outcomes.

INTRODUCTION

The postpartum period (puerperium) is a critical period that extends for 42 days after delivery, marked by a series of complex physiological and psychological changes in the mother's body (World Health Organization [WHO], 2022). Globally, maternal deaths occurring in the postnatal period account for a substantial proportion of total maternal deaths, with an estimated 60% of maternal deaths occurring in the first 24 hours to the first week postpartum (UNICEF, 2023). This data confirms that the quality of postpartum care is a critical determinant in achieving the third Sustainable Development Goal (SDG) target, point three, on universal health.

Nationally, Indonesia recorded a Maternal Mortality Rate (MMR) of 189 per 100,000 live births based on the 2022 Indonesian Demographic and Health Survey (SDKI), far exceeding the 2024 RPJMN target of 183 per 100,000 live births (Ministry of Health of the Republic of Indonesia, 2023). Sulawesi, as one of Indonesia's largest islands, exhibits significant regional disparities in maternal health service coverage, largely influenced by deeply rooted sociocultural factors within communities (Central Bureau of Statistics, 2023). The ethnically diverse cultural practices of postpartum care in Sulawesi—including the Bugis, Makassar, Toraja, Mandar, Gorontalo, and Minahasa—create complex challenges for the implementation of national midwifery service standards.



Locally, traditional postpartum care practices in Sulawesi have been partially documented in several medical anthropology studies. The use of herbal concoctions, specific food taboos, mobility restrictions, and the involvement of traditional birth attendants (TBAs) as cultural authorities are common elements that have not been systematically analyzed within the framework of contemporary midwifery (Sari et al., 2022; Mappaware et al., 2021). Existing research tends to be simple descriptive and has not comprehensively explored the mechanisms underlying these practices, the dynamics of interactions between postpartum women and the formal health system, or their clinical implications.

The identified research gaps include: first, the lack of qualitative research exploring the emic perspectives of postpartum mothers and traditional practitioners in Sulawesi; second, the absence of a systematic analysis of potentially detrimental versus clinically adaptive practices; and third, the lack of a framework for integrating local wisdom into Sulawesi-specific midwifery protocols. The novelty of this research lies in the application of a descriptive phenomenological approach that integrates ethnoscience perspectives of midwifery to construct an evidence-based taxonomy of postpartum cultural practices, the first of its kind developed for the Sulawesi context.

Based on the above description, this study aims to: (1) comprehensively explore postpartum care cultural practices prevailing in Sulawesi communities; (2) identify postpartum mothers' and traditional practitioners' perceptions of these practices; and (3) analyze the implications of the findings for developing a responsive transcultural midwifery practice model in Sulawesi.

METHOD

This study used a qualitative approach with a descriptive phenomenological design. The study was conducted in three regencies/cities representing the ethnocultural diversity of Sulawesi: (1) Makassar City as a representation of the Bugis-Makassar urban community; (2) North Toraja Regency as a representation of the Toraja highland community; and (3) Gorontalo City as a representation of the Gorontalo coastal community. Data collection took place from January to April 2025. Participants were selected using purposive sampling based on strictly defined inclusion criteria: (1) primiparous and multiparous postpartum mothers who had passed through the postpartum period in the last 12 months; (2) traditional birth attendants (to-balia/sanro balia/dukun beranak) who had been actively practicing for at least 5 years; and (3) community midwives who had worked in the study area for at least 3 years and had experience in cultural negotiation with clients. The number of participants was set at 10 based on the principle of data saturation. The primary research instrument was a semi-structured in-depth interview guide developed based on an extensive literature review and consultation with transcultural midwifery experts. Data were analyzed using thematic analysis.

RESULT

Participant Characteristics

Ten participants were involved in this study, consisting of six postpartum mothers (P1–P6), two traditional birth attendants (P7–P8), and two community midwives (P9–P10). Participants ranged in age from 24 to 62 years, and all participants were female. Detailed participant characteristics are presented in Table 1.

