INTRODUCTION

Babies with inconsistent and insufficient dietary intake frequently fail to flourish in the month three or four of life. One of the primary causes is that women do not feed their kids breast milk until they are 6 months old, or they introduce breast milk complementary food sooner before 6 months of age. Babies can only be given food in breast milk until they are 6 months old. Hence, mothers who have been given complementary foods earlier (< 6 months) means they are not providing appropriate nutritional intake (Sariy et al., 2018).
The Republic of Indonesia's Ministry of Health 2021 explained in its Performance report that nationally in Indonesia, the proportion of complementary food is still relatively low, which is reflected in the SSGI results, which is only 44.7%; this is because most people still hold close to culture or myths that do not support breast milk complementary food and do not allow pre lacteal feeding when breastfeeding is not smooth (KEMENKES RI, 2021).

Complete breastfeeding coverage in all primary healthcare working locations in Kotamobagu City still needs to be higher or less than the national target of 100% (DINKES Kotamobagu, 2018). Based on the findings of researchers’ observations at six sites in the primary healthcare working area in Kotamobagu City, information is obtained that it is true that currently, there is still a culture where mothers give soft foods that are made by chewing them first, to be given to babies such as fruit, and rice, in the hope that the baby will chew it faster. Information was also obtained regarding milk complementary food, which was given earlier by chewing it first because breastmilk was not smooth; the Kotamobagu people know this as ‘ka’anon inta sinopa’.

The provision of nutritious food for children and families is inseparable from the local community's culture, particularly the provision of complementary foods for breastfeeding, but cultural principles often contradict health principles. The method of giving food to infants is influenced by various societal cultures, including the “papah” culture, which is carried out by parents or baby mothers to be given to their children (Sjarkawi et al., 2018).

This culture is often encountered in various regions in Indonesia, one of which is in Kotamobagu City. Several research results show that the tradition of “papah” food for babies is a tradition that can cause health problems for babies (F. Hidayah et al., 2019). Giving "papah" food can act as a conduit for illness transmission between mother and infant (Sopian et al., 2019). In addition, it was also found that complementary food early in infants can cause stunting at the age of five (L. Fitri & Ernita, 2019). Stunting in toddlers often cannot be realized. The administration of MP-ASI in infancy is that is directly associated with the prevalence of stunting in toddlers (Khasanah et al., 2016).

The culture formed in society is a unity of the community's beliefs, norms, judgments, and perceptions, which becomes a stigma and myth reflected in their attitudes and actions (Pratiwi et al., 2012). One study suggested that the community had a culture of knowledge where complementary feeding would be better if given early to accelerate growth and increase body weight (Sutriana, 2018). An approach or development of attitudes and actions is urgently needed for each individual or family in a community to meet the need for good breast milk complementary food for babies in Kotamobagu City.

Based on the description of the information that has been obtained, research on the Determinants of Community Culture in Providing breast milk complementary food to Babies in Kotamobagu City aims to determine the cultural behavior of the community in providing breast milk complementary food to babies, so that it can provide benefits related to giving MP-ASI that is good for health infants through a Community cultural approach and can be a method of preventing stunting in toddlers.

MATERIAL AND METHODS

A quantitative descriptive approach was utilized in this investigation, using a cross-sectional design, using an observational approach with interview techniques using a questionnaire guide. In this study, the population consisted of all moms with babies aged 6-12 months who were in the working area of all Primary Healthcare in Kotamobagu City, a total of 231 participants. The Slovin formula \(n=N/(1+(Ne \times Ne))\) was used to determine the sample size for this investigation, which
was 148 persons. Data collection on objects was done by interviewing the baby’s parents using a questionnaire. The questionnaire measurement scale used the Likert scale approach (1-5). Data is processed using Odds ratio analysis.

RESULTS AND DISCUSSION

The culture inherent in the community, especially regarding the provision of breast milk complementary food, is a tradition passed down from generation to generation, so it has its own challenges in determining the right time and fulfilling quality nutrition and food. In its culture, the people have customs from their ancestors regarding taboo foods, even though they contain good nutrition (Ibnu et al., 2016).

This research was carried out to determine the dominant aspects of community culture in providing breast milk complementary food and to find alternatives to provide interventions related to providing breast milk complementary food that are better for the health of infants through a community cultural approach. The acquired findings are shown in the tables below.

Table 1. Characteristics of Respondents

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Categories</th>
<th>F (148)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Teenager</td>
<td>25</td>
<td>16,9</td>
</tr>
<tr>
<td></td>
<td>Mature</td>
<td>123</td>
<td>83,1</td>
</tr>
<tr>
<td>Education</td>
<td>Primary Schools</td>
<td>27</td>
<td>18,2</td>
</tr>
<tr>
<td></td>
<td>Junior High Schools</td>
<td>42</td>
<td>28,4</td>
</tr>
<tr>
<td></td>
<td>Senior High Schools</td>
<td>60</td>
<td>40,5</td>
</tr>
<tr>
<td></td>
<td>Diploma</td>
<td>6</td>
<td>4,1</td>
</tr>
<tr>
<td></td>
<td>Undergraduate/</td>
<td>13</td>
<td>8,8</td>
</tr>
<tr>
<td></td>
<td>equivalent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children</td>
<td>&lt;3</td>
<td>99</td>
<td>66,9</td>
</tr>
<tr>
<td></td>
<td>≥ 3</td>
<td>49</td>
<td>33,1</td>
</tr>
</tbody>
</table>

According to the features of those who participated in this survey out of 148 people, most of the mothers were adults (83.1%), while the average education possessed by the majority was in junior high (SMP). High school (SMA) correspondingly, with a distribution of 28.4% and 40.5%, while related to the number of children, most mothers have less than 3 children (66.9%).

