Paraji and Bidan in Rancaekek : integrated medicine for advanced partnerships among traditional birth attendants and community midwives in the Sunda region of West Java, Indonesia

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Chapter VI RANCAEKEK COMMUNITY

6.1. Bandung and Rancaekek Sub-District

Chapter VI first describes Bandung in a broader context, since Rancaekek is one of its 43 sub-districts (*kecamatan*). Rancaekek, the setting for this research, is located between Bandung Municipality and Cicalengka District. Discussion will focus on the demographics for Rancaekek, on the educational and occupational backgrounds of its inhabitants.

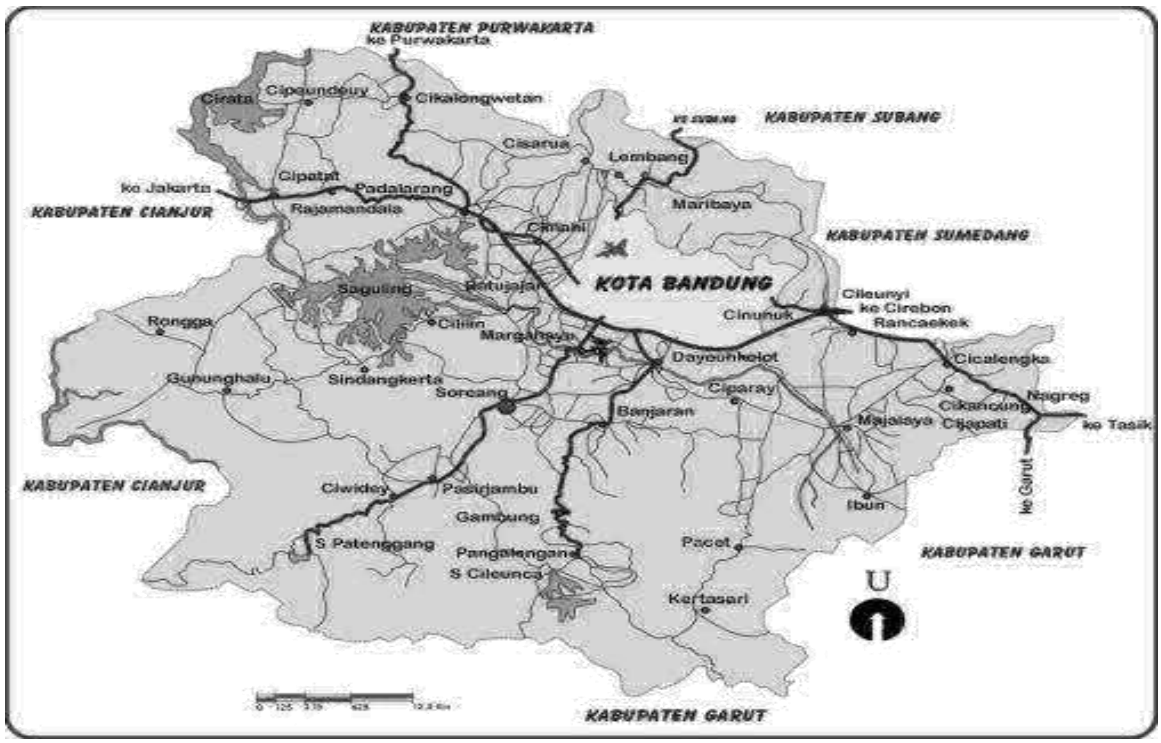
Bandung is both a Municipality (*kotamadya*) and Regency or district (*kabupaten*). Bandung Municipality is the capital of West Java Province and the fourth largest city in Indonesia. Located 768 m (2.520 feet) above sea level, Bandung has a relatively cooler year-around temperature than most other Indonesian cities. The topology of Bandung, which lies in a river basin surrounded by volcanic mountains, provides the city with a good natural defence, which made the city a particularly attractive choice when the Dutch East Indies Government decided to relocate the colony's capital from Batavia to Bandung.

In the 18th century, the Dutch established tea plantations in the mountainous areas surrounding Bandung. In order to give the planters access to the capital city Bandung (180 km or 112 miles to the northwest), a supply road was built in 1786 to connect Batavia (now Jakarta), Bogor, Cianjur, Bandung, Sumedang and Cirebon. In 1809, Louis Napoleon, then 'King of Holland' and its colonies, ordered the Dutch East Indies Governor-General H.W. Daendels to reinforce Java's systems of defence against the British who at that time held sway in India. Daendels built a road, ca. 1.000 km (621 miles) long, stretching across Java from the west to east coast. In 1810, construction brought the road through Bandung; it was named the Main Postal Road (*De Groote Postweg*) and is currently called *Jalan Asia–Afrika*. Europeans living there demanded that the city be made a municipality (*gemeente*), which was granted in 1906. Bandung with its luxurious hotels, restaurants, cafes and European shops gradually became a resort for the plantation owners and was dubbed the 'Paris van Java'. In 1880, the first major railroad was built between Batavia and Bandung, which helped boost light industry in Bandung. The city which had been made a municipality (*gemeente*) in 1906 later gained the status of *stadsgemeente* (city municipality) in 1926.

As stated above, Bandung's location was the primary reason why, in the early 1920s, the Dutch East Indies Government planned to relocate the capital of the Dutch East Indies Colony from Batavia to Bandung. Accordingly, during the 1920s, the Dutch Colonial Government started construction on military barracks and various buildings to house the Central Government (*Gouvernments Bedrijven*, the present-day *Gedung Sate*) and other governmental departments. Further plans were cut short, however, by World War II after which the Dutch were unable to re-establish their colony.

6.1.1 Demographics for Rancaekek

After Indonesia gained its independence on 17 August 1945, Bandung experienced a rapid population explosion as migration and urbanization transformed the city Bandung from a pleasant town to a densely populated area with 15.000 inhabitants per square kilometre. Natural resources were being excessively exploited, in particular when the protected highlands were razed to make room for modern villas and real estate. Although today Bandung must tackle a number of issues involving water resources, waste disposal, flooding and a chaotic traffic system, the city still maintains its charm and continues to attract tourists or people looking for a pleasant place to spend their leisure hours. Businesses have developed shopping centres and factory outlets (garment and beverage) to attract domestic tourists to Bandung Municipality, especially in Jakarta.



Map 6.1 Geographical Layout of the Bandung Municipality and Region
Source: Website *Resmi Kabupaten Bandung*

Bandung District (*Kabupaten*) covers 176.239 hectares and has 4.059.664 inhabitants. Its population is 98.12% Muslim (3.983.409), 0.66% Christian (26.831), 0.98% Catholic (39.609), 0.12% Hindu (4.806) and 0.12% Buddhist (5.009). The life expectancy in Bandung District is 66.96 years. Bandung District shares its borders with five other districts: Bandung Barat District to the north and west, Sumedang and Garut Districts to the east, and Garut and Cianjur Districts to the south. This mountainous region has several high peaks (*gunung*): *e.g*. Bukittunggul (2.200 m) and Tangkubanparahu (2.076 m) to the north, Patuha (2.334 m), Malabar (2.321 m), Papandayan (2.262 m), and Guntur (2.249 m) to the south.

Rancaekek is one of 43 sub-districts (*kecamatan*), with 266 villages (*desa*), in Bandung District and covers an area of 4.604 hectares. Geographically, Rancaekek is located 500–700 m above sea level on the Bandung plateau. The yearly rainfall is 1.500–2.500 mm, and the temperature ranges between 18°C and 24°C. Rancaekek borders on Sumedang District in the north, Solokan Jeruk Sub-District in the south, Cicalengka Sub-District in the east and Cileunyi Sub-District in the west.

Table 6.1 Villages in Rancaekek Sub-District

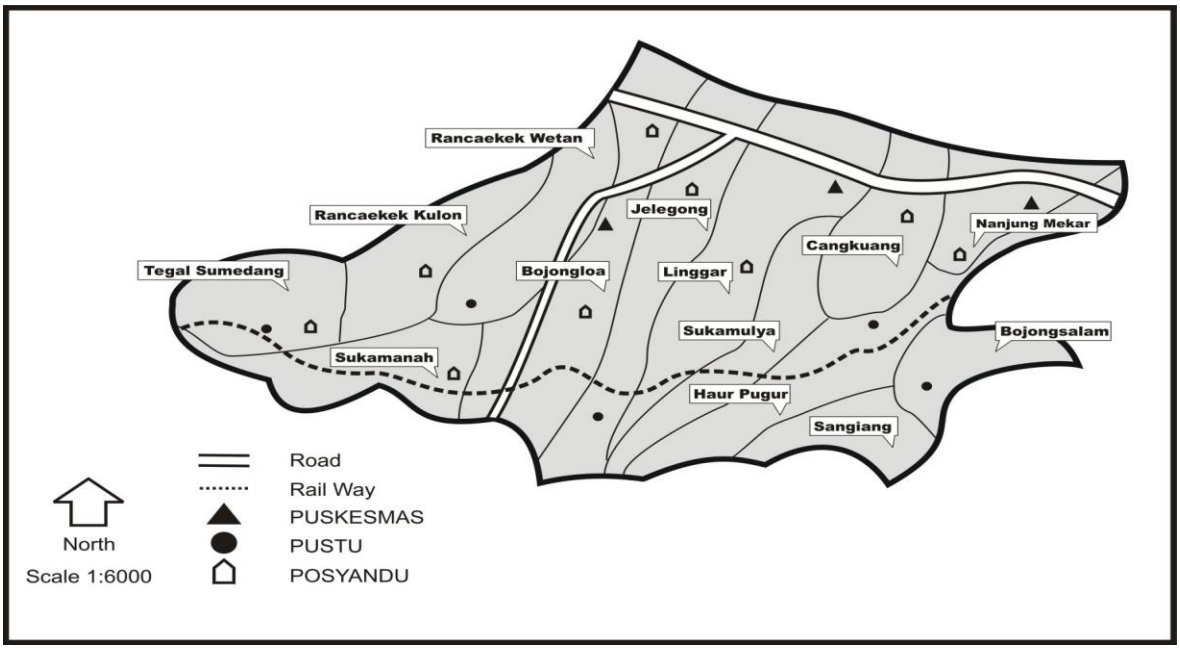
Number	Working Area/Village	*Rukun Warga* (RW/Neighbourhood)	*Rukun Tetangga* (RT/Hamlet)
1	Rancaekek Wetan	34	214
2	Rancaekek Kulon	12	54
3	Bojongloa	21	84
4	Sukamanah	10	41
5	Tegal Sumedang	5	16
6	Jelegong	20	75
7	Linggar	10	42
8	Sukamulya	10	41
9	Cangkuang	12	48
10	Nanjung Mekar	12	42
11	Haurpugur	6	28
12	Bojong Salam	7	25
13	Sangiang	7	27
	Total	166	737

Source: Household Survey (2005)

The distance from Rancaekek to Bandung City is 24 km. Before the Government adopted a policy to locate a modern industrial sector long the main road towards the eastern part of Java, the land was fertile and used to cultivate rice. One side of the road lies in Sumedang District and the other side in Rancaekek Sub-District. In 2000, the site of an ancient temple was unearthed in Kampung Bojong Menje, Cangkuang village, which will become an object for historical study and tourism in the near future.

