

Silent Legitimacy: How Breadwinner Norms and Communicative Accommodation Shape Food Decision-Making in Low-Income Households Through a Muted Group Theory Lens

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Abstract

Gendered communication inequality in low-income households is often obscured within domestic activities, despite its critical role in shaping household food habits. Women bear the primary responsibility for food provision; however, their voices and knowledge are frequently marginalized due to male dominance. Under conditions of economic constraint, food-related decisions tend to reflect power relations rather than nutritional considerations. This study aims to examine socio-economic conditions, forms of power relations in gendered communication, food decision-making processes, and food habits within low-income households in Banjar Regency, South Kalimantan. The research employs a qualitative approach with a multiple-case study design. Data were collected through in-depth interviews, observation, and documentation, and were analyzed thematically using NVivo 12 Pro. Muted Group Theory serves as the analytical lens to explore patterns of domination, subordination, acceptance, and negotiation that emerge in household food decision-making. The findings reveal that unequal food decisions are not solely a response to economic limitations, but are also shaped

by communication practices embedded within gender-based power relations in low-income households. This study highlights the importance of gender-equitable interventions to promote healthier and more sustainable food practices.

Keywords: *Food Decision-Making, Food Habits, Gender Communication, Low-Income Households, Muted Group Theory*

1. Introduction

Food and nutrition issues remain a major challenge in Indonesia. FAO et al., (2023) have identified nutrition as one of the key targets within Sustainable Development Goal (SDG) 2, which aims to end hunger, achieve food security, improve nutrition, and promote sustainable agriculture, while also serving as a central component across multiple SDGs related to health, education, gender equality, and climate. Data from the Indonesian Health Survey 2023 indicate that 96.7% of the population does not meet the recommended intake of fruits and vegetables, with the figure exceeding 98% in South Kalimantan (Badan Kebijakan Pembangunan Kesehatan Kementerian Kesehatan Republik Indonesia, 2024). Survey findings from the Badan Kebijakan Pembangunan Kesehatan Kementerian Kesehatan Republik Indonesia, (2024) also reveal gender-based differences in the reasons for not consuming fruits and vegetables. Gender-disaggregated findings further reveal that barriers to food consumption are unevenly distributed: while men's constraints are largely preference-based, women face structural limitations such as affordability and access. These patterns indicate that nutritional problems are not merely issues of knowledge or availability, but are deeply embedded in social relations and household dynamics. Consequently, understanding how these inequalities shape everyday decision-making is critical for designing context-sensitive interventions that address not only food availability but also intra-household decision-making processes.

In low-income households, these inequalities are further intensified. Evidence from South Kalimantan shows that low-income households often prioritize husbands' consumption even when wives must reduce their own intake, indicating that food allocation reflects socially constructed priorities rather than purely economic rationality (Zairin et al., 2021). A substantial body of research demonstrates that household food practices are shaped by economic constraints, gender roles, and socio-cultural norms. Fatchiya et al. (2024) explain that cultural norms shape inequalities in the distribution of food portions within families. Feraco et al. (2024) argue that traditional gender role stereotypes position women as primarily

responsible for food management, yet with limited authority in decision-making processes, which are often dominated by husbands.

These findings align with Blum et al., (2023) who argue that women in low-income households may understand the importance of nutritious food yet lack the authority to ensure nutritional adequacy because final decisions remain in the hands of husbands. Ashagidigbi et al., (2022) Similarly, reports that many women in low-income households do not have full control over income and expenditures and also lack “voice” within social and economic spheres, thereby constraining their ability to prioritize food and nutrition expenditures. Collectively, these studies demonstrate that household food practices are shaped by interrelated structural, economic, and socio-cultural constraints.

However, existing studies tend to conceptualize decision-making primarily in terms of resource control or bargaining power, emphasizing economic determinants while under-theorizing the role of communication in shaping these processes. This dominant perspective provides limited insight into the communicative processes through which preferences are expressed, negotiated, or suppressed in everyday domestic interactions.

In contexts where overt conflict is minimal, inequality may persist through subtle communicative practices such as silence and routine compliance dimensions that remain underexplored in existing literature. The silencing of women has begun to be explicitly addressed through the lens of *Muted Group Theory*, with Setyaningrum (2025) arguing that women are often muted not only through explicit prohibitions, but also through symbols and traditions that have become normalized within society. However, Muted Group Theory (MGT) remains limited in household-level food practices, particularly in non-Western, low-income contexts where silence may also function as a pragmatic adaptation rather than solely as subordination. Current research lacks a clear and systematic explanation of how communication actively shapes, reinforces, or transforms food decision-making processes.

This reveals a critical gap in the literature, the lack of an analytical framework that treats communication not merely as a channel, but as a constitutive mechanism shaping food decision-making outcomes. This study aims to analyze how gendered communication dynamics and power relations shape food decision-making in low-income households. Specifically, it examines how communication mediates the translation of economic constraints and cultural norms into everyday food-related decisions, using Bincau Village as a theoretically relevant case where poverty, patriarchal norms, and nutritional vulnerability intersect.

2. Method

This study employed a qualitative approach within a constructivist paradigm to understand reality as constructed and interpreted by participants through an in-depth exploration of their experiences and perspectives (Cresswell & Cresswell, 2023). The research employs a multiple case study design to examine how gendered communication dynamics, power relations, and food decision-making practices are constructed across differing household contexts. The study was conducted in Bincau Village, Banjar Regency, South Kalimantan Province. This site was selected due to the Banjar Regency having the highest poverty rate in the province, with 22,062 individuals classified as poor (Pemerintah Kabupaten Banjar, 2024), while Bincau Village has the highest number of households categorized as extremely poor (decile 1), with a per capita monthly income ranging from IDR 300,000 to IDR 500,000. This site was selected not only because of its high poverty rate, but because it represents a theoretically relevant setting where economic precarity, patriarchal household norms, and limited access to nutritious food intersect in ways that make gendered food decision-making particularly visible. The research was conducted from October to December 2025.

The data consist of both primary and secondary sources. Primary data were collected through semi-structured in-depth interviews with nine married couples, selected using purposive and snowball sampling techniques. Participants were purposively recruited based on the following criteria: (1) legally married couples residing in Bincau Village, (2) classified as low-income households according to village poverty records and/or social assistance eligibility, and (3) representing variation in socio-economic characteristics, including poverty decile, household income, employment status, education, household composition, and the presence of vulnerable family members, such as pregnant women with chronic energy deficiency, children with disabilities and stunting. These indicators were verified through cross-checking self-reported data with local administrative and health records. The detailed criteria and analytical rationale for informant selection are presented in Table 1 below.