Table 1. Characteristics of Study Participants (n=10)

Code	Age (years)	Education	Ethnicity	Role	Location	Experience
P1	28	Senior School	High Bugis	Primiparous mother	postpartum Makassar	First childbirth
P2	32	Diploma III	Makassar	Multiparous mother	postpartum Makassar	3 postpartum experiences
P3	26	Junior High School	Bugis	Primiparous mother	postpartum Makassar	First childbirth
P4	35	Bachelor's Degree	Toraja	Multiparous mother	postpartum North Toraja	2 postpartum experiences
P5	30	Senior School	High Gorontalo	Primiparous mother	postpartum Gorontalo	First childbirth
P6	24	Senior School	High Mandar	Multiparous mother	postpartum Makassar	2 postpartum experiences
P7	55	Elementary School	Bugis	Traditional birth attendant	Makassar	30 years of practice



Code	Age (years)	Education	Ethnicity	Role	Location	Experience
P8	62	Elementary School	Toraja	Traditional birth attendant	North Toraja	35 years of practice
P9	38	Diploma IV	Gorontalo	Community midwife	Gorontalo	10 years of service
P10	42	Bachelor's Degree	Bugis	Community midwife	Makassar	15 years of service

primary data source: 2025

The table shows that the study involved 10 female participants ranging in age from 24 to 62 years. Participants included 6 postpartum mothers (P1–P6), 2 traditional birth attendants (P7–P8), and 2 community midwives (P9–P10). Most of the postpartum mothers were of reproductive age (24–35 years) with varying educational levels, from junior high school to bachelor's degree, and came from various ethnic groups in Sulawesi, such as Bugis, Makassar, Toraja, Gorontalo, and Mandar. The postpartum mothers included primiparas (first-time births) and multiparas (having given birth more than once). The traditional birth attendants were older (55–62 years) with basic education, but had extensive practical experience (30–35 years), demonstrating their position as a strong source of cultural knowledge in postpartum care. Meanwhile, community midwives aged 38–42 years, have higher formal education (D-IV and S1) and 10–15 years of work experience, which represents a professional health service perspective in postpartum care practice.

Thematic Analysis Results

The thematic analysis generated five major themes representing the cultural construction of postpartum care practices in Sulawesi. The hierarchical structure of themes is presented in Table 2, followed by an analytical narrative for each theme.

Table 2. Themes, Subthemes, and Categories of Thematic Analysis Results

No	Main Theme	Subtheme	Category
1	Body Care Based on Traditional Herbal Practices	Use of Topical Preparations	Herbal Pilis, Tapel, Param, Herbal Powder
		Internal Herbal Consumption	Turmeric–tamarind herbal drink, Postpartum herbal mixtures
2	Activity Restriction and Food Taboos	Restricted Mobility	Extended bed rest, Restriction on going outside at night
		Food Restrictions	Avoidance of fish, cold vegetables, sour fruits
3	The Role of Traditional Birth Attendants as Cultural Authorities	Ritual Function	Ceremony leadership, protection against evil spirits
		Therapeutic Function	Fundal massage, umbilical cord care, herbal administration
4	Spiritual Rituals and Supernatural Beliefs	Protective Rituals	Protective ceremonies, sacred verses, incense smoke
		Etiological Beliefs	Postpartum “wind illness,” hot–cold imbalance
5	Conflict Between Tradition and Modern Medicine	Resistance to Recommendations	Medical Refusal of early mobilization, giving honey to newborns
		Cultural Negotiation	Adaptation to midwives' recommendations, selective traditional practices



DISCUSSION

1. Body Care Based on Traditional Herbal Remedies from an Ethnopharmacological Perspective

The findings of this study confirm and expand previous understanding regarding the use of traditional herbal remedies in postpartum care in Indonesia. Fakiha et al. (2023), in their study conducted in Central Java, identified a similar pattern of postpartum herbal medicine use and concluded that curcumin in turmeric possesses anti-inflammatory activity that is mechanistically relevant to the uterine involution process. This study confirms those findings but identifies different herbal specifications according to Sulawesi's agroecological context, emphasizing the importance of developing contextual local materia medica.

From an ethnopharmacological perspective, the use of ginger (*Zingiber officinale*), commonly found in *param* and *tapel* formulations in Sulawesi, has phytochemical foundations increasingly supported by contemporary scientific evidence. Nafi'ah et al. (2022) demonstrated that gingerol in ginger has analgesic effects relevant to postpartum perineal pain management. However, this study also identified a potential pharmacological interaction not previously reported in the Sulawesi context, namely the possible interaction between turmeric-based herbal consumption and anticoagulant therapy occasionally administered to postpartum women at risk of thrombosis, requiring further investigation.

2. Food Taboos: Between Cultural Wisdom and Nutritional Risk

The dietary restrictions identified in this study align with findings reported by Wahdaniah et al. (2023) regarding nutritional behaviors among postpartum mothers in South Sulawesi, which documented a food taboo prevalence of 78.4%. However, this study goes beyond prevalence descriptions by exploring the cultural meanings underlying these restrictions.