The population growth in Rancaekek is relatively high due to the huge inflow of migrants seeking work in industry. The number of settlements is increasing rapidly to meet public demand for housing. During the rainy season, eight villages – Rancaekek Wetan, Rancaekek Kulon, Bojongloa, Linggar, Bojongsalam, Cangkuang, Sukamulya and Haurpugur – in the Rancaekek sub-district are regularly inundated by flood waters. Thousands (ca. 11.000) of houses are usually damaged when water (50–150 cm) from the Cikijing, Cimande, and Cikeruh rivers overflow its banks. The most serious flooding generally occurs in Bojongloa and Linggar, leaving the villagers in need of food, clean water, clothes and medical aid. In addition, 355 hectares of rice fields are usually submerged by flood waters.

In the vicinity of Rancaekek, ca. 217 industries are responsible for polluting the rivers, *e.g.* the Citarum River which drains into Jakarta Bay. Pollution is the result of inadequate industrial waste management where company policies have failed to address the problem of waste disposal and permit polluted water to empty into open waterways. Data show that, in the Rancaekek sub-district, hundreds of hectares of rice fields in four villages contain chemical pollutants and heavy metals (B3). Pollution has caused a reduction in quality and quantity of rice production because farmers in the area irrigate their rice fields with water from the Cikijing River.



Map 6.2 Geographical Layout of the Rancaekek Sub-District
Source: Household Survey (2005)

Data from the Research for Soil Development and Agroclimate (2001)[1] show that the soil in Rancaekek rice fields contains high concentrations of sodium (2.03–12.97 me Na/100 g soil). In comparison, when not polluted by waste from the textile industry, the sodium level is only 0.42 me Na/100 g soil. Moreover, Rancaekek's agricultural land is also polluted by heavy metals: mercury (Hg), cadmium (Cd), chromium (Cr), copper (Cu), cobalt (Co) and zinc (Zn). Rice fields in the villages Linggar, Bojong Loa and Jelegong are also polluted by toxic water. Although the public complains about the stench of the befouled rivers in Rancaekek, until a solution is found to regulate clean water, pollution will continue to be not only an annoyance but more importantly a health hazard to the community. A Memorandum of Understanding (MoU No. 660.3/631/I/2002) has been jointly signed by the Government, factories and representative of the community.

Factories in Rancaekek generally produce garments and textiles, *i.e.* industries which prefer to hire women for their patient, gentle touch for sewing, knitting, ironing and quality control. According to gender stereotyping, factories in Rancaekek tend to hire female migrants because they are also more obedient compared to their male counterparts. In

contrast, male labour workers are needed for heavy labour, *e.g.* packing, loading and unloading large shipping containers.

Table 6.2 List of Factories in Rancaekek

Name of Factories/Manufactures	Kind of Product
Dewhirst Menswear	Garment
PT Sunson Textile Manufacturer	Textile
Kahatex	Textile
Aisha Textile, Hashmani Industries	Textile
Bitratex Industries, Polychem Industry TBK	Textile
PT Five Stars Textile	Textile
Delami Garment	Garment
Insan Sandang Inter Nusa Textile Industries	Textile
Mardira Indonesia Garment Industries FTY	Garment
Natatex Prima	Textile
PT Jatayu Tex	Textile
CV Wiska Tex	Textile
Warranty Industries (M) SDN. BHD	Fabric Elastic
Mercutama Nusa Textile Mills	Textile
Seno Makmur Industri	Textile
Dwipapuri Abadi	Footwear
Elcon Finlease and Industries Ltd.	Broker
Wa-Betsy Industrial Co.	Textile Machinery
PT Kewalram Indonesia	Synthetic Yarn
Poly Fibre Industry	Polyester
Nagasahi Parama Shoes Industry	Shoes
Java Industry	Technology for Wireless
Atlas Mustika Industries	Rubber
PT Sekawan	Machinery Supplier
PT Bara Multi Metalika	Metal
PT Multibrata Anugrah Utama	Contractor
PT Gas Industry	Oil and Gas Supplier
PT Gracia Pharmindo	Pharmacy
PT Roda Cipta Semesta	Corporate Advisory Solutions
PT Adira Semesta Industry	Broad weaves Fabric Mills – Cotton
PT Setia Kijireed Industry	Textile Machinery Supplier
Bara Multi Metalika	Coal Industry
Yamatogomu	Rubber Industry

Source: Household Survey (2005)

Factory labour workers are either native to Rancaekek or come from outlying areas such as West and Central Java or even other Indonesian islands. The population distribution in Rancaekek shows that women (32.814) outnumber men (31.138) in the productive age

group from 22 to 55 years (Table 6.3); this population distribution relates to the area's economic function seen on a regional map.

Table 6.3 Population Distribution by Age and Gender in Rancaekek (2002)

Variable	Male		Female		Total	
Age group	*N*	%	*N*	%	*N*	%
0 – 6	5.479	8.8	6.174	9.0	11.653	8.9
7 – 14	7.865	12.6	8.189	11.9	16.054	12.2
15 – 21	7.283	11.7	7.754	11.3	15.037	11.5
22 – 28	6.022	9.6	6.378	9.3	12.400	9.4
29 – 35	8.368	13.4	8.594	12.5	16.962	12.9
36 – 41	5.586	8.9	6.125	8.9	11.711	8.9
42 – 48	5.617	8.1	5.971	8.7	11.588	8.8
49 – 55	5.545	8.9	5.746	8.3	11.291	8.6
56 – 62	3.922	6.3	4.258	6.2	8.180	6.2
63 – 69	2.657	4.3	5.506	8.0	8.163	6.2
70 – 76	2.451	3.9	2.587	3.8	5.038	3.8
> 77	1.620	2.6	1.593	2.3	3.213	2.5
Total	62.415	100.0	68.875	100.0	131.290	100.0

Source: Form of Population and Manpower, Rancaekek Sub-District (2002)

In the research setting, which is an industrial zone in West Java; women generally enter the labour market at a productive age. People living in village neighbourhoods near the main road where factories are located usually work there. Several such villages are Rancaekek Wetan, Rancaekek Kulon, Jelegong, Linggar, Cangkuang, Nanjung Mekar and Bojongloa, although not all areas of these villages are near the main road. In contrast, Tegal Sumedang, Haurpugur and Sangiang are geographically remote settlements and agricultural areas. Classification of villages in the study area which is discussed in Chapter III with regard to the implementation of several health programmes. Villages are labelled 'A' for much developed (*maju*), 'B' for moderately developed (*sedang*) and 'C' for less developed (*tertinggal*). As discussed in Chapter III, the villages in the Rancaekek sub-district are: Rancaekek Wetan (A), Rancaekek Kulon (A), Bojong Loa (A/B), Tegal Sumedang (C), Sangiang (C), Bojongsalam (B), Haurpugur (B/C), Cangkuang (B), Linggar (B), Nanjung Mekar (B), Sukamulya (B), Sukamanah (B) and Jelegong (A/B).

6.1.2 Education and Occupation

From the data for 2002 shows that in Rancaekek, only 55.47% of the population (72.832 of 131.290) has received an education. In 1994, when Indonesia declared that 9 years of schooling was compulsory, the number of younger people enrolling in junior high schools was greater than ever before. Table 6.4 shows that, while more young people are enrolling in junior high school, fewer students are continuing on to senior high school. The table also

shows that too few people are going on to study at institutes of higher learning. One explanation for the increase in dropouts from senior high school is that factories in Rancaekek employ young people directly after graduation from junior high school (*cf.* Table 4.3).

Table 6.4 Formal Education of the Population in Rancaekek

Variable	Gender		Total
Education level	Male	Female	
Incomplete Elementary School	6.374	5.990	12.364
Elementary School	9.265	10.963	20.228
Junior High School	10.136	10.577	20.713
Senior High School	5.748	5.345	11.093
Diplomas I/II	1.433	1.735	3.168
Academy/Diplomas III	1.283	1.389	2.672
University	1.231	1.363	2.594
Total	35.470	37.362	72.832

Source: Form of Population and Manpower, Rancaekek Sub-District (2002)

Industrialization in Rancaekek is also attracting more highly educated people from outside the sub-district who are looking for employment in nearby industries. Geographically Rancaekek is not so far from Jatinangor in the district of Sumedang where several large universities are located: *Universitas Padjadjaran* (UNPAD), *Sekolah Tinggi Pemerintahan Dalam Negeri* (STPDN), *Institute Technology Bandung* (ITB), and *Institute Koperasi Indonesia* (IKOPIN). Housing settlements are being built in Rancaekek to accommodate lecturers, government officials, employees, and even students. Unfortunately, regardless of its proximity, graduates from Rancaekek senior high schools are not always accepted at the nearby universities because selection for entrance to higher education is made on a national level.

The potential for finding employment in Rancaekek Sub-District is good. As shown in Table 6.5, there are 216 (mostly garment) factories in areas near the provincial road: *i.e.* 36 large, 28 middle-sized and 152 small factories. Therefore, much of their manpower comes from areas beyond Rancaekek.

Silvey (2001) draws attention to labour activism, resulting from changing demands of women, and pinpoints different forms of labour activism among workers in two communities in West Java: (a) Rancaekek, located just outside the city of Bandung and (b) Bekasi, located within the Jakarta–Bogor–Tangerang–Bekasi (Jabotabek) urban corridor. Differences in degrees of militancy and involvement in collective action are seen to be linked to differences in gender and local social networks. More women workers in Bekasi have migrated from distant areas, such as central Java, and consequently have fewer social networks upon which they can rely to link them with their families back home. Community norms for women, however, are less restrictive and give women more freedom to become involved in collective political action. Furthermore, Silvey (2001) notes that in Rancaekek,

more women seek work after having children. Local working mothers are more embedded in family networks and. as far as it exists; women's political activism is organized around the platform of motherhood. Since the '*reformasi'* (reformation) movement began in Rancaekek and Bekasi, the economic downturn has caused protests to focus on women's role as mother. Women's activism has therefore shifted towards more 'conservative' themes, specifically women's role in the family. This shift in emphasis has crystallized in similar ways in both Rancaekek and Bekasi. Economic conditions in the community burden families and their households. Not only is the husband expected to be a breadwinner but his wife and other family members are frequently expected to seek employment, if possible, to secure the family's financial well-being. Because an extended family traditionally lives together under the same roof, or has a housemaid to do household chores and care for any young children, more family members are now in the position to work outside the home.