Table 1. Criteria and justification of informants

No	Informant Criteria	Justification
1	Married couples from low-income households (Decile 1 category)	Represent primary actors in household food management, providing empirical insights into food access, decision-making processes, dietary practices, and gender relations under

No	Informant Criteria	Justification
2	Married couples from low-income households (Decile 1) with children	conditions of economic constraint. Enables examination of how the presence of children shapes food-related priorities, intra-household allocation, and decision-making dynamics.
3	Married couples from low-income households (Decile 5 category)	Serves as a comparative group to capture variation in food decision-making practices and gender relations under relatively less severe economic constraints.
4	Married couples from low-income households (Decile 1), with educational attainment below primary school completion	Reflects how limited educational attainment intersects with gendered role expectations and shapes everyday food management practices.
5	Married couples from low-income households (Decile 1), with a senior high school education	Allows examination of how higher educational attainment may influence spousal communication patterns, food-related negotiation, and household consumption practices.
6	Married couples from low-income households with stunted children	Provides insight into the relationship between socio-economic conditions, food consumption patterns, and child nutritional outcomes.
7	Married couples from low-income households living in extended family arrangements (with parents/in-laws or siblings)	Captures more complex household dynamics, particularly collective decision-making, role negotiation, and food distribution in multi-generational settings.
8	Married couples from low-income households with vulnerable family members (chronic illness, elderly, or disability)	Highlights how caregiving responsibilities shape food prioritization and resource allocation under conditions of vulnerability.
9	Married couples from low-income households (Decile 1),	Enables analysis of how gender relations and household norms

No	Informant Criteria	Justification
10	with wives experiencing pregnancy and Chronic Energy Deficiency (CED) Village Head	influence maternal nutritional practices under conditions of heightened vulnerability. Provides an institutional perspective on local governance, social assistance programs, and structural support mechanisms affecting low-income households.
11	Community health workers (Poskesdes Bincau)	Offers insights into local health conditions, dietary patterns, and barriers to accessing health services from a frontline service perspective.
12	Community food cadres (Poskesdes Bincau)	Provides complementary perspectives on nutritional status, food practices, and community-based nutrition interventions.
13	Nutrition cadres (Poskesdes Bincau Village)	Enriches the analysis with localized perspectives on nutritional status, dietary practices, and socio-cultural factors shaping eating behavior within the community.
14	General practitioner (Poskesdes Bincau Village)	Provides broader clinical insights into the general health conditions of the village population, complementing household-level findings.
15	Representative from the Regional Office of Social Affairs, Women's Empowerment, Child Protection, Population Control, and Family Planning (Dinsos P3AP2KB)	Contributes a policy-level perspective on food assistance programs, women's empowerment initiatives, and nutrition-related interventions implemented at the regional level.

Snowball sampling was subsequently employed to identify additional households with contrasting characteristics through referrals from initial participants and community gatekeepers. Recruitment ceased when thematic saturation was reached, indicated by the absence of substantively new themes in subsequent interviews. In addition, in-depth interviews and

group interviews were conducted with key informants, including the local Village Head of Bincau, government officials, community leaders, and health workers. Secondary data include official reports, statistical data, and policy documents.

Interviews lasted approximately 60 – 90 minutes and were conducted in participants' homes. Husbands and wives were interviewed both jointly and separately, where appropriate, to capture shared and divergent accounts of food-related communication and decision-making. The interview guide was developed from core constructs of Muted Group Theory, including communicative dominance, subordination, accommodation, negotiation, and silencing, while remaining sufficiently open to allow emergent issues to arise during interviews.

All interviews were audio-recorded with consent, transcribed verbatim, and analyzed using thematic analysis supported by NVivo 12 Pro. Analysis followed stages of transcription, coding, categorization based on prior codes, and the identification of key themes grounded in the study's theoretical constructs (Miles et al., 2014). Coding employed a hybrid deductive and inductive approach. Deductive sensitizing concepts from Muted Group Theory informed the interview protocol and served as an initial sensitizing framework. However, formal coding began inductively through open coding of participants' narratives to preserve emergent meanings grounded in the data. Codes were then iteratively grouped through axial categorization and cross-case comparison to develop higher-order themes.

To enhance analytical rigor, coding decisions and thematic development were regularly reviewed through peer debriefing sessions within the research team. Initial coding was conducted by the principal researcher and independently reviewed by two co-authors during peer debriefing sessions, consistent with constructivist qualitative methodology. Validity in qualitative research refers to the extent to which findings are considered accurate by the researcher, participants, and readers (Creswell & Miller, 2000; (Cresswell & Cresswell, 2023). To ensure validity, this study employed source and method triangulation, prolonged engagement in the field, and peer debriefing. Specifically, triangulation involved comparing accounts across husbands, wives, and key informants, as well as cross-checking interview findings with observational notes and secondary local records.

The researcher's positionality was explicitly considered throughout the study. The principal researcher, a native of South Kalimantan, occupied a position of partial insider status by sharing cultural and linguistic familiarity with participants while maintaining analytic distance

as an academic researcher. This facilitated rapport and participant openness while requiring reflexive awareness of potential over-familiarity. Reflexive memoing and regular team discussions were therefore conducted throughout data collection and analysis to identify assumptions, interrogate interpretations, and minimize bias.

Figure 1 presents the methodological workflow of this study, outlining the progression from theoretical framework development and research design to site and participant selection, data collection, thematic analysis, and conceptual model development. The figure clarifies the procedural and analytical sequence underlying the study, thereby enhancing transparency in the research design and implementation.