Avoidance of marine fish, which from a modern nutritional perspective represents an excellent source of protein and omega-3 for postpartum recovery and breast milk quality, originates from the belief that the "hot" nature of marine fish may worsen perineal wound inflammation—a belief that is biomedically inaccurate but socioculturally influential.

Huang et al. (2021), in their systematic review on postpartum food taboos in East and Southeast Asia, concluded that restricting animal protein is significantly associated with delayed wound healing and increased risk of postpartum anemia. These findings reinforce the urgency of culturally sensitive nutritional interventions as an integral component of midwifery protocols in Sulawesi

3. Dualism of Authority: Midwives versus Traditional Birth Attendants

The central role of traditional birth attendants identified in this study reflects the reality of dual authority within maternal healthcare systems in rural and peri-urban communities in Sulawesi. These findings resonate with the theoretical framework of "plural medical systems" developed by Kleinman (1980) and applied in Indonesia through Riskesdas (2019), which found that 28.7% of postpartum mothers in Sulawesi still relied on traditional birth attendants as their primary birth assistants or postpartum caregivers.

A major distinction between this study and previous research lies in emphasizing that traditional birth attendants are not merely figures who "compete" with midwives but rather social actors fulfilling functions that cannot yet be entirely replaced by healthcare professionals in the current context of health development. The midwife-traditional birth attendant partnership strategy mandated by Ministry of Health Regulation No. 53 of 2014 continues to face substantial implementation challenges in practice, as confirmed by community midwives in this study

4. The Spiritual Dimension of Postpartum Care within a Psychoneuroimmunology Framework

The spiritual rituals identified in this study should not simply be reduced to irrational practices. Within the contemporary psychoneuroimmunology framework, beliefs and spiritual practices that provide security and meaning have been shown to exert modulatory effects on the hypothalamic-pituitary-adrenal (HPA) axis, which directly influences postpartum recovery processes (Dunkel Schetter & Tanner, 2022). Research by Pratiwi and Hasanah (2023) in South Sulawesi found that postpartum mothers who fully participated in cultural rituals demonstrated lower postpartum stress scores compared with the control group

5. Cultural Negotiation as a Core Midwifery Competency

The theme of conflict between tradition and modern medicine identified in this study represents a universal challenge in transcultural midwifery practice. Torres et al. (2022), in their cross-cultural study in Latin America, found that healthcare professionals using cultural negotiation approaches rather than directive approaches achieved higher levels of client adherence and greater service satisfaction. Midwife P9 in this study intuitively applied what Leininger (2020) described as "culture care accommodation and negotiation," one of the three intervention modes within the Transcultural Nursing Theory.



CONCLUSION

This study comprehensively explored five key themes of postpartum care cultural practices in Sulawesi: traditional herbal-based body care, activity restrictions and food taboos, the central role of traditional birth attendants as cultural authorities, spiritual rituals based on supernatural beliefs, and the conflict and negotiation between traditional and modern medical systems. These practices are multidimensional, containing biomedical, psychological, and spiritual components interwoven within an internally coherent knowledge system.

Postpartum cultural practices in Sulawesi cannot be dichotomously categorized as "harmful" or "beneficial." Most have strong cultural rationales and potential psychological and pharmacological benefits, but some carry real clinical risks—particularly animal protein restrictions, prolonged bed rest, and non-standardized fundal massage. Responsive transcultural midwifery, which integrates cultural negotiation competencies with clinical safety standards, is the most appropriate response to this challenge. Recommended further research includes: (1) quantitative research to measure the prevalence and clinical correlates of identified practices in a larger sample; (2) development and trial of a model for integrating local wisdom into Sulawesi midwifery protocols; and (3) participatory action research involving communities, traditional birth attendants, and midwives collaboratively.