There are two traditional markets in Rancaekek: the main market is located at the junction where the provincial road intersects the district road to Rancaekek, and the smaller market is located within the settlement area. The main market has restaurants and shops which sell various goods like clothing, shoes, furnitures, electronics, pharmaceuticals and cosmetics, accessories, building tools and material, and the like. The traditional market sells fruits and vegetables, meats, and many other products which daily life requires. Vegetable sellers (*tukang sayur*) go door to door, from dawn to dusk selling the day's harvest from their carts. Housewives find this a handy way to obtain fresh produce instead of having to shop at the market every day. Shoe-repair men and vendors selling fruit and foodstuffs usually wander through the settlements to peddle their wares.

Table 6.5 Job Potential in Rancaekek

Job potential	Numbers
Large garment factories	36
Middle-sized garment factories	28
Small garment factories	152
Markets	2
Shops	538
Fish ponds	14
Transportation services	575
Others	906
Total	2.251

Source: Form of Population and Manpower, Rancaekek Sub-District (2002)

In Table 6.5, 'Transportation services' refers to public modes of transportation such as *angkot* (*angkutan kota* = city transportation), *ojeg* (rental motorbike), *becak* (tricycles) and *bengkel* (workshops). The category 'others' refers to employment in areas involving agriculture, poultry (chicken and ducks), as well as a variety of other jobs involving *jamu* and door-to-door sellers, trade in: clothing, shoes, accessories, cooked foods, household equipment, and so forth.

As an industrial area, Rancaekek has the capacity to absorb thousands of people seeking employ as labour workers. In reality, the sub-district of Rancaekek has contributed greatly to economic growth in West Java. Unfortunately, rapid industrialization is the cause of a number of severe problems. As stated above, the quality of water is endangered by polluted surface water in the Bandung basin, including Rancaekek, and by exploitation of the hilly areas north of the Bandung plateau for housing settlements. Moreover, because textile and garment factories require a massive supply of water to keep the production process running, local government authorities should restrict licensing to industries which use excessive amounts of water for production. The industries which are already functional should be required to use surface or pond water.

The distribution of occupations according to the population group aged 10 years and older shows that 39.35% of the working force is employed by the garment industry (*cf.* Table 6.6). Trade and commerce (16.85%) account for the second highest percentage. One should recall that Rancaekek's large commercial area is located near a provincial road and that it's highly mobile population travels freely in - and outside the sub-district. Furthermore, in the non-industrialized sector, usually small vendors actively travel around selling foodstuffs to neighbourhoods in more remote areas. Sudirja's study (*Pikiran Rakyat* 2006) shows that the garment industries have now surpasses the agricultural sector in Rancaekek which, in recent years, was famous as source of rice and fish for West Java. Industry is an economically thriving sector. In 1900, Rancaekek's income per capita was Rp 900.000 and after the garment industry began to develop, its income per capita soared to Rp 2.700.000. The sub-district's annual income has continued to increase from Rp 6 billion in 1990 to Rp 42 billion in 1997.

Table 6.6 Occupation Distribution of the Population in Rancaekek Aged >10 Years

Variable	Male		Female		Total	
Occupation	N	%	N	%	N	%
Agriculture	3.764	10.9	1.569	9.8	5.333	10.6
Industry	10.155	29.2	9.792	61.0	19.947	39.4
Construction	2.547	7.4	–	–	2.547	5.0
Trade & Commerce	6.096	17.6	2.445	15.3	8.541	16.9
Transportation & Communication	6.460	18.6	297	1.9	6.757	13.3
Finance	593	1.7	–	–	593	1.0
Service	5.043	14.6	1.929	12.0	6.972	13.8
Total	34.658	100.0	16.032	100.0	50.690	100.0

Source: Socio-economic data Bappeda Bandung district (2003), Suseda (2003), BPS Bandung Regency (2003)

The garment industry is both capital- and labour-intensive. As factories attracted more people seeking work from both within and outside the sub-district. Rancaekek's population

is burgeoning at a fast rate, thus creating a greater need for food, clothing, and an improved infrastructure. Ironically, while developing industries bring prosperity to some groups of people, they also can have an adverse effect on other groups in the community. In the case of Rancaekek, the garment industry has marginalized the agricultural sector. Industrial expansion encroaches upon agricultural areas and converts farm land into industrial terrain. Remaining agricultural areas are suffering under the impact of industrialization and are being ecologically spoiled and poisoned by waste from the industrial cesspool. Previously, the farming systems found in Rancaekek were *mina-padi* (combined rice and fish farming) but, in recent years, fish and rice production has been on the decline. Peasants in Rancaekek report which, before industrialization became so widespread, they were harvesting 5.5 tons of rice per hectare; in contrast, recent data show only 2.8 tons per hectare per harvest.

In his study on the conversion of agricultural into industrial land. Chofyan (2005) states, that regional development usually has such negative side effects on the lives of local people. Regional economic growth and local prosperity are not always balanced. The objective of Chofyan's study is to reveal the effects of industrial development on local people, especially on farmers who own/work the land which is being converted for industrial use. Chofyan refers to three kinds of farmers: *i.e.* farm owners, share-tenant farmers, and farm labour workers. The conversion of agricultural land in the Rancaekek sub-district has changed people's orientation from farming and land ownership to industrial, commercial and service sectors. Over the past 5 years, manpower has decreased in the agricultural sector on an average by 2.02% annually, while the industrial (36.6%). commercial (24.22%). and service (11.18%) sectors have grown. Changing infrastructures the expanding network of accessible roads, electrical circuits and telecommunication – are exerting the greatest influence on conversion of agricultural land. Expanding industries in Linggar, Cangkuang, Nanjung Mekar, and Rancaekek Wetan villages are located along the provincial Bandung–Cicalengka road. In addition to Rancaekek Wetan village, industrial areas are also found along the road to Majalaya District. Industry in Bojongsalam village is located along the road between Majalaya District and Cicalengka. In addition, the population's living standards tend to decrease, due to their loss in income and status as farmers. The conversion of agricultural land has also changed the attitudes of farmers towards work and land ownership. For share-tenant farmers and farm labour workers, this is evident from their tendency to change occupations, while farm owners tend to sell their land.

6.2 Study Population and Sample Survey

6.2.1 Selection of Five Sample Villages and Respondents

Before discussing the findings from the field work collected in Rancaekek, the research setting will be reviewed. The fieldwork links up the previous research project 'Making Pregnancy Safer' (MPS) held by the WHO Collaborating Centre for Perinatal, Maternal, and Children (WHOCC–PMC) of Universitas Padjadjaran in collaboration with WHO–SEARO in 2001–2002 in the Rancaekek sub-district.

As discussed in Chapter III (methodology and analytical model), the sample for the household survey was drawn from 50% of the female population who had ever been pregnant or delivered a live baby during the 12 month period prior to the survey. Finally, 127 women were selected as respondents from households in: (1) Jelegong, 35 respondents; (2) Cangkuang, 19 respondents; (3) Haurpugur, 33 respondents; (4) Tegal Sumedang, 18 respondents; and (5) Sangiang, 22 respondents (Table 6.7).

Table 6.7 Distribution of Respondents and Households in Rancaekek Sub-District, According to the Five Villages Selected (N=127)

Name of Village	Total RW	SES	MCH Programme (Implemented)	Sample	
				N	%
Jelegong	21	A/B	GSI	35	27.5
Cangkuang	12	B	UNICEF	19	15.0
Haurpugur	6	B/C	GSI	33	26.0
Tegal Sumedang	5	C	GSI	18	14.2
Sangiang	7	C	GSI	22	17.3
Total	51			127	100.0

Source: Household survey (2005)

The respondents chosen by these sampling procedures were collected from the 'poor household lists' (*keluarga miskin*) drawn up in 2005 by the local government to register recipients for National Government aid (BLT: *Bantuan Langsung Tunai*). Because these lists also included data about women's pregnancies and the ages of their infants, they were of practical use when sampling households for the retrospective survey. Consequently, 23 women were still pregnant during the household survey, which is mean that they had neither completed the entire process of pregnancy and childbirth nor had had the opportunity to contact Maternal and Child Health (MCH) services for antenatal, perinatal and post-partum care. Therefore, only 127 (N) women remained who qualified as respondent in this study (*cf*. Table 6.7).

The household survey was taken during the month of Ramadan, or September and October 2005 (*cf.* Sub-Section 3.2.1). The interviewers were students and alumni of the Anthropology Department from Padjadjaran University. Ramadan, the Islamic month of fasting, was an additional blessing for the interviewers, thus making it easier to collect data. During Ramadan more people prefer to stay at home while fasting. The obstacles encountered were distances between houses and villages; due to the rainy season, some parts were flooded making it difficult for vehicles to reach several remote areas. Fortunately, the interviewers brought their own or borrowed local motorbikes. As mentioned in Chapter III, every selected village is categorized (A–C) by its socio-economic condition. Jelegong (A/B) has a better classification (although not the best) compared to the other villages selected in the household survey, followed by Cangkuang (B), Haurpugur (B/C), Tegal Sumedang (C), and Sangiang (C). Two villages, *i.e*. Tegal Sumedang and

Sangiang, are selected because both are considered to be socio-economically under-developed (classified as C) and have been provided with a MCH programme called *Gerakan Sayang Ibu* (‘Mother’s Friendly Movement’. and another programme under the auspices of UNICEF).

6.2.2 Demographic and Ethno-Religious Composition

The total population of Rancaekek numbered ca. 131.290 inhabitants in 2002. The sample population in the reproductive and socio-economically active age group (16–50 years) represents 52.0% of the total members of the selected households. Table 6.8 shows the age distribution (N=695) according to gender for comparison with the age spread for the total population.