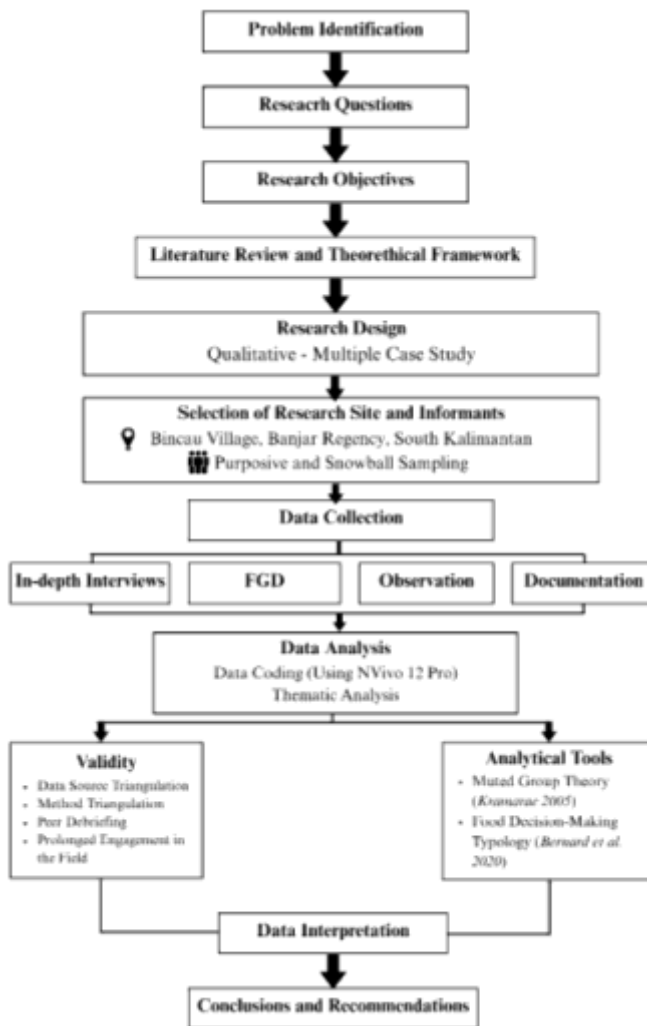


Figure 1. Research Design Chart

3. Results

Food decision-making in low-income households in Bincau Village involved multiple factors beyond economic constraints. The following section presents empirically grounded patterns of food decision-making as they emerge from participants' accounts across cases. Results of in-depth interviews describe not only who makes food-related decisions, but also how these decisions are communicated, negotiated, accepted, or normalized in everyday life. Thematic analysis identified four recurrent empirical patterns across cases: (1) husbands' preferences as the primary reference in food selection, (2) wives' limited decision-making authority despite managing daily food preparation, (3) silence and self-adjustment in response to food preference differences, and (4) selective negotiation under more egalitarian or resource-stable household conditions. These patterns varied across households depending on economic stability and communication dynamics.

3.1 Husband-Centered Food Preferences as the Primary Reference in Household Food Decisions

Food decision-making in many low-income households in Bincau Village was primarily organized around husbands' food preferences. Across most cases, these preferences served as the main reference for determining meal selection, food purchasing, and portion allocation. This pattern was particularly evident in households where husbands were the primary income earners and controlled household expenditures.

In decile 1 households, wives were responsible for purchasing and preparing food but did not independently determine menu choices. Instead, food decisions were commonly preceded by consultation with husbands, either through direct questioning or by anticipating their preferences based on routine patterns. Wives' roles in food management were largely operational, focusing on execution rather than decision-making.

This pattern varied across households based on differences in economic contribution and control over household expenditures. In households experiencing severe economic constraints, particularly those in the lowest income decile, wives reported consistently deferring to husbands' preferences due to their dependence on husbands' income. In contrast, in relatively more economically stable households, including those in higher income categories such as decile 5, wives were more likely to express preferences or provide input during decision-making, although final decisions remained aligned with husbands' and children's preferences. The following statement from an informant in a decile 1 low-income household illustrates this condition:

“Aku takuni ke bapaknya handak apa, kada bisa pang sesuai keinginanku sorang. Mbah duitnya datang dari inya aja, aku kada becari. Wadai-wadai gin takuni sidin apa yang dikandaki.”

“I ask my husband what he wants to eat; it is never based on my own preference. Since the money comes only from him, and I do not work, even for snacks, I ask what he wants.” (Mrs. SHN, 56 years old, low-income household, decile 1, unemployed wife)

Observations during fieldwork further showed that wives routinely asked husbands about specific meal choices, including types of dishes and portion sizes. In several households, wives asked whether to prepare particular vegetables and how much should be cooked. For example, wives explicitly ask whether to prepare wild water spinach or stir-fried eggplant, and whether one or two eggplants are needed.

During meals, wives typically serve food and drinks to their husbands first, while they eat afterward with the remaining portions. Wives also explicitly ask whether the portion of rice prepared for their husbands is sufficient. In these households, no explicit orders or prohibitions toward wives were observed. However, husbands' preferences were consistently treated as the primary reference in decision-making. Field observations further showed that cooking and food-serving activities were the main context in which these practices occurred.

Variation across cases shows that this pattern was most pronounced among households experiencing severe economic precarity, including those with pregnant women experiencing Chronic Energy Deficiency (CED); wives rarely expressed their own food preferences, particularly in situations of economic constraint. In such contexts, their input was mainly related to food preparation and cost considerations, rather than determining menu choices.

In contrast, in households with relatively more stable economic conditions, including those categorized in higher income deciles, such as decile 5, wives were more likely to express food preferences or provide input during decision-making processes. In these households, decision-making was relatively more shared. When side dishes were insufficient, husbands and wives were observed to share food portions, while prioritizing the nutritional needs of their children. Despite this increased involvement, wives' preferences generally remained secondary to those of husbands and children. Overall, across cases, husbands' preferences remained the primary reference in food decision-making, with variation in

wives' involvement observed in relation to differences in economic stability and household resource control.

3.2 Wives' Limited Decision-Making Authority Despite Managing Daily Food Preparation

In-depth interviews show that wives were primarily responsible for managing all daily food-related activities, including purchasing ingredients, preparing meals, organizing portions, and ensuring that all family members were fed. However, across cases, wives' roles did not include decision-making authority over menu selection, consumption priorities, or food distribution.

Across households, wives consistently described their role as carrying out food-related decisions rather than determining them. Decisions regarding menu choices and food allocation were commonly aligned with husbands' preferences, even though wives were responsible for executing these decisions in practice. This pattern was particularly evident in households where wives were economically dependent on husbands and engaged in full-time domestic roles.

In these households, food-related decisions were typically preceded by consultation with husbands or followed routine patterns of husbands' preferences observed in everyday practice. Wives reported that they rarely made independent decisions regarding food choices and instead followed decisions that had already been established within the household. One participant explained:

"Biasanya laki-laki yang menentukan menu makanan, hanya aku menemukannya ke paman sayur. Inya yang begawi gasan serumahan jua, amun bini nya dirumah aja meurus anak lawan rumah."