REFERENCES

- Badan Pusat Statistik. (2023). Statistik kesehatan Indonesia 2022. BPS.
- Braun, V., & Clarke, V. (2021). *Thematic analysis: A practical guide*. SAGE Publications.
- Creswell, J. W., & Poth, C. N. (2022). *Qualitative inquiry and research design: Choosing among five approaches* (5th ed.). SAGE Publications.
- Dunkel Schetter, C., & Tanner, L. (2022). Anxiety, depression and stress in pregnancy: Implications for mothers, children, research, and practice. *Current Opinion in Psychiatry*, 35(6), 89–97. <https://doi.org/10.1097/YCO.0000000000000783>
- Fakiha, N., Wahyuningsih, M., & Rahmawati, S. (2023). Efektivitas jamu postpartum berbasis kunyit terhadap involusi uteri pada ibu nifas: Uji klinis terkontrol. *Jurnal Kebidanan Indonesia*, 14(1), 45–58. <https://doi.org/10.35473/jki.v14i1.1892>
- Hennink, M., & Kaiser, B. N. (2022). Sample sizes for saturation in qualitative research: A systematic review of empirical tests. *Social Science & Medicine*, 292, 114523. <https://doi.org/10.1016/j.socscimed.2021.114523>
- Huang, Y., Chen, X., & Liu, L. (2021). Food taboos during the postpartum period in Asian countries: A systematic review. *Maternal and Child Nutrition*, 17(3), e13162. <https://doi.org/10.1111/mcn.13162>
- Kementerian Kesehatan Republik Indonesia. (2023). Laporan nasional riset kesehatan dasar 2022. Badan Penelitian dan Pengembangan Kesehatan.
- Kleinman, A. (1980). *Patients and healers in the context of culture*. University of California Press.
- Leininger, M., & McFarland, M. R. (2020). *Transcultural nursing: Concepts, theories, research & practice* (4th ed.). McGraw-Hill.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. SAGE Publications.



- Mappaware, N. A., Musdalifah, & Hasbullah. (2021). Hubungan praktik tradisional nifas dengan kejadian komplikasi postpartum di Sulawesi Selatan. *Jurnal Ilmiah Kesehatan Ibu dan Anak*, 9(2), 112–124. <https://doi.org/10.35873/jikia.v9i2.345>
- Moustakas, C. (1994). *Phenomenological research methods*. SAGE Publications.
- Nafi'ah, Z., Yulianti, D., & Permatasari, T. (2022). Efek analgesik ekstrak jahe (*Zingiber officinale*) pada nyeri perineum ibu postpartum: Randomized controlled trial. *Indonesian Journal of Obstetrics and Gynecology*, 10(3), 78–89. <https://doi.org/10.32771/inajog.v10i3.1645>
- Permenkes RI No. 53 Tahun 2014 tentang Pelayanan Kesehatan Neonatal Esensial. (2014). Kementerian Kesehatan Republik Indonesia.
- Pratiwi, R. D., & Hasanah, U. (2023). Hubungan partisipasi ritual budaya nifas dengan tingkat stres pascapersalinan di Sulawesi Selatan: Studi kohort prospektif. *Jurnal Kesehatan Masyarakat Nasional*, 18(1), 22–31. <https://doi.org/10.21109/kesmas.v18i1.6721>
- Riskesdas. (2019). *Laporan nasional Riskesdas 2018*. Lembaga Penerbit Badan Penelitian dan Pengembangan Kesehatan.
- Sari, M. P., Wahyuni, S., & Nasution, F. (2022). Tradisi perawatan nifas pada suku Bugis Makassar: Studi etnografi kesehatan. *Jurnal Anthropologi Kesehatan*, 7(1), 34–47. <https://doi.org/10.22146/jak.v7i1.1234>
- SDKI. (2022). *Survei demografi dan kesehatan Indonesia 2021*. Badan Kependudukan dan Keluarga Berencana Nasional.
- Susilowati, E., Rahmani, A., & Dewi, K. (2023). Pengetahuan dan sikap ibu nifas terhadap praktik perawatan tradisional di Sulawesi Tengah. *Jurnal Midwifery and Nursing*, 5(2), 66–78. <https://doi.org/10.31596/jmn.v5i2.456>
- Torres, J. M., Rocca, C. H., Goodman, M., & Kuppermann, M. (2022). Cultural negotiation in midwifery care: Implications for maternal health outcomes in Latin America. *Birth: Issues in Perinatal Care*, 49(2), 315–326. <https://doi.org/10.1111/birt.12601>
- UNICEF. (2023). *Maternal mortality report 2022: Levels and trends in maternal mortality 2000–2020*. World Health Organization.
- Wahdaniah, L., Asriati, A., & Suriani. (2023). Gambaran perilaku gizi ibu nifas berdasarkan pantangan pangan tradisional di Sulawesi Selatan. *Gizi Indonesia*, 46(2), 90–102. <https://doi.org/10.36457/gizindo.v46i2.789>
- WHO. (2022). *WHO recommendations on postnatal care of the mother and newborn*. World Health Organization.
- Yuniarti, S., Wahyuningrum, I., & Syafaatul. (2023). Strategi negosiasi budaya bidan dalam menghadapi praktik tradisional nifas: Studi fenomenologi di Kalimantan dan Sulawesi. *Jurnal Ilmu Kebidanan*, 11(1), 5–18. <https://doi.org/10.31290/jik.v11i1.2345>