Table 6.8 Age Distribution of Household Members in the Sample Survey in Rancaekek, according to Gender (N=695)

Variable Age group (years)	Men		Women		Total	
	N	%	N	%	N	%
0 – 5	82	23.6	74	20.5	156	22.4
6 – 10	38	10.9	42	12.1	80	11.5
11 – 15	32	9.2	29	8.4	61	8.8
16 – 20	26	7.2	28	8.1	54	7.8
21 – 25	35	10.1	42	12.1	77	11.1
26 – 30	32	9.2	41	11.8	73	10.5
31 – 35	32	9.2	27	7.8	59	8.5
36 – 40	25	7.2	27	7.8	52	7.5
41 – 45	16	4.6	12	3.5	28	4.0
46 – 50	11	3.2	7	2.0	18	2.6
51 – 55	8	2.3	6	1.7	14	2.0
56 – 60	6	1.7	8	2.3	14	2.0
61 – 65	1	0.3	1	0.3	2	0.3
66 – 70	2	0.6	2	0.6	4	0.6
71 – 75	1	0.3	1	0.3	2	0.3
76 – 80	1	0.3	–	–	1	0.1
Total	348	50.2	347	49.9	695	100.0

Source: Household survey (2005)

In Figure 6.1, the Age Pyramid for the sample population (N=695) is expressed according to gender (348 men and 347 women). The Age Pyramid is asymmetrical, with marked differences in specific age and gender categories. The gender ratio for 798 surveyed individuals is 99.7 (Table 6.8). Below the Age Pyramid are projected 695 members of 127 sample households surveyed.

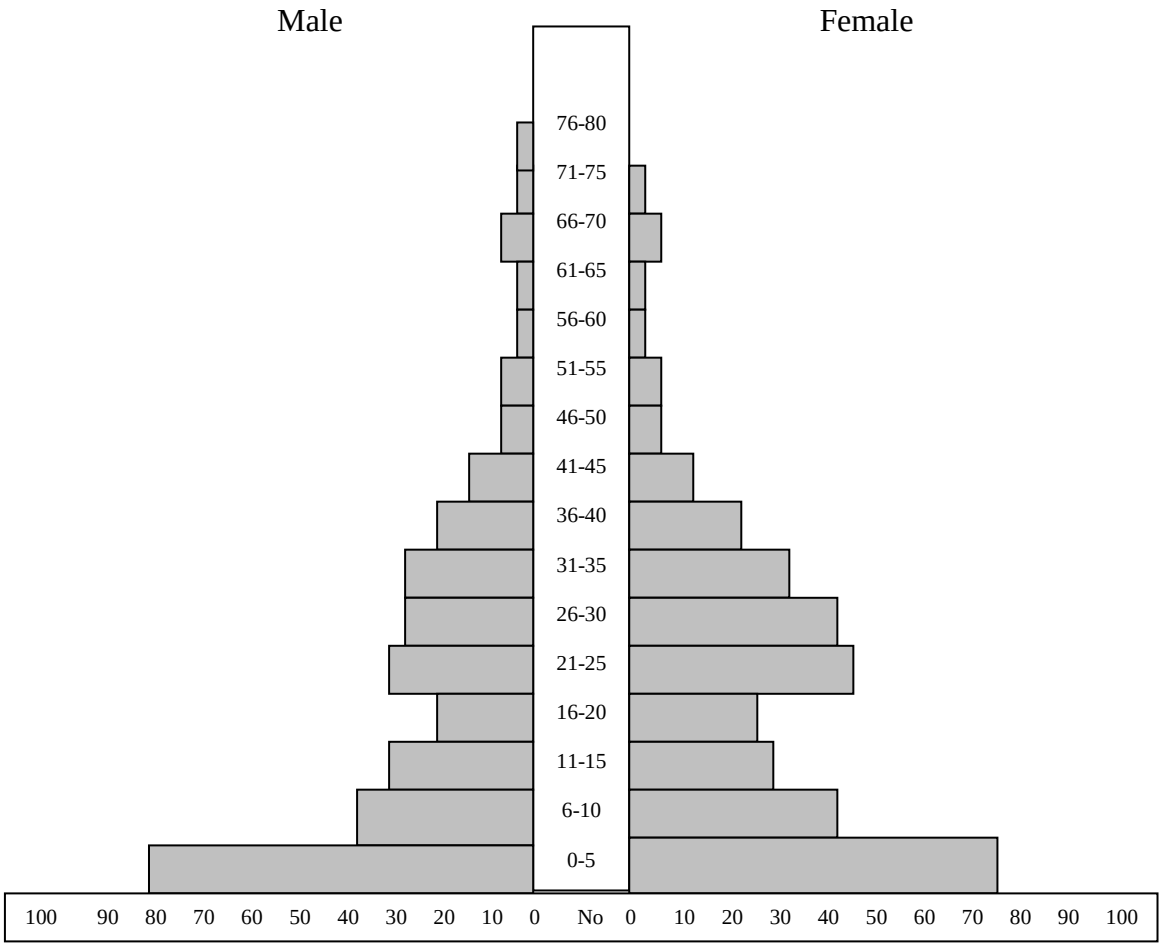


Figure 6.1 Age Pyramid for the sample population (N=695) according to gender (348 men. 347 women)

Table 6.9 Distribution of Ethnicity according to Household Heads and Spouses in the Sample Survey in Rancaekek (N=127)

Variable	Household Heads		Wives	
Ethnicity	N	%	N	%
Sundanese	113	88.9	119	93.7
Javanese	10	7.9	5	3.9
Batak	3	2.4	2	1.6
Palembang	1	0.8	–	–
Malay	–	–	1	0.8
Total	127	100.0	127	100.0

Source: Household survey (2005)

The majority of the population in the study are Muslim (98%); religious beliefs coloured all activities in the community. Only a few sample households are Christian (1.30%) and Catholic (0.70%); generally their ethnicity is Batak, sometime Javanese, but mostly Sundanese.

Table 6.10 shows that 50.4% of the wives in the households sampled received a formal primary education; in contrast, 48.0% of the heads of households received the same level of education. However, far more heads of households received a higher education than their spouses: 26.4% of the heads of households, in contrast to 20.5% of their spouses, received a senior high school education. Furthermore, Table 6.10 shows the total education received by both heads of households and their wives: the majority (49.2%) received an elementary education while fewer (43.3%) completed the high school level. Only 5.1% received a formal university education. Data show that when a woman becomes pregnant, her choice of traditional and/or modern Maternal and Child Health (MCH) will be influenced by the level of education both the husband and wife have received. The process of deciding whether to choose between traditional and/or modern MCH systems will also be influenced by the occupational background of the household head, the status of other senior family members and any influence religious leaders might have on the family.

Table 6.10 Distribution in Type of Formal Education, according to Household Heads and Wives in the Sample Survey in Rancaekek (N=127)

Variable Education	Household Heads		Wives	
	N	%	N	%
Type of formal education				
Never attended school	4	3.2	2	1.6
Elementary school	61	48.0	64	50.4
Junior high school	20	15.7	30	23.6
Senior high school	34	26.8	26	20.5
University	8	6.3	5	3.9
Total	127	100.0	127	100.0

Source: Household survey (2005)

Data on main occupations for women show that 52.0% of the spouses were housewives and 12.6% were self-employed; usually working from home and selling daily necessities to neighbouring households rather than at the market. The category 'Labour worker' which refers to either agricultural or factory work shows that the incomes differ greatly. Heads of households were mostly farmers (31.5%) or self-employed labour workers (32.3%). *i.e.* generally drivers in the transportation sector: including tricycle (*becak*), public transport (*angkot*), and motorcycle (*ojeg*). Other occupations under 'Self-employed' are food vendors or the service sector. For the majority of respondents classified as 'housewife', their only income comes from their husbands. However, a number of housewives have found jobs alongside their roles in the household.

The occupational structure in Rancaekek shows that working in agriculture, formerly the major sector in the area, has recently shifted to employment in industry. Although land in Rancaekek is rapidly being converted for industry, not everyone who has lost land has profited economically from industrial growth. Those who have lost land and have no opportunity to work in industry can still survive economically by seeking work in non-industrial sectors or by becoming self-employed. The category 'Government officer' in Table 6.11 includes teachers, health providers, and employees in local and sub-district governments, while the category 'Unemployed' is dependent on respondents' *emic* answers; for example, when one woman claimed to be unemployed, she was taken on her word without first seeking additional details to validate her claim.

Table 6.11 Distribution of Main Occupation, According to Household Heads and Wives in the Sample Survey in Rancaekek (N=127)

Variable Occupation	Household Heads		Wives	
	N	%	N	%
Unemployed	8	6.3	1	0.8
Housewife	–	–	66	52.0
Farmer	40	31.5	25	19.7
Labour worker	25	19.7	17	13.4
Self-employed	41	32.3	16	12.6
Government officer	13	10.2	2	1.5
Total	127	100.0	127	100.0

Source: Household Survey (2005)

It is customary in many households that various family members share one house; in Rancaekek there is evidence that relatives from the extended family also become part of the household. Often a young couple will continue living at home with the wife's parents until they are able to build or rent their own house. This complex situation can cloud the actual decision-making process when selecting Maternal and Child Health (MCH) services, especially during labour and delivery. This is an important point to remember with regard to the topic of this dissertation. Here 'power' is conferred to senior rather than junior family members or to men rather than women. However, when pregnancy, labour or delivery threatens to become a health risk, then the presence of members of the extended family may help calm the family's frazzled nerves or help transport the expectant mother to a health facility, especially when she lives far from the main road.

Distribution of household size in Table 6.12 shows that 56.6% of the households surveyed have 4–6 members. Smaller families are probably the consequence of the Family Planning Programme (*Keluarga Berencana*) introduced by the Government during the 1970s that used the slogan "*Keluarga Kecil Bahagia Sejahtera*" ("Small Happy and Prosperous Family") and advised against having more than two children. To change the Indonesian patrilineal perception that having a son is preferable, *i.e.* to inherit the father's

family name, another slogan was: "*dua anak cukup, laki-laki atau perempuan, sama saja*" ("Two children are enough, a boy or girl is the same.").

Table 6.12 Distribution of Household Size in the Sample Survey in Rancaekek (N=127)

Variable Household members	N	%
1 – 3	24	18.9
4 – 6	72	56.7
7 – 9	29	22.8
10 +	2	1.6
Total	127	100.0

Source: Household survey (2005)

In some cases, the Government's Family Planning Programme became the pattern for families in Indonesia, including Rancaekek. Table 6.13 shows the distribution for number of children per family in the research setting. The majority of families (62.2%) in Rancaekek have only 1–2 children. However, 26.8% of the families have 3–4 children and 10.2% have 5–6 children which show that only two-thirds of all the families in Rancaekek comply with the Government's recommendation that "Two is Enough" introduced in the 1970s.