"Usually, the husband decides the menu, and then I buy the ingredients from the vegetable vendor. He is the one who works for the household, while the wife stays at home taking care of the children and the household." (Mrs. NRT, 26 years old, low-income household with a pregnant woman experiencing CED)

Similarly, another participant stated:

"Tadi pang duitnya dari inya, aku kada meingkuti duit, minta bila ada yang ditukar aja di paman sayur. Jadi mengumpati abahnya aja. Bila ke mantri gin kadang bila abahnya aja menyuruh."

"All the money is held by my husband; I do not manage any money. I only ask when I need to buy ingredients from the vegetable

vendor. So I just follow my husband's preferences. Even for going to a health worker, it depends on whether he tells me to go." (Mrs. SHN, 56 years old, low-income household, decile 1, unemployed wife)

Field data further show that wives' involvement in decision-making was often limited to implementing decisions, rather than determining them. In everyday interactions, wives described following their husbands' decisions without engaging in extended discussion or proposing alternative options. Across cases, similar expressions such as "final decisions made by the husband," "absence of negotiation," and "prioritization of husbands" were repeatedly reported, indicating that wives' limited involvement in decision-making authority was consistently reported in households where husbands were identified as the primary income earners.

Variation across cases indicates that this pattern was more pronounced in households with limited economic resources and where wives had no independent income. In these contexts, wives reported that their food-related decisions were limited to the resources allocated by their husbands. In contrast, in households where wives contributed economically, some degree of input was observed, although decision-making remained primarily oriented toward husbands' preferences. Overall, wives were primarily responsible for managing daily food preparation, while their involvement in decision-making and in expressing preferences remained limited. Decision-making authority over food choices was largely centered on husbands across different household conditions.

3.3 Silence and Self-Adjustment as Common Responses to Food Preference Differences

Across many low-income households, wives described accommodating husbands' food preferences and household consumption priorities without overt disagreement. Food-related decisions were commonly carried out without open conflict, without explicit negotiation, and were described as routine household practices.

Wives frequently reported adjusting their own food consumption in response to household conditions. Common practices included eating after other family members, reducing their own portions, or accepting whatever food was available. These actions were described as part of everyday routines. Many wives described the distribution of food as "already fair," and stated that it had "always been this way," indicating that these practices were treated as normal and were not questioned. This pattern is illustrated by one wife from a decile 1 household:

“Sebaharian sudah kaya itu, puluhan tahun sudah dilalui. Kada pernah bemasalah pang, ada nya itu aja kada kawa ai. Dan memang suami harus didahulukan karena inya yang becari jadi umpat aja. Kayaitu jua kuitan lawan nini bahari, abahnya aja dulu mamanya bedudi.”

“It has always been like this for years, even decades. There has never been a problem; I just accept what is available. The husband must be prioritized because he is the one who earns the income, so I simply follow. It was the same with my parents and grandparents, fathers were served first, and mothers followed.” (Mrs. SHN, 56 years old, low-income household, decile 1, unemployed wife)

This statement reflects that wives described not expressing disagreement and following established household practices. Expressions such as “it has always been this way” and “I simply follow” were frequently repeated. Wives also reported remaining silent and not expressing alternative preferences when differences in food choices occurred. Instead of proposing different options, they described following existing decisions and adjusting their behavior accordingly. Even when food was limited, portions for husbands were often set aside first before being shared with other family members.

Another pattern observed across cases was the prioritization of household expenditure on cigarettes over food. In several households, cigarettes were purchased first, while food purchases depended on the remaining available income. Wives stated that they were aware of the negative health impacts of smoking and reported not prohibiting it due to concerns about the husband’s emotional response. Participants reported that they did not intervene in these spending decisions and adjusted household food purchases accordingly. One participant stated:

“Amun bapak ni inya nang penting nukar rokok dulu. Amun pakai iwak pakai duit nang ada aja bisa nukar apa. Inya jua pang nang menyandang penyakitnya kena. Mun aku tangati kalopina nang kaya apa yu, kalopina apa-apa pulang. Rokok ngini sama aja lawan nginum banyu kopi, mun kada ditulusakan kalopina kenapa-kenapa pulang inya.”

“For my husband, buying cigarettes is the priority. Food, such as fish, depends on whatever money is left. He will bear the health consequences himself. If I forbid him, I worry that something might happen. Cigarettes are like coffee; if he cannot have them, I am afraid

it might affect him.” (Mrs. SHN, 56 years old, low-income household, decile 1, unemployed wife)

Field observations also showed that food purchases were adjusted after cigarette expenses were prioritized. These patterns were more frequently reported in households with limited economic resources, particularly among decile 1 households. In these contexts, wives described adjusting food consumption and remaining silent more consistently.

In decile 1 households with lower educational backgrounds, husbands were reported to prioritize daily expenditure on cigarettes of approximately IDR 30,000, while the wife described that the same amount could be used to provide sufficient and better-quality food for the entire family. Despite this difference in perspective, food purchases were adjusted based on the remaining income.

In contrast, in households with relatively more stable economic conditions or those with children with disabilities, this pattern was not observed. In these cases, husbands were reported not to smoke, and food-related decision-making involved more equal discussion between husbands and wives. Overall, wives described responding to differences in food preferences through silence and self-adjustment. Across cases, food-related decision-making occurred without explicit negotiation, with wives responding through silence, following existing decisions, and adjusting their consumption.

3.4 Negotiation Emerges Selectively Under More Egalitarian or Resource-Stable Conditions

Although most low-income households in Bincau Village exhibited husband-centered food decision-making, a smaller number of cases reported the presence of negotiation between spouses. These instances were not observed consistently across households and appeared only in specific situations. Negotiation was reported in households with relatively more stable economic conditions, in households with higher educational attainment, and in situations involving specific needs such as children’s health or caregiving demands.

In households with relatively more stable economic conditions, such as those with children with disabilities, those categorized in decile 5, and those with higher educational attainment, food-related decisions were sometimes discussed collectively, particularly when prioritizing children’s needs or health conditions. Negotiation took the form of brief discussions, suggestions of menu options, and small compromises rather than extended deliberation. Wives reported being able to propose food choices in certain situations, particularly when related to children’s needs or health

considerations. However, across cases, these discussions did not always result in equal decision-making, as final decisions often remained aligned with husbands' and children's preferences.