Table 2. Cross Tabulation Knowledge of mother's actions in providing MP-ASI

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>The act of giving breast milk complementary food (MP-ASI)</th>
<th>Commons odds ratio (95%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not good</td>
<td>Good</td>
</tr>
<tr>
<td>Not enough</td>
<td>3</td>
<td>23,07</td>
</tr>
<tr>
<td>Good</td>
<td>10</td>
<td>76,93</td>
</tr>
<tr>
<td>Total</td>
<td>13</td>
<td>100</td>
</tr>
</tbody>
</table>

Odds Ratio Estimate = 19,950
Sig OR(P Value) = 0,002 (<0,05)

Table 2 presents this study's findings, indicating that most mothers who demonstrated a high level of understanding when responding to cultural questions also exhibited good practices in providing breast milk complementary food (MP-ASI), amounting to 98.5%. This result is evident
from the high-risk factor value (odds ratio) obtained, which is 19.950, and is highly significant with a P-value less than 0.05. The lowest risk can occur up to 2.981 times, while the highest risk can go as high as 133.533 times.

According to the findings of this study, moms who are well-versed in cultural acceptance strongly influence mothers' actions in giving breast milk complementary food. In contrast, at least mothers with good knowledge of accepting local culture have the lowest chance of acting well 2.981 times in providing breast milk complementary food. In comparison, the maximum opportunity is 133.533 times to provide good breast milk complementary food.

Related research results by Fitri (2021) stated that, in general, mothers have sufficient knowledge regarding breast milk complementary food (MP-ASI); good knowledge greatly influences a mother's actions in providing MP-ASI because it has principles, so it is not easily influenced either from both external and internal aspects (N. Fitri et al., 2021).

Mother's knowledge is the main component of toddler care (Asmi, 2022). Knowledge is the basis of the mother's behaviour; as a result, it has a considerable link to the mother's conduct in providing MP ASI (Lestiarini & Sulistyorini, 2020). The low level of education is one aspect that causes MP-ASI provision to be inadequate (Adhisty et al., 2023).

Table 3. Cross Tabulation Attitudes towards Mmother's actions in giving MP-ASI

<table>
<thead>
<tr>
<th>Attitude</th>
<th>The act of giving MP-ASI</th>
<th>Commons odds ratio (95%)</th>
<th>Lower Bound</th>
<th>Upper Bound</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not good</td>
<td>Good</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bad</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>3</td>
<td>23,07</td>
<td>8</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>10</td>
<td>76,93</td>
<td>127</td>
<td>94</td>
</tr>
<tr>
<td>Total</td>
<td>13</td>
<td>100</td>
<td>135</td>
<td>100</td>
</tr>
</tbody>
</table>

Odds Ratio Estimate = 4.762
Sig OR (P value) = 0.038 (<0.05)

Based on the study's findings in Table 3, a positive maternal response to her culture results in correct breast milk complementary food practices in 94% of cases. This result is evidenced by the high-risk factor value (odds ratio) obtained, which is 4.762 and is highly significant with a P-value less than 0.05. The lowest risk can occur up to 10.90 times, while the highest risk can go as high as 20,813 times.

Table 3 presents this study's findings, indicating that most mothers who demonstrated a high level of understanding when responding to cultural questions also exhibited good practices in providing breast milk complementary food (MP-ASI), amounting to 98.5%. This result is evident from the high-risk factor value (odds ratio) obtained, which is 19.950, and is highly significant with a P-value less than 0.05. The lowest risk can occur up to 2.981 times, while the highest risk can go as high as 133.533 times.

The findings of this study may be regarded as moms who have a positive attitude toward their culture having a substantial enough impact on the mother's actions in correctly providing complimentary meals. In contrast, mothers with a good attitude in accepting the culture have at least 10.90 times the chance to give MP-ASI properly. In contrast, with a good attitude in accepting their culture, mothers have a maximum chance of 20,813 times giving MP-ASI properly.

The mother's attitude determines the quality of assistance in providing breast milk complementary food (MP-ASI) (Lestiarini & Sulistyorini, 2020). In terms of social culture, it is found that the level of good behavior in the community is still relatively low in providing MP-ASI.
(Mulyani, 2023). Most mothers determine MP-ASI independently and process it themselves from local food ingredients and early for particular reasons (Amperaningsih et al., 2018). Some women justified providing MP-ASI at less than 6 months because their babies frequently cry, implying that they are hungry (A. Hidayah et al., 2021).

The attitude shown by a person becomes the motivation to take action (Dewi et al., 2022). So, attention to age appropriateness and children's nutritional intake must be paid attention to in the culture that has been followed so that children's growth and development is ideal. Educational factors influence the mother's attitude in giving breast milk complementary food (Prajayanti, 2022). Counseling can be done to provide MP-ASI which is done inappropriately (Andria, 2021). Mothers with a positive attitude may adapt to the existing culture by providing stimulants for their children's growth and development (Puspitasari & Herdyana, 2022).

**CONCLUSION AND SUGGESTION**

Based on the study's findings, it is possible to infer that the cultural determinants of providing breast milk complementary food (MP-ASI) are in the mother's understanding and attitude. The knowledge aspect is a factor that contributes more than the mother's attitude in local culture towards good complementary feeding practices. Efforts to increase MP-ASI management can be carried out through interventions on the mother's knowledge, either through ongoing counseling or assistance.

**ACKNOWLEDGEMENT**

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**CONFLICT OF INTEREST**

There is no conflict of interest.

**REFERENCES**