Table 6.13 Distribution of Number of Children per Family in the Sample Survey in Rancaekek (N=127)

Variable No. of children	N	%
1 – 2	79	62.2
3 – 4	34	26.8
5 – 6	13	10.2
7+	1	0.8
Total	127	100.0

Source: Household survey (2005)

In the five villages selected for the survey, 50% of the women pregnant during the prior year fulfil the requirements for selection. Table 6.13 shows the distribution of women, most at a good reproductive age (21–40 years). Based on biomedical data, the best child-bearing age for a safe pregnancy is between 20 and 30 years of age. Pregnancy in younger or older woman poses a higher risk to the mother and her offspring. Table 6.14 shows that 40 women fall within the 16–30 age groups while 67 women in other age categories run a higher risk during pregnancy.

Table 6.14 Age Distribution for Women in the Sample Survey in Rancaekek (N=127)

Variable Age (in years)	N	%
11 – 15	1	0.8
16 – 20	15	11.8
21 – 25	25	19.7
26 – 30	35	27.5
31 – 35	27	21.3
35 – 40	19	15.0
41 – 45	5	3.9
Total	127	100.0

Source: Household survey (2005)

The 2005 household survey used the list of *keluarga miskin* (poor families) prepared by the local government which shows to whom aid should be allotted by the National Government of Indonesia. Since this 'poor families' list also includes data regarding pregnancy and the newborn's age, it was used to prepare the retrospective sampling of households with women pregnant 12 months prior to the survey.

Table 6.15 Distribution of Last Childbirth for Women in the Sample Survey in Rancaekek (N=127)

Variable Preceding months	N	%
< 3	31	24.4
4 – 6	15	11.8
7 – 9	17	13.4
10 – 12	64	50.4
Total	127	100.0

Source: Household survey (2005)

As explained in Chapter III, this study employs a retrospective approach to obtain data from respondents about their experiences during pregnancy and childbirth. Table 6.15 groups women in the survey sample, according to the number of months since her last childbirth. Although 50.4% of the women surveyed had given birth 10–12 months earlier, they could recall all they had learned and experienced during pregnancy, labour and delivery. Only 24.4% of the women surveyed had given birth less than 3 months earlier. Table 6.15 shows that most respondents had delivered either during the prior 12-month period or the household survey. The 23 respondents (15.33%) who were still pregnant at the time of writing are excluded because they had not had completed the entire reproductive process through to delivery and therefore could not complete the questionnaire. Experiences which respondents remembered about their pregnancy relate to

their behaviour ('external actions'), rituals, problems encountered during previous pregnancies and childbirth.

6.2.3 Socio-Economic Status

A description of the research setting will include an overview of the socio-economic status (SES) of the community and provide further information on that of respondents selected in the retrospective survey. Respondents were distributed equally within the Rancaekek sub-district which, as explained earlier, has a multifaceted character with mixed community settlements, agricultural land, service and industrial sectors. Here people are self-employed or work as farmers, government officers and factory workers. The socio-economic status of the inhabitants is dependent upon the jobs available to which they are accustomed. Unfortunately, decreased productivity in the agricultural sector, due to less available land for farming, and irrigation water chemically polluted by the garment industry in Rancaekek, has caused many farmers to suffer a drop in income compared to the past when Rancaekek was famous as rice 'warehouse' for West Java. Moreover, since the monetary crisis in 1998, poverty has been on the rise; *i.e.* the situation has been exacerbated by an increase in the price of oil and the global economic crisis which have impacted peoples' lives worldwide. While incomes have been falling, prices are unexpectedly on the rise.

Table 6.16 shows the distribution of socio-economic status (SES) of respondents from a number of related indicators: *i.e.* household income, health insurance, type of house, ownership of land, livestock, electronic equipment, and categorized according to 'poor', 'average' and 'well to do' (*cf.* Chapter VIII. bivariate analysis). Categorization shows that more than 39.4% of the households surveyed have an 'average' socio-economic status (SES); 49.8% of the households are categorized as 'poor' while only 10.8% are considered 'well-to-do'. The villages Sangiang (16.7%) and Tegal Sumedang (0%) have only a few well-to-do inhabitants; for each village 24.3% of the respondents surveyed are 'poor'. Table 6.16 and Table 6.17 show the socio-economic status (SES) of the respondents according to individual health insurance for poor families and home ownership, respectively.

Table 6.16 Distribution of Socio-Economic Status according to Health Insurance (Poor Health Card), in the Sample Survey in Rancaekek (N=127)

Variable Health Insurance	N	%
No	82	64.6
Yes	45	35.4
Total	127	100.0

Source: Household Survey (2005)

Only 64.6% of the respondents receive Government health insurance for poor families; thus one must assume that the remaining 35.4% are 'average' or 'well-to-do' households. Health insurance is uncommon in Indonesia, as in Rancaekek. Low take-home pay, often

insufficient to buy a family's basic needs, does not afford people the opportunity to carry health insurance. Therefore, diversification in employment is pre-requisite to offset a shortage in income. Usually, a wife must find work in the non-industrialized sector by selling goods to her neighbours or in the community: *e.g.* selling her wares in an office or in an *arisan* (monthly neighbourhood or family gathering where money is collected and distributed among participants by lottery). Men often supplement the family income by holding down a second job in the public transportation sector, *e.g.* as motorbike driver (*ojeg*). In Indonesia, owning a motorbike has become very common because they can be bought by making a down payment of only Rp. 500.000 (ca. US$50) and then leasing it for 3 years. Some agents even allow the buyer to pay in instalments.

Table 6.17 Distribution of Socio-Economic Status According to House Ownership in the Sample Survey in Rancaekek (N=127)

Variable House ownership	N	%
Rents the house	53	41.7
Lives in relative's house	10	7.9
Owns the house	64	50.4
Total	127	100.0

Source: Household Survey (2005)

Because housing is considered out of reach for poor families, ownership of a house can throw light on the respondent's socio-economic status (SES). Owning a house is every family's dream, but they will need a great deal of money even to buy it in instalments. Table 6.17 shows that 41.7% of the households must rent a house and that 7.9% still live with relatives. In addition, 50.4% of the respondents surveyed own either a small (49.33%) or medium-sized (48.00%) house. When built in a low-cost housing settlement, the buildings have a standard size (in m^2): the smallest house is 21 m^2, a medium house is 35–45 m^2, and a large house is 70 m^2. The price also depends upon the width of the parcel of land upon which the building sits.

Table 6.18 Distribution of Socio-Economic Status by Type of House in the Sample Survey in Rancaekek (N=127)

Variable *Type of house*	N	%
Bamboo	27	21.3
Brick	72	56.7
Bamboo and brick	19	15.0
Concrete	9	7.0
Total	127	100.0

Source: Household Survey (2005)

In Rancaekek, not all houses are located in a resettlement area; people generally live in a *kampung* house made from *bilik* (woven bamboo). People think that, ideally, a house should be built from bricks; therefore, when sufficient funds are available, they usually try to reconstruct a bamboo wall from brick. Table 6.18 shows that 56.7% of the houses have brick walls and 21.3% are made from bamboo. Nineteen (15.0%) houses have been constructed using a combination of bamboo and brick. People also hope to transform earthen floors into a more solid foundation using cement or ceramic tiles. A house generally has 2–3 sleeping rooms: *i.e.* one main room for the husband and his wife and a second room for children and other relatives.

However, when family members are old enough, then sharing a sleeping room, even the main room, is common. Some people (3.1%) only have one room in which to sleep; in that case, at night sleeping mats or mattresses are rolled out in the sitting room. Most lavatories are built inside the house (89%).When this is the case, the backyard will have a well. When there is neither an inside lavatory nor well nor backyard, then most probably the house is joined to other buildings. Most respondents (50.67%) do not own much furniture. and average prices (48%) show the economic status of the Rancaekek community.

Table 6.19 Distribution of Telecommunication in the Sample Survey in Rancaekek (N=127)

Variable (Telephones)	N	%
None	94	74.1
Home telephone	6	4.7
Mobile telephone	21	16.5
Home & mobile telephones	6	4.7
Total	127	100.0

Source: Household Survey (2005)

Mobile telephones are quiet popular in Indonesia nowadays, and almost everyone attempts to own one. In the major cities, even young children in elementary school have been equipped with mobiles by their parents in order to communicate more easily when they are away from home. However, during the household survey in Rancaekek in 2005, 74.0% of the respondents said they had no means of communication in their homes (*cf.* Table 6.19). Telecommunication is indispensable when having to cope with high-risk conditions such as pregnancy, labour and childbirth, when rapid treatment by a health provider could save a life.

In the case of high-risk pregnancy, labour and delivery, when time is of the essence, then transportation is of great importance to reach a community health centre (*Puskesmas*). Table 6.20 shows the distribution of types of transportation in the sample survey owned by households: *e.g.* bicycles, motorbikes, cars and the tricycle (*becak*). The idea of *ambulans desa* (Village Ambulance) is to mobilize owners of vehicles to stand ready should calamity befall someone in their neighbourhood, *e.g.* during pregnancy, labour or delivery.

Table 6.20 Distribution of Means of Transportation in the Sample Survey in Rancaekek (N=127)

Variable (Transportation)	N	%
None	48	37.8
Bicycles	33	26.0
Motorbikes	23	18.1
Cars	21	16.5
Becak	2	1.6
Total	127	100.0

Source: Household Survey (2005)

Table 6.21 Distribution of Family Members from 127 Households in the Sample Survey in Rancaekek (N=695)

Variable Member of Household	N	%
Head of household	127	18.3
Wives	127	18.3
Son	148	21.3
Daughter	150	21.6
Father	2	0.3
Mother	6	0.9
Grandfather	–	–
Grandmother	5	0.7
Grandson	30	4.3
Granddaughter	23	3.3
Brother	4	0.6
Sister	2	0.3
Cousin	–	–
Nephew	1	0.1
Niece	2	0.3
Son-in-law	30	4.3
Daughter-in-law	9	1.2
Brother-in-law	4	0.6
Sister-in-law	8	1.1
Father-in-law	1	1.0
Mother-in-law	7	0.9
Other relationship	6	0.9
Unrelated (housemaid)	3	0.4
Total	695	100.0

Source: Household survey (2005)

Further discussion will touch upon the ethnicity and religiosity of the community is more than 90% Sundanese and Muslim. The ethnic composition of the survey sample is 93.7% Sundanese, 3.9% Javanese, 1.6% Batak, then 1.6% Palembang and Malay (*cf*. Table 6.9), *i.e*. local cultures share a number of common rites. Common rites of passage are performed during and after pregnancy for both the mother and her offspring. The following are several examples of rituals: *tingkeban* or *nujuh bulan*, held during the 7th month of pregnancy; *puputan* or *puput puseur*, held when the umbilical cord dries up and falls off (*cupat pusuer*) or is removed from the naval; *nurunkeun*, held when the infant touches the ground for the first time; *ngabersihan* or *sunat* or *ngislamkeun*, held at circumcision (usually for boys but in some cases girls). The *ngawinkeun* ritual is celebrated when a person marries, and other rites are held when a person passes away.