Examples of shared decision-making were found in decile 5 households, particularly regarding meal order and portion distribution between husbands and wives, as illustrated by the following accounts from decile 5 low-income households:

"Pakai makan, abahnya kada harus didahulukan, makanan aja bedehulu. Kalau lauk sedikit, biasanya yang penting anak dulu; saya berbagi dengan istri."

"In terms of meals, the husband does not always have to be prioritized; what matters is that the children eat first. When food is limited, we prioritize the children, and my wife and I share the remaining portions." (Mr. SPR, 38 years old, low-income household, decile 5, higher income and employment stability)

"Kami lima ikung, makan sama-sama, sedikit sorang bebagi lawan anak jua yang penting anak dapat semua lauknya."

"There are five of us, and we eat together. We share the food equally with the children, ensuring that they all receive a portion." (Mrs. MHY, 36 years old, low-income household, decile 5, wives contributing income through jasmine garland-making)

Participants described practices such as eating together, prioritizing children, and sharing food portions within the household. Field observations also showed that in these households, food-related decisions were preceded by short conversations, where both spouses expressed preferences before reaching an agreement. Furthermore, in households with higher educational attainment (senior high school or equivalent), participants reported that food-related decisions were sometimes discussed in relation to knowledge about food and nutrition.

"Kada, justru bapaknya yang lebih tahu dan selektif soal makanan nih, sayuran, tahu, tempe, dan buah tuh bapaknya lebih suka. Jadi ulun umpat bapaknya aja, karena sidin lebih tahu."

"In fact, my husband is more knowledgeable and selective about food, such as vegetables, tofu, tempeh, and fruits. I tend to follow his choices because he understands better what is healthy." (Mrs. FTR, 47 years old, household with higher educational attainment)

In this case, the participant described following her husband's food choices after discussion. Variation across cases shows that negotiation was

more frequently observed in households with relatively stable economic conditions, households with higher educational background, and households with specific needs, especially children’s health or disability. In contrast, in households experiencing severe economic constraints (decile 1), negotiation was rarely reported. In these households, decision-making tended to follow established patterns without discussion, and wives described following decisions directly. Overall, negotiation in food decision-making was present but limited, occurring only under specific household conditions and not as a dominant pattern across low-income households. To clarify the relationships across the identified themes, Figure 2 presents the empirical flow of household food decision-making.

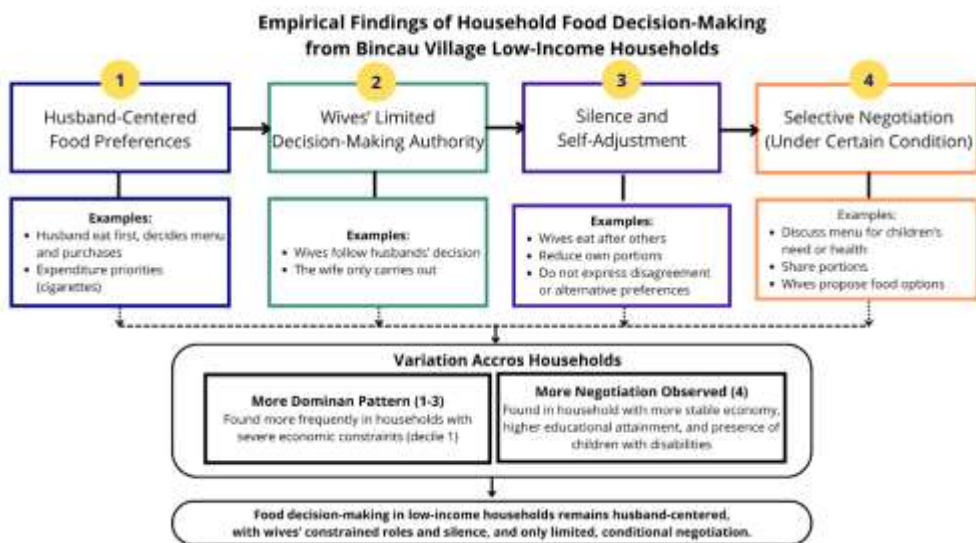


Figure 2. Empirical flow of household food decision-making

Figure 2 shows that food decision-making in low-income households is primarily structured around husbands’ preferences, which serve as the main reference for food selection, purchasing, and allocation. Although wives are responsible for managing daily food-related activities, their role is largely limited to implementing decisions rather than determining them. Differences in food preferences are commonly managed through silence and self-adjustment, with wives adjusting their consumption and not expressing alternative choices. Negotiation is observed only in a small number of cases and occurs under specific conditions, such as more stable household resources or when addressing children’s needs. Overall, the figure demonstrates a consistent pattern in which decision-making remains

predominantly husband-centered, with limited variation in wives' involvement across households.

4. Discussion

The findings indicate that food decision-making in low-income households in Bincau Village is shaped not only by material scarcity but also by communicative power relations that legitimize who is entitled to define household consumption priorities. To interpret these dynamics, this study employs Muted Group Theory (MGT) as an analytical lens to examine how gender norms structure communicative legitimacy within domestic settings. Kramarae (2005) argues that Muted Group Theory (MGT) highlights inequalities in the articulation of experiences between dominant (men) and subordinate (women) groups. The dominant position limits women's access to communication, particularly in public spheres. Barkman (2018) further identifies the core principles of Muted Group Theory as domination, subordination, acceptance, and resistance or change.

4.1 Husbands' Dominance in Food Decision-Making, Menu Selection, and Food Distribution

This study examines how gendered communication dynamics and power relations shape food decision-making in low-income households, particularly how authority over food choices is established and maintained in everyday interactions. The findings indicate that husbands' dominance in food decision-making is not merely interpersonal but constitutes a socially legitimized form of communicative power shaped by gender norms and economic dependency. In this context, poverty operates not only as a material constraint but also as a symbolic mechanism that defines who is entitled to speak, decide, and set household priorities. Drawing on Muted Group Theory, this situation illustrates how the dominant group (husbands) holds greater power in defining the "rules of communication" within the household. Rather than being excluded entirely, wives engage through routine communicative practices such as asking, confirming, and aligning with established preferences, which reinforces male-centered authority in everyday decision-making.

Gendered communication inequality in food decision-making is further institutionalized through the division of spousal roles perceived as "natural" and "appropriate." The narrative that "the husband works while the wife stays at home to care for children and the household" functions as a justification that reinforces this inequality. The ideal role of a wife is constructed as one who is compliant, accepting, and supportive of her husband's decisions without questioning them. This finding extends prior

literature by showing that food-related power is exercised not only through control of resources but also through the normalization of authority within communicative routines, such as asking husbands' preferences first, prioritizing their portions, and aligning menu choices with their tastes.

These findings are consistent with previous studies showing that men's control over household resources is closely linked to decision-making authority in food and nutrition (Ashagidigbi et al., 2022; Bukachi et al., 2022). Similar to these studies, husbands in this study were prioritized in food allocation and financial decisions. However, this study extends prior research by demonstrating that such authority is not only exercised through resource control but is also reproduced through everyday communicative practices, including routine consultation, serving order, and implicit agreement.

Importantly, the findings reveal that what appears as "family agreement" may reflect a form of pseudo-consensus, where decisions align with husbands' preferences without an equal process of deliberation. This suggests that gender inequality in food decision-making is reproduced not through explicit restriction, but through the normalization of everyday communicative practices that position wives as implementers rather than decision-makers.

While Muted Group Theory helps explain how communicative dominance operates, the findings also indicate that wives' responses cannot be understood solely as passive muting. Instead, wives' compliance reflects pragmatic adaptation to economic dependency and relational interdependence, where maintaining household stability becomes a rational strategy under constrained conditions. No evidence was found of open negotiation or dialogue initiated by wives regarding nutritional priorities or their own needs.

This also suggests that communicative authority is shaped not only by gender norms but by locally embedded expectations that link financial provision to decision legitimacy. This calls for caution in applying Muted Group Theory uncritically, as a framework developed in Western feminist contexts may not fully capture how authority, obligation, and reciprocity are culturally negotiated within Indonesian household relations.

Overall, husbands' dominance in food decision-making in Bincau Village is best understood as a communicatively reproduced form of authority embedded within the intersection of structures of patriarchy, economic dependency, and culturally legitimized breadwinner norms, rather than as a simple outcome of individual preference or overt male control. These findings contribute to practice by highlighting that interventions aimed at improving household nutrition need to address not

only food access but also intra-household communication patterns, including who participates in decision-making and how preferences are expressed and negotiated. This can be operationalized through couple-based communication sessions that facilitate joint decision-making on food, guided household dialogue exercises on weekly menu planning and budgeting, and community-based forums that actively engage men in discussions on nutrition and family needs.

4.2 Wives' Subordination in Household Food Decision-Making

This study examines how wives' subordination in food decision-making is produced and maintained within household communication processes. The findings indicate that wives' subordinate position is not solely a result of husbands' authority but emerges from the intersection of economic dependency, normative expectations, and everyday communication practices that shape whose preferences are recognized as legitimate within the household.

Rather than operating solely through resource control, subordination is reproduced through communicative arrangements in which wives participate in decision-making primarily as implementers, while husbands' preferences remain the primary reference point. This pattern is reinforced by the social legitimacy of breadwinning, where financial provision implicitly grants authority to define food priorities, even in the absence of explicit directive communication. At the communicative level, wives' participation is structured through internalized expectations to accommodate, adjust, and prioritize others' needs. In this context, silence, acceptance, and self-adjustment function as key communication mechanisms through which wives participate in decision-making without explicitly articulating their preferences.

These findings align with previous studies showing that women's limited control over resources constrains their decision-making power. Women's subordination persists because women internalize the notion that men remain the ultimate decision-makers. Women also act merely as implementers of decisions, even when those decisions are not in their favor (Dahal et al., 2022; Niemann et al., 2024). However, while prior research often frames subordination as a lack of voice, this study reveals that wives remain communicatively active through indirect and adaptive forms of participation. This difference is likely due to the qualitative approach employed, which captures subtle, everyday communication practices that are often overlooked in quantitative research.

From the perspective of *Muted Group Theory*, this form of subordination can be interpreted as structural silencing that is not always visibly apparent. The language of household decision-making is

constructed within patriarchal norms, shaping which voices are prioritized. Importantly, this study extends the theory by showing that wives' agency operates within narrow and conditional communicative spaces rather than being entirely suppressed.

Silence in this context does not indicate absence of communication but represents a patterned form of communicative adjustment, where disagreement is managed through non-verbal alignment rather than explicit negotiation. In everyday communication practices, wives' voices are often not explicitly articulated, as they tend to remain silent and adjust to existing decisions. Even when they disagree or hold different preferences, wives choose to accommodate in order to continue fulfilling their roles in food provision according to their husbands' preferences. The findings also suggest that Muted Group Theory alone may not fully capture the complexity of this dynamic, because wives are not entirely "voiceless"; instead, their agency operates within narrow and highly conditional boundaries.

The normalization of this pattern suggests that subordination is sustained not only by male authority but also by shared communicative expectations that define appropriate roles within the household. As a result, unequal decision-making is reproduced through routine interaction without requiring explicit enforcement.

Accordingly, wives' subordination in this study is best understood not as simple silence, but as a contextually embedded form of constrained participation shaped by the intersection of poverty, gender norms, and culturally mediated expectations of household order. These findings suggest that improving household nutrition requires not only addressing economic constraints but also transforming intra-household communication practices, including promoting joint decision-making, expanding women's communicative space, and encouraging more inclusive everyday dialogue around food.

4.3 Wives' Acceptance as an Adaptive Strategy to Economic Constraints and Household Harmony

This study examines how wives' acceptance in food decision-making is produced and sustained through everyday household communication under conditions of economic constraint. These findings indicate that acceptance operates not merely as a consequence of domination, but also as a pragmatic strategy through which women navigate unequal power relations while preserving everyday relational harmony. Rather than requiring explicit instruction, decision-making operates through implicit communicative patterns, where wives comply without verbal negotiation,

indicating that authority is reproduced through routine interaction rather than overt enforcement.

In this context, silence and acceptance operate as patterned forms of communication that allow decisions to proceed without conflict, while simultaneously limiting the articulation of alternative preferences. This finding extends prior studies such as Bell et al., (2022) which emphasizes women's material sacrifices, by showing that such adjustments are also embedded in communicative routines, including non-verbal alignment and the absence of expressed disagreement. Thus, acceptance is not only behavioral but communicative, structuring how decisions are enacted and sustained.