Islam, the religion professed by the majority of ethnic Sunda, has over time become part of Sundanese culture. Every part of their daily lives and local beliefs are assimilated with Islam. Interestingly, several Islamic phrases are even used in daily conversations, rituals and ceremonies. In addition to the Sundanese greeting spoken in the morning (*wilujeng enjing*) and afternoon (*wilujeng siang*), the Islamic greeting '*assalamualaikum*' ('peace be upon you') when one meets a fellow Muslim or '*Allahuakbar*' (Allāh is Great) when one wishes to express admiration are now commonly heard. Harsojo (1979: 315) has said: "… *although Islam is the formal religion of Sundanes, but the pattern and the daily life is still influenced or coloured with the perceived of animism and dynamism*". Only a few households surveyed are Christian (1.30%) or Catholic (0.70%).

6.3 Local Maternal and Child Health and Medicinal Plants

6.3.1 Indigenous Knowledge of the Reproductive Process

Stages or trimesters of pregnancy run parallel in traditional and modern Maternal and Child Health (MCH) systems. Traditionally indigenous wisdom and systems of belief define the trimesters. However, in this case, it is Islam as predominant religion practiced in rural areas of Rancaekek gives meaning to life growing in the womb. Islam teaches us that, during the first 3 months, the embryo has no soul. However, when a woman's pregnancy reaches 4 months, the Breath of Allāh will blow the soul into the body of the foetus, which explains why a pregnant woman will begin to feel life pulsating in her abdomen during the second trimester.

In Rancaekek, the ritual performed at this time consists of reading special chapters or *sūrah*s (religious texts: *soleh* for boy. and *solehah* for girl) from the Holy Qur'ān. The readings are believed to bless the baby with a good disposition, as well as make it intelligent, obedient to its parents, and good looking. Chapters (*sūrah*) and verses (*ayāt*) recited from the Holy Qur'ān during the 4th month ritual are: *Al-Mu'minun* (Q23: 12–14), *Lukman* (Q31: 14), *Yusūf* (Q12: 1–16), *Maryam* (Q19: 1–5), and *Ar-Rahmān* (Q55: 1–78). The ritual, performed by a religious leader, who is usually a woman (*ustadzah*), is attended by women from the neighbourhood as well as other female relationships. The *ustadzah* will begin by leading the participating women in a recitation of appropriate *sūrah*s from the Holy Qur'ān. Thereafter she will speak about how Allāh blows the soul into the foetus

before praying for a safe pregnancy, delivery, and healthy offspring. Another local belief, not based on Islam, says that at the onset of the 7th month of pregnancy, the foetus is mature enough to be born and strong enough to grow and thrive if it survives delivery. However, at 8 months, it is thought that the foetus has reverted to a weaken state and shoul, therefore, not be born at that stage of gestation. Thus, the perfect time to be born is after spending 9 months in the womb.

Prayer	**Prayer**
Bismillah ir-raḥmān ir-raḥīm. Al-ḥamdu lī l-lahi rabbi l-ālamīn. Allahumma shalli alā sayyidinā Muḥammad. Thibbil quluubi wadawaaihaa. Wa aafiyatil abdaani wa syifaaihaa. Wanuuril abshaari wa dhiyaa ihaa. Waquubil arwaahi waqidzaa ihaa. Wa alla aallihi washahbihi wabaarik wa sallim. Allahummah fazh waladaha maa adama fii bathnihaa. Washfihii maa ummihi antasysyaafii laa syifaa illa syifaa uha syifaa an laa yugoodiru saqaman. Allahumma shawwirhu fii bathniihaa shur rotan hasanatan. Watsabbit qolbahu iimaanan bika wabinaa suuliha. Allaahumaj alhu shahiihan kaamilan wa aaqilam haa dziqan wa aaliman aamilan. Allahumma thawwil umrahu washahhik jasadahu wahassin khuluqohu wafashshih lisaa nahu. Wa ahsin shantahu li qiraa atil hadiitsi wal qur'aan. Warfa' darojatuhu. Wawasi rijqahu. Wajalhu insaanan kaamilan saaliman fiddunya walaakhirah. Bibirakati sayyidina Muhammadin shallallahu alaihi wasalamam wallhamdu lillahi rabbil alamina. Amin. amin yaa robbal aalamin.	In the name of Allāh, the All Mighty, All Merciful. All praise be to Allāh, Lord of the Universe. Oh Allāh, please increase the prosperity of our leader Muhammad (PBUH). As our therapist and relieve As cured and refreshed our body. As ray and light of our eyes. As reinforcement and food for spiritual nourishment. Please bless and hold safely his family and all his friends. Oh Allāh, please protect the baby in the mother's womb. May it happen, please give health to the baby and mother. There is no other health but Allāh's. Health which never ends with sickness. Oh Allah, please give beauty to the baby. And may it happen; deliver the baby in good health and safety. Oh Allāh. May it happen; that the baby be healthy, perfect, smart, and understand religious shaykhs. Oh Allāh. May it happen; bless the baby with long life, physical and spiritual health. good behaviour, fluent spoken word, and good voice for reading the Qur'ān. And give good status. And give good luck. Help the baby become a perfect person and remain safe in the world and the hereafter. With the blessing of the Great Prophet Muhammad (PBUH) and all praise for Allāh. Lord of the Universe. Amen, amen. Oh Lord of the Universe.

Figure 6.2 Prayer is readed by religious leader for a save pregnancy, delivery and healthy offspring
(Source : Household Survey 2005)

Local people believe that pregnancy is a natural part of the human reproductive process and subject to natural forces. One *paraji* gave the following clarification regarding beliefs and pregnancy: (1) the force of Nature, believed to impact human lives, has two faces: *friendly*

and *scary*. Unusual natural phenomena occurring in the *macro-cosmos* are significant signs carrying meaning for the *micro-cosmos* (*i.e.* the pregnant woman). (2) Time prescribes what humans should (prescriptions) or should not (prohibitions) do during the turning of its cycles: *e.g.* at dawn, noon and twilight it is believed that spirits wander outside the house. Therefore one should try to remain indoors and avoid outside activities during those times. On Monday and Thursday nights Nature shows its 'scary' face and is a risky time for the 'weak' such as pregnant, perinatal or post-partum women. The Sundanese people are suspicious of night time and feel that night is unsafe, which explains why a baby born during the dark of night will grow to be brave and strong. An individual's safety should be harmonised in several ways by performing rituals, doing what is prescribed and avoiding what is forbidden (taboo or *pamali*). Rituals refer to all sacred activities using idiomatic symbols to help guarantee a person's safety.

Qualitative findings in Rancaekek unearthed a number of beliefs, rituals, obligations and taboos (*pamali*) for women during and after pregnancy as well as for their husbands and offspring. When a woman wants to become pregnant, she must mind her behaviour carefully and watch her intake of foods which can affect pregnancy and the foetus. As described earlier. *e.g.* she should eat from a small plate, symbolic for the size of the baby, because delivering a large baby could prove difficult. Consuming certain foods such as fish, pineapple, hot food (*lada*), coffee, preserved cassava (*peuyeum*), coconut water, and the like, is strictly taboo. The expectant mother should comply with a number of obligations: *e.g.* always having with her a sharp object, such as a nail cutter, tiny knife, small scissors or bamboo knife (*hinis*) and ginger (*pang lay*: *Zingiber gramenieum*) to ward off evil spirits.

Figure 6.3 *Nujuh Bulan*, ritual bath performed when a woman is 7 months pregnant
Source: Google Search (2006), tatiksblasipsstu.blogspot.com

Each time a pregnant woman 'misbehaves' or sees an object which looks ugly or threatening, she must express '*amit-amit*' to avoid endangering the baby's perfect shape. Many taboos which a pregnant woman must avoid will be of consequence for her husband's behaviour (termed *nurut buat*[2] while his wife is pregnant). During his wife's pregnancy the husband is obliged to watch carefully what he says. He is also forbidden to kill an animal, to leave the house during the night, to sit in the centre of a door or on the veranda, to go fishing, to knot his hair, to sit cross-legged or with hanging feet, to sleep diagonally across the bed, to step over long shoots of bamboo, to wrap a towel around his neck as collar, and so forth. Every taboo could adversely impact his pregnant wife and their infant in the womb.

When the pregnancy enters the 7th month, a *nujuh bulan* ritual is held to assure that the delivery will be safe for mother and her newborn. A *paraji* (TBA) will lead the ritual during which every activity relates to the number 'seven' (*tujuh*)', symbolic for the month of pregnancy. During the ritual, the pregnant woman will be bathed by her husband and six elder women from the community (*e.g.* mother. mother-in-law. grandmother. aunties) and finally by the *paraji* herself (Figure 6.2). The bathing water is drawn from seven wells within the area and scented by petals from seven types of fragrant flowers such as *melati* (*Jasminum sambac. Alt.*), *mawar* (*genus rosa*), *kenanga* (*Canangium odoratum*), *cempaka* (*Michelia champaca*), *sedap malam* (*Murraya paniculata L.*) and *kamboja* (*Adenium obesum*).

Figure 6.4 Yellow coconuts ready to be cut by the husband during a *nujuh bulan* ritual.
Source: Field Study (2007)

While the *paraji* is bathing the pregnant woman, she will wear a loose fitting *sarong*. The *paraji* will drop into the *sarong* several kinds of 'slippery' items, symbolic for a safe delivery: *e.g.* gold fish (*lauk emas, Cyprinus carpio*), eel (*belut, Symbranchidae*), egg (*endog*), and so forth. The women participating will hold closed the lower hem of the

sarong to catch the slippery items. After the ritual bath, the pregnant woman will change her clothes 7 times. Encircled by participants attending the ritual, the *paraji* will help dress the pregnant woman in the first set of clothing consisting of the traditional *kain batik panjang* and *kebaya*. Then the *paraji* will ask the women forming the circle: "Is this cloth fit for her?" They traditionally reply "No". This ritual dressing and undressing will be repeated six times. After she has dressed for the seventh time, all the women in attendance will answer: "Yes, it is fit for her!"

Another ritual will be the selling of fruit salad (*rujak bebeg*)[3]. Everyone attending the ritual must buy the *rujak* with fake money made from broken tiles. The flavour of the *rujak* is associated with the baby's gender. A hot, salty or tasteless salad signals that the baby will be a boy; when the *rujak* is tasty and mild then the baby will be a girl. The group will make a second guess when the husband cuts a yellow coconut which has usually been decorated on opposite sides with one of two *wayang* or puppet figures. These mystical figures are Arjuna and Subadra who symbolize a boy and girl, respectively. After the yellow coconut has been sliced in two parts, everyone is anxious to know whether Arjuna or Subadra is one the largest section. Why Arjuna and Subadra? They are an attractive and likeable pair. Arjuna is heroic and Subadra is typically feminine so the expectant parents hope that their child will inherit similar characteristics.

Another traditional belief relates the baby's gender to the expectant mother's behaviour. If a pregnant woman dislikes dressing-up and is lazy, then the baby might be a boy; in contrast, if she likes doing feminine activities, then the baby will certainly be a girl. Tradition says that every object which a pregnant woman finds pleasant will affect the future baby's gender. Nowadays, when a woman can afford ultrasonography, she will use it to check how the foetus is developing and to learn its gender; therefore, several traditional practices are falling out of favour. People no longer draw *wayang* on young coconuts or turn to tasting *rujak* to estimate whether the infant will be a boy or girl (Figure 6.3).

Commonly, when a woman is 8 months pregnant, the family will prepare *bubur lolos* or porridge made from rice flour and brown sugar topped with coconut milk which makes it slippery. Then it is wrapped in *daun pisang* (banana leaves) with one side left open so that the porridge can easily slide out (*lolos*). Slippery porridge is associated with the expectation that the coming delivery will be 'as easy as the *bubur lolos*'.

Post-natal rituals

After childbirth, the *paraji* will attend to the placenta or *ari-ari/bali*[4] which is delivered after the infant. Because the placenta has shared the uterus and accompanied the newborn into this world, tradition says that it should be treated like the infant's twin sibling. Therefore, the placenta is carefully cleansed and saturated with onion (*Allium ascalonicum*), *kunyit* (*Curcuma domestica Val*), coconut milk (*santen, Cocos nucifera*), brown sugar (*gula beureum*), and tamarind (*asem, Tamarindus indica L.*). All ingredients are put into a clay pot (*pendil*), together with *sūrah*s from the Holy Qur'ān, needle and threat, coins, flowers, before being covered with white fabric and placed near the newborn. The *paraji* (TBA) will organize the entire ritual in which the husband arranges an oil lamp with seven wicks (*sumbu*) and the post-partum woman and her mother-in-law prepare a bamboo stick with red chilly (*Capsicum*), *bawang beureum* (onion, *Allium ascalonicum*), *panglay* (*Zingiber gramenieum*)[5], *koneng temen* (*Curcuma domestica*), and *jaringao*

(*Acorus terretria*). The placenta can be treated in one of two ways: it can be buried in the yard near the house or sent floating down the river. People believe that there will always be a bond between a baby and its placenta. When the baby cries continuously, then people suspect that it has something to do with the placenta. In that case, they will prepare a small ritual (*dulurna nu medal bareng*) for the baby's brother or sister placenta. A small bag (*kanjut kundang*) made from cloth will be placed near the baby's bed containing *panglay* (*Zingiber gramenieum*), *bawang bodas* (garlic, *Allium sativum*), and a sharp object such as nail. The *kanjut kundang* is meant to protect the baby from evil spirits (Figure 6.4).

Figure 6.5 *Kanjut kundang* bag and its contents: *panglay* (*Zingiber gramenieum*), garlic, and a nail representing sharp objects
Source: Field Study (2006)

How a family expresses its gratitude to the *paraji* (TBA) depends on the socio-economical situation of the pregnant woman's household. The *paraji* never worries about compensation, *i.e.* whether she will be paid in kind or in cash. She will not complain if the family expresses their gratitude by giving her vegetables, chickens, fruits, rice and *samak jarian* (mat woven from *pandan* leaves – *Pandanus amaryllifolius*) which is used during childbirth. After delivery, the *paraji* will visit almost every day to bathe the baby, to prepare herbal remedies or *jamu* as drink or ointment to rub on the mother or her newborn, or to massage the mother. During her visits, the *paraji* will hold small rituals: *e.g.* to celebrate detachment of the baby's umbilical cord (*puput puseur*), to mark the seventh day after birth by hanging the cradle from *kain batik* (*ngayun*), to thank Allāh by slaughtering an animal (*aqeqah*: two male goats/sheep for a boy and one male goat/sheep for a girl), and so forth. For the *nenjrag bumi* ritual, meant to assure that the infant will grow to be brave, heroic and not easily frightened in the future, the baby is placed on the floor while the *paraji* stamps her foot seven times. Holding the infant on her lap, the *paraji* will massage it and make a wish by repeating *jampe*[6] as follows.

Jampe	Translation
Ulah saomong-omongna, ari lain omongkeuneun.	Do not just talk, if there's nothing to say.
Ulah saambue-ambuen, ari lain ambeueunana.	Do not just sniff, if there's nothing to smell.
Ulah sadeuleu-deuleuna, ari lain deuleueunana.	Do not just watch, if there's nothing to see.
Ulah sadenge-dengen, ari lain dengekeuneunana.	Do not just listen, if there's nothing to hear.
Ulah sacokot-cokotna, ari lain cokoteunana.	Do not just take, if it's not there for the taking.
Ulah sarampa-rampana, ari lain rampaeunana.	Do not just touch, if it's not to be touched.
Ulah satincak-tincakna, ari lain tincakeunana.	Do not just step over, if it's not worth the step.
Ulah saasup-asupna, ari lain asupeunana	Do not just enter, if it's not there to enter.
Ulah uruy ka pamulu batur	Do not just crave, what's not yours to have.
Ulah kabita ka pangala jalma	Do not just envy, what belongs to another.
Batur mah tukang kabitur	Others are easily get desired.
Jalma mah gampang katara	People are easy to see.
Sing ajeg sing panceg dina tangtungan diri sorangan	Be strongly rely on yourself
Ngaub kana nuhun agama jeung darigama	Hold fast to your religion
Source: Household Survey (2005)	(The *paraji* will then stamp/*nenjrag* her leg on the floor near the baby.

Figure 6.6 *Paraji* (TBA) massaging a baby and offering advice to its mother
Source: Tea Seroya based on household survey (2005)

Forty days after childbirth, the *paraji* accepts *perwanten* (cake, rice, fish, and fruits) and *cangkaruban* (placed in a bowl with water and coins from which she will wash her hands). At this time, a ritual procession, together with *asrakal* (honour tribute to Prophet

Muhammad), is held to celebrate the cutting of the baby's hair. Moreover, another ritual is held 40 days after delivery during which the *paraji*, with the words '*seja masrahkeun*', relinquishes her responsibility for the mother and her offspring and entrusts them to the husband and family. The *paraji*'s words "I would like to hand over" underline her supervision and the extent of her responsibility for the physical and spiritual well-being and safety of the mother and infant during the post-natal period. The *paraji* also gives a chicken which is called *si hurip* ('the alive') which is analogous to the baby; *i.e*. they will grow up together.

6.3.2 Knowledge and Use of Medicinal Plants in Rancaekek

In traditional medical systems, the collectors of plants and producers of herbal remedies have the real intention to recognize and acknowledge the spiritual essence of the plant. Bodeker (1999: 263–264) states that: "*The intimate knowledge of local communities about their bio-resources is clearly seen in the tremendous diversity of local names for, and uses of, the same plant and animal species as one moves across what may referred to as 'ethnobiogeographic regions'. The etymology of local names and the content of local knowledge also reveal the understanding communities have of the properties, morphology, penology, reproductive biology and habitats of plants*".

In Indonesia reorientation towards indigenous knowledge systems confirms the general view that herbal remedies offer several advantages: they are readily available, cost less and are relatively safe as natural products in terms of side effects (Slikkerveer 2003). In addition Slikkerveer (2003: 42) notes that generally in rural areas *"... different types of indigenous healers* (dukun and jamu gendong) *and midwives* (*bidan*) *continue to use numerous plants in their traditional remedies, called* jamu *– a collective term used to define indigenous herbal medicine prepared from usually wild plant materials* (ramuan) *such as leaves, flowers, fruits, bar, roots, etc. Until recently, the knowledge of plants which are used for the preparation of* jamu, *laid down as recipes and formulas in hand-written documents*".

Most *jamu* contains mixed, often pounded, ingredients, some of which are prepared in boiled water before being used as drink or ointment. They are not only used as remedy but also more regularly to promote a sound and healthy body or to enhance beauty – although the use of *jamu* as local cosmetic is still largely overlooked in the literature. It is estimated that between 1000 and 1300 plant species, generally collected in the wild, are used to prepare traditional *jamu*.

During pregnancy, attention is focused on maintaining strengthen of the expectant mother and her foetus. Usually, the *paraji* will suggest that the pregnant woman avoid several types of food and drink and instead nourish her body with specific foodstuffs which are considered beneficial for foetal development. As shown above, a pregnant woman is expected to adhere to certain dietary prescriptions, such as avoiding foods with a 'sharp' character (*e.g. ganas*. pineapple), soft-drinks, and so forth during the first stage of pregnancy. During her pregnancy and around childbirth, a woman not only receives advice from the *paraji* but also from elder women in her household, who based on the family's

financial condition, might try to persuade her to choose one MCH system instead of another or influence her to use *jamu* as supplement for good health.

In general, *jamu* and herbal medicines are recommended after childbirth to restore the woman's strength and help the newborn grow strong. The mother's food intake should contain specific foods and herbs to stimulate milk production. During her post-natal period, both the mother and her offspring are thought to be in a state of transition, which makes them vulnerable to supernatural and evil forces.

In recent years, the ongoing use of medicinal plants has led to the manufacture of 'modern' *jamu*, thus flooding the market with locally produced 'ready-to-use' natural remedies. Such products, sold pre-packaged or as sachets, are an attempt to compete with costly modern, largely biochemical, pharmaceuticals imported from the West (*obat paten*).

There is no question that traditional Maternal and Child Health relies on indigenous medicinal plants and knowledge systems when preparing herbal concoctions[7] for both mother and her offspring. People believe that indigenous healers skilled in the art of healing have the power to treat both mother and infant when necessary. The *paraji* knows which particular part of a plant to use when preparing concoctions and decoctions[8] to be administered to her clients.