Acceptance, silence, accommodation, and coping strategies in household food practices among low-income individuals further indicate that acceptance does not always manifest explicitly. Instead, it operates subtly through the internalization of values, normalization of long-standing practices, and economic rationalization. Consistent with Hatcher et al., (2022) Women's acceptance can reflect rational responses to economic vulnerability. However, this study differs by demonstrating that acceptance operates through subtle communicative practices rather than solely through structural constraints. This difference likely arises from the qualitative approach used, which captures micro-level interaction patterns that are often overlooked in survey-based studies.

From the perspective of Muted Group Theory, these findings suggest that women's voices are not entirely absent but are selectively expressed within constrained communicative spaces that align with dominant household norms. This extends the theory by showing that mutedness in domestic contexts involves negotiated accommodation rather than complete communicative exclusion.

These findings highlight that efforts to improve household nutrition should address not only economic access but also intra-household communication dynamics. Interventions may be more effective when they promote open dialogue, normalize women's participation in everyday food discussions, and create safe communicative spaces for expressing preferences. Overall, wives' acceptance in this context represents a form of constrained communicative agency, where compliance and adaptation function simultaneously as mechanisms of stability and as processes through which unequal decision-making structures are maintained.

4.4 Negotiation in Food Decision-Making: Limited and Uneven Across Households

This study examines how negotiation in household food decision-making emerges through everyday communication, with a focus on the

conditions under which wives are able to express preferences and participate in decisions. The findings indicate that negotiation in food decision-making is limited and uneven across low-income households in Bincau Village. Instead of occurring as an open or continuous discussion, negotiation appears selectively, particularly in households with relatively more stable economic conditions, higher educational attainment, or specific caregiving demands. When present, negotiation takes the form of brief discussions, menu suggestions, and small compromises embedded in everyday interactions. These interactions allow wives to express preferences in limited ways, particularly when related to children's needs or health considerations.

Importantly, negotiation does not necessarily reflect equal decision-making authority. Across cases, final decisions often remain aligned with husbands' preferences, indicating that women's participation operates within constrained boundaries. Thus, negotiation functions as a partial opening of communicative space rather than a full redistribution of decision-making power. This pattern is consistent with previous studies showing that women's bargaining power in food decision-making is closely linked to access to resources and household conditions. O'Meara et al., (2025) further argue that women's bargaining power, including control over time, finances, and decision-making, serves as a key mediator of healthier and more sustainable household food practices, even when shaped by gender norms and access to information. However, this study extends prior research by demonstrating that negotiation is also shaped by micro-level communication practices, such as short conversations and implicit compromises.

From the perspective of Muted Group Theory, these practices can be understood as a form of "silent language," in which women do not explicitly contest structural limitations but instead reshape food practices. These findings demonstrate that variation in household food decision-making cannot be fully accounted for by Muted Group Theory alone. While MGT effectively illuminates structural inequalities in communication, it remains limited in explaining why some women are able to negotiate within these constraints. Rather than a strict division between voice and silence, women's participation is better understood as existing along a continuum shaped by economic conditions and everyday communication practices. Within this continuum, negotiation emerges as conditional and context-dependent, enabling women to exercise constrained forms of agency without fundamentally disrupting entrenched gendered hierarchies of authority.

These findings highlight that efforts to improve household nutrition should not only address economic constraints but also strengthen intra-household communication practices. Interventions may be more effective when they create concrete opportunities for joint decision-making, such as couple-based nutrition sessions, household meal planning, and community discussions involving both spouses. Open communication can be strengthened through guided dialogue on food priorities, budgeting, and children's needs, while integrating men into platforms like posyandu can normalize shared responsibility. Women's participation can be further supported through practical tools, such as simple menu planning, budgeting exercises, and role-play to build confidence in expressing food preferences. Overall, negotiation in this context represents a limited and conditional form of communicative agency, where women can express preferences without fundamentally altering existing gendered structures of authority.

4.5 Typologies of Household Food Decision-Making

This study examines how variations in household food decision-making typologies are shaped through the interaction of economic conditions, gender norms, and intra-household communication processes. The findings show that food decision-making does not follow a single, fixed model but reflects overlapping and context-dependent typologies across households. Rather than representing isolated choices, decisions regarding menu selection, eating order, and portion distribution reveal how communicative authority is structured and enacted in everyday household interactions.

To interpret these patterns, this study adopts household decision-making typologies from Bernard et al., (2020), namely the unitary model, contributions model, separate spheres model, norms model, and most informed model. The findings indicate that households rarely conform to a single model; instead, decision-making reflects hybrid and context-dependent configurations shaped by the interaction of norms, resources, knowledge, and communication practices. Accordingly, the typology is not used here to deterministically classify households, but to map how decision-making legitimacy is constituted through the interaction of gender norms, economic contribution, knowledge distribution, and intra-household communication dynamics.

In households facing severe economic constraints (decile 1), decision-making most closely aligns with the norms model, where authority is legitimized through gender norms. However, this authority is simultaneously reinforced by economic contribution, indicating an overlap with the contributions model rather than a purely norm-based system. This

overlap suggests that under conditions of poverty, normative and economic sources of authority operate together in structuring decision-making legitimacy, rather than functioning as separate mechanisms.

Conversely, households with relatively greater economic stability, higher education, or specific caregiving demands demonstrate more collective decision-making tendencies. In these contexts, food decisions tend to approximate the unitary model, where preferences are framed as shared, particularly when prioritizing children's needs. In some cases, decision-making also reflects elements of the most informed model, where individuals perceived to have greater nutritional knowledge influence food choices. However, knowledge-based authority does not replace gender norms but operates alongside them, indicating layered rather than transformative change.

These findings suggest that household food decision-making is not determined by a single dominant factor but is produced through the interaction between material conditions and communicative legitimacy. The typologies reveal that who decides is closely linked to how communication is structured, including whose preferences are voiced, acknowledged, and normalized in everyday interactions. While previous studies (Abdurazzakova et al., 2024; Mekonen et al., 2024) This study emphasizes the role of resources, income, and knowledge in shaping decision-making patterns. This study extends these findings by demonstrating that communication practices mediate how these factors translate into authority. The difference likely stems from the qualitative design of this study, which captures micro-level interactional processes (e.g., consultation patterns, implicit agreement, and routine communication), aspects that are often not visible in survey-based or model-driven analyses.

These variations in typology highlight that poverty alone does not fully determine food decision-making in low-income households. In practice, households may shift between different models depending on economic conditions, resource availability, access to information, and the dynamics of interaction among family members at a given time. While economic constraints limit available choices, gendered communication patterns emerge as a deeper determinant. Households characterized by rigid communication tend to reproduce hierarchical structures grounded in norms and economic contributions, whereas those with more dialogical communication patterns create space for negotiation and the consideration of shared needs. To clarify the relationship among key findings, this study proposes Figure 6 that illustrates this interaction by showing how

economic constraints, gender norms, and communication processes jointly shape decision-making arrangements.

Figure 6 presents the conceptual model, showing that variations in household food decision-making are not fixed typologies but context-dependent configurations shaped by the interaction of economic constraints, cultural norms, and gendered communication dynamics. Rather than directly determining food choices, economic and normative factors structure communicative legitimacy and relational power between spouses, which in turn shape how decisions are negotiated, enacted, and normalized in everyday practice. The model also highlights that these arrangements remain fluid and may shift as material conditions, access to information, and relational dynamics change.

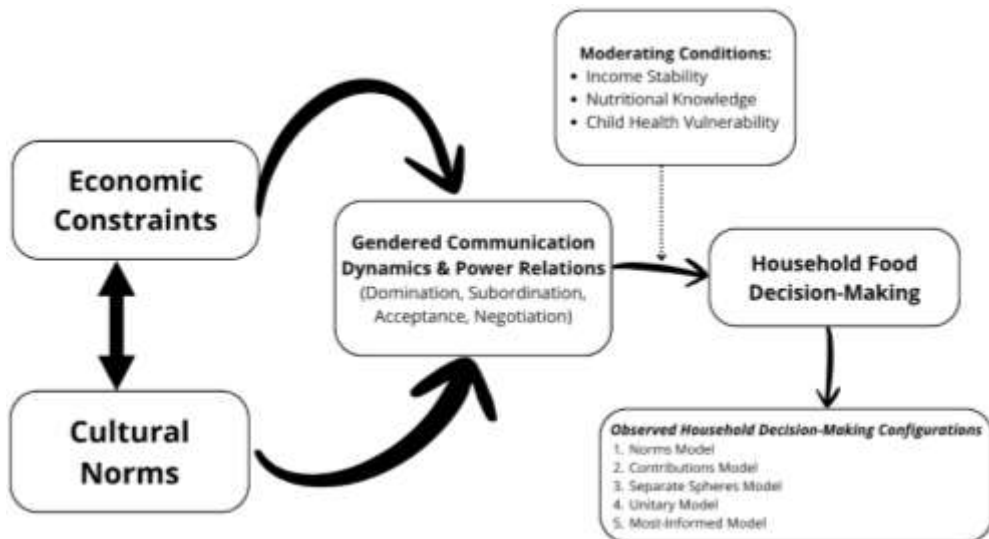


Figure 6. Conceptual model of household food decision-making in low-income households. The model illustrates how economic constraints and cultural norms interact to structure gendered communication dynamics, which in turn shape fluid household food decision-making configurations.

These findings contribute by reframing household decision-making typologies as communication-driven processes rather than purely economic or structural categories. Interventions may be more effective when they address both structural and communicative dimensions, such as facilitating joint decision-making, encouraging shared meal planning, and promoting dialogue around food priorities. Programs that integrate both

spouses in nutrition education and create practical spaces for discussion may help shift decision-making from hierarchical to more collaborative patterns. Overall, these typologies demonstrate that changes in food decision-making are more likely when communicative spaces become more inclusive, even when structural constraints remain.

4.6 Limitations and Future Research Directions

This study has several methodological and theoretical limitations that should be considered when interpreting the findings. First, as a qualitative study conducted among low-income households in a single village, the findings are context-specific and are not intended for statistical generalization to low-income households across Indonesia. Variations in local culture, kinship systems, and gender norms across regions may produce different food decision-making dynamics.

Second, the use of purposive sampling and household-based interviews may introduce selection bias and social desirability bias, particularly given the normative sensitivity of discussing gender relations and household power dynamics. Participants may have framed responses in ways perceived as socially acceptable rather than fully disclosing domestic tensions or disagreement.

Theoretically, the application of Muted Group Theory in rural Indonesian contexts also warrants caution. As a framework developed within Western feminist scholarship, MGT may not fully capture locally embedded meanings of household harmony, gendered obligation, and musyawarah-based family decision-making prevalent in Indonesian sociocultural settings. Accordingly, this study treats MGT not as a fully exhaustive explanatory framework, but as an analytical lens adapted to interpret patterned communicative inequality within a specific local context.

Future research should therefore test the transferability of the proposed conceptual model across more diverse settings, including urban communities, different ethnic groups, and non-low-income households. Comparative and mixed-methods designs would help assess whether gendered communication dynamics consistently shape food decision-making across contexts.

5. Conclusion

This study challenges the assumption that food decision-making in low-income households is primarily driven by economic constraints. Instead, the findings show that such decisions are shaped by the interaction of socio-economic conditions, cultural norms, and gendered communication dynamics, which determine whose preferences are voiced,

accommodated, and enacted in everyday practice. Food practices under poverty are therefore better understood as communicative and relational processes, with communication functioning as a central mechanism through which power is produced and reproduced.

Theoretically, this study affirms the relevance of Muted Group Theory in explaining gendered communication inequalities in domestic decision-making, while also highlighting its limitations in capturing women's agency in low-income contexts. Patterns of silence, accommodation, and compliance reflect not only subordination but also pragmatic strategies to maintain household stability. This extends the concept of muting as context-dependent and relational, rather than fixed or uniformly oppressive.

Empirically, the study provides a context-specific mapping of variation in household food decision-making, showing that patterns are fluid and contingent, shifting with economic conditions, access to information, and intra-household dynamics. These findings should be interpreted in light of several limitations, including the geographical specificity of Bincau Village, the potential for social desirability bias in interviews concerning domestic gender relations, and the limitations inherent in applying a Western feminist framework to culturally specific Indonesian household contexts.

Practically, the findings suggest that food and nutrition interventions should extend beyond economic support and nutrition education by addressing intra-household communication dynamics. This includes promoting couple-based nutrition counseling, structured engagement of men in household nutrition programs, and facilitated dialogue on food priorities and allocation. Interventions should explicitly target how decisions are communicated and negotiated within households, ensuring that both men and women are engaged as active participants.

Future research should examine the transferability of these findings across diverse socio-cultural settings and use comparative or longitudinal approaches to explore how changing economic conditions, program interventions, and household transitions reshape communication dynamics and food decision-making over time.

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