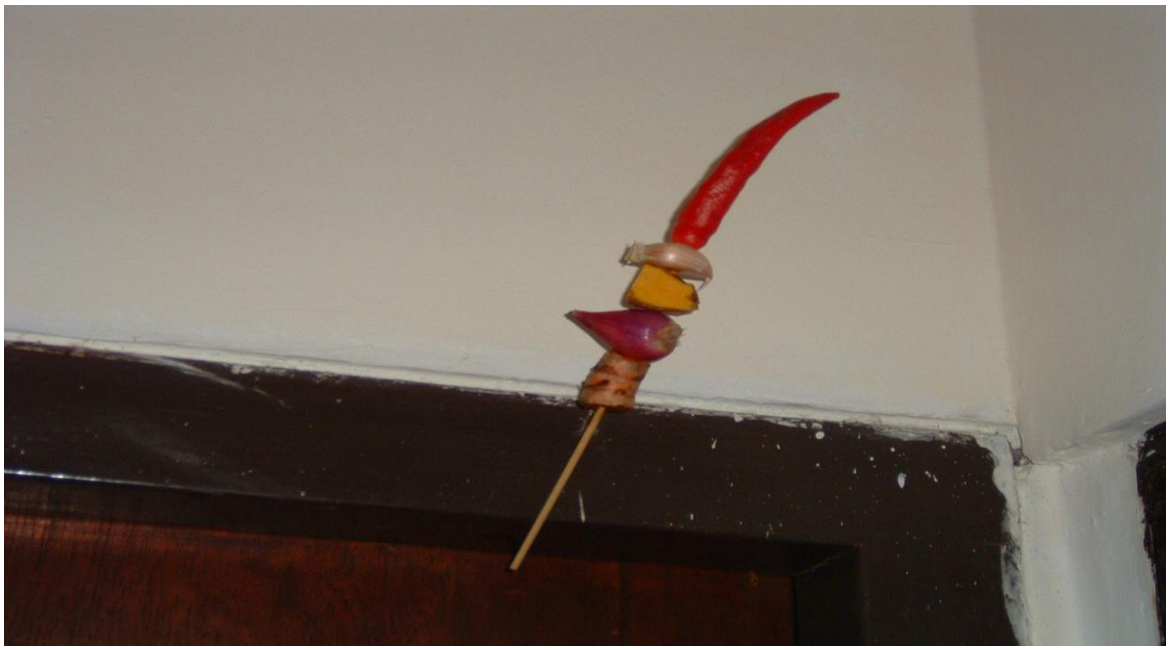


Figure 6.7 *Tulak bala* set of red chilly (*cabe beureum –Capsicum annum*), garlic (*bawang bodas – Allium sativum*), *panglay* (*Zingiber gramenieum*), onion (*bawang beureum – Allium ascalonicum L.*), and *kunyit* (*Curcuma domestica*), placed above the front door or door to the mother and baby's room.
Source: Households Survey (2006)

Paraji are knowledgeable about indigenous classifications and understand their function and efficacy, especially *Zingiberaceae* (*sarupaning kokonengan*), *koneng temen* (*Curcuma domestica*), *kunci* (*Curcuma rotunda L.*), *koneng hideung* (*Curcuma aeruginosa*), *temu*

giring (*Curcuma heyueana*), *koneng gede* (*Curcuma xanthorrhiza*) and *koneng bodas* (*Curcuma alba*). These are traditionally used to treat mother and child in concoctions and decoctions to be applied as drink, rub and patch.

Table 6.22 Local Classifications of Medicinal Plants Used as Traditional Herbal Medicine for Pregnant Woman, as Documented through In-depth Interviews with *Paraji* in the Study Area of Rancaekek.

Local Name	Botanical Name	Medicinal Use	Stage of Pregnancy	Part Used
Alang-alang	*Imperata arundinaceae*. Cyrill.	heartburn (*panas dalam*)	pregnancy	roots
Areuy/Cabe Jawa	*Piper retrofractum Vahl.*	difficult delivery	parturition	fruit, root, leaf
Asem Jawa	*Tamarindus indica*. *Linn*	cleanse the blood	pregnancy, parturition. post-partum	fruits
Awi koneng	*Bambusa vulgaris scrad Gigantochloa*	avoidance of evil	pregnancy, post-partum	twigs
Adas pulowaras	*Foeniculum vulgare Mill*	stomach trouble, a cold cough	pregnancy, post-partum	seeds
Batrawali	*Tinospora crispa Diels*	strengthened	pregnancy, post-partum	stalks
Bawang bodas	*Allium sativum L.*	avoidance of evil	hypertension pregnancy, *kanjut kundang*	tuber
Bawang beureum	*Allium cepa Linn*.	catch a cold	*tulak bala*	tuber
Bawang nunggal	*Allium ascalonicum*	hypertension	pregnancy	tuber
Bonteng	*Cucumis sativus L*.	leucorrhea (*keputihan*)		fruit
Cabe beureum	*Capsicum*	avoidance of evil	pregnancy, post-partum	fruit
Cengkeh	*Syzigium aromatum*	toothache, mixture with other *jamu*	pregnancy, post-partum	fruit
Cikur	*Kaemferia galanga*	cough, cleanse blood	pregnancy, post-partum	Rhizome *Linn.*
Enteh	*Camellia sinensis*	with sugar will provide energy	pregnancy, parturition	leaf
Ganas	*Ananas squomosus*	prohibited for pregnant	pregnancy	fruit
Gedang	*Carica papaya L.*	compress the breast	post-partum	leaf. fruit
Handeuleum	*Graptophylum pictum* (*L*) *Griff*	constipation, avoid haemorrhoids	parturition	leaf
Jahe	*Zingiber officinale Rosc.*	vomiting, reduce blood smell	first trimester, post-partum	rhizome
Jawer kotok	*Coleus scutellarioides Benth.*	haemorrhoids, fever. to ease delivery	third trimester of pregnancy	leaf, stem, root
Jeruk nipis	*Citru aurantifolia. Swingle*	Cough, massage, mixture with other *jamu*	pregnancy, post-partum	fruit
Kalapa (hejo)	*Cocos nucifera Linn*	to ease delivery, fair skin of the baby	scraped, squeezed oil, drink	fruit, husks shells
Kaliki	*Ricinus communis*	fever	pregnancy	leaf
Katuk	*Sanopsus androgynus Mirr*	breast milk	post-partum	leaf
Koneng Temen	*Curcuma domestica Vhal*.	cleanse the blood, mixed with other kinds of *jamu*	pregnancy, post-partum	rhizome
Koneng Gede	*Curcuma*	cleanse the blood	pregnancy, post-partum	rhizome
Kunci	*Boesenbergia pandurata*	mixture with *bayam*	pregnancy, post-partum	rhizome
Panglay	*Zingiber cassummunar*	avoidance of evil	pregnancy, post-partum	rhizome
Seureuh	*Piper betle L*.	avoid leucorrhoea, cough, Eyes, avoid bleeding	Pregnancy, post-partum	leaf

Source: Household Survey (2006)

Figures 6.7–6.11 provide photographs and classifications of medicinal plants used by *Paraji* (TBA) to treat both mother and infant during and after pregnancy and childbirth.

Figure 6.8
Asem Jawa (*Tamarindus indica. Linn*)
Source: Household Survey (2005)

Figure 6.9
Daun Katuk (*Sanopsus androgynus Mirr*)
Source: Household Survey (2006)

Figure 6.10
Seureuh (*Piper betle L.*)
Source: Household Survey (2006)

Figure 6.11
Koneng (*Curcuma domestica*)
Source: Household Survey (2005)

Figure 6.12
Jahe (*Zingiber officinale Rosc.*)
Source: Household Survey (2005)

Notes

1. Environmental Contaminants and Pollutants – Group B3. Heavy metals, pesticides and industrial pollutants can reach unacceptable levels within animals in several ways if their environment is polluted with industrial or agrochemical contaminants. [...] Regulatory limits for these substances are low because many tend to accumulate in fat and other tissues. Consequently, their concentrations will increase in individuals further up the food chain and thus will be higher in humans than in farmed animals. An area of emerging concern is the build up of several agents whose long-term effects may be additive." (http://www.afbini.gov.uk/)
2. The husband's behaviour (*nurut buat*) will influence the baby's development: e.g. if the husband kills an animal while his wife is pregnant, then the baby will born with a physical defect.
3. The *rujak bebeg* consists of seven kinds of young fruit such as: *kadongdong* (*Spondias dulcis*), *bonteng* (cucumber), *buah ngora* (young mango – *Anacardiaceae – Mangifera*), *jeruk bali* (pamelo – *citrus maxima*), guava (*jambu batu – Psidium guajava*), *jambu air* (*Syzygium aqueum*), *balingbing* (*Averhoa bilimbi*), *ganas* (pineapple – *Ananas comosus*), *delima* (*punica granatum*), and the like. The fruit is mixed with salt, *asem jawa* (*Tamarindus indica. Linn*), *gula* jawa (brown sugar), and *cengek* (*Capsici fruteescentis Fructus*).
4. *Bali* or *ari-ari* is the placenta which is thought to be the baby's twin sibling. A nearly identical belief is shared by the Javanese and Sundanese (*kakang kawah. adi ari-ari*). The foetal membrane (*banyu kawah)* is considered to be the 'elder brother' since it broke before the baby's birth, while the placenta (*bali* or *ari-ari*) is the baby's 'younger brother' since it was born after the baby.
5. *Panglay* (*Zingiber gramenieum*) is a very important type of root which has the power to ward off evil. It is generally used as part of an 'amulet' for the mother and her newborn because during the transitional 40-day period after childbirth their 'weak' condition is susceptible to ghostly disturbances. To ward off evil, sometimes the *paraji* will chew *panglay* and spit (*di bura*) its juice throughout the house.
6. *Jampe* is the *paraji*'s well wishes for the baby. It is taken from the manuscript *Siksa Kanda ng Karesian* (1518).
7. In Traditional Medicine, a concoction contains various ingredients such as herbs, spices, condiments, powdery substances or minerals, mixed together, minced, dissolved or macerated into a liquid which can be ingested or rubbed on the skin. On a different level, 'concoction' is sometimes loosely used as metaphor to refer to a cocktail or motley assembly of products, persons or ideas. Quite often very pungent and spicy ketchups or hot sauces, usually with Cayenne pepper as its base, are inadvertently – or for commercial reasons – called 'concoctions'.
8. A 'decoction' is an extraction of herbal or plant material which includes, but is not limited to: stems, roots, bark, and rhizomes. Some teas are 'decoctions'. However, decoctions differ from most teas, infusions, or tisanes, in that decoction are usually boiled. Likewise, the term is used colloquially in South India to refer to black coffee prepared by traditional methods.