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**Kearifan Kesehatan Lokal: indigenous medical knowledge and practice for integrated nursing of the elderly with cardiovascular disease in Sumedang, West Java: towards transcultural nursing in Indonesia**  
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## Propositions

### *'Kearifan Kesehatan Lokal - Indigenous Medical Knowledge and Practice for Integrated Nursing of the Elderly with Cardiovascular Disease in Sumedang, West Java: Towards Transcultural Nursing in Indonesia'*

by Raini Diah Susanti

1. The implementation of nursing practice in Sumedang, carried out in accordance with a nursing care plan agreed upon between the nurse and the client and family, achieves increased satisfaction, improved healing and optimal health functions of the client by minimizing misunderstandings of cultural differences between health practitioners and their clients (*this thesis*).
2. The study of indigenous knowledge systems in relation with behavioural patterns of utilisation of traditional nursing institutions by the participants in Sumedang enables a holistic assessment of the important context of local culture, knowledge and belief, providing the basis for achieving not only mutual understanding, but also the reduction of tension, stress and conflict in the practice of nursing of the elderly with CVD (*this thesis*).
3. The local tradition of the belief system and cosmovision of the indigenous peoples are significantly affecting their health behaviour. In line with this, the Sundanese people in the Sumedang region are using ubar kampung ('indigenous herbal medicines') for health promotion and the prevention of CVD of the elderly in the communities (*this thesis*).
4. Nurses caring of the elderly with CVD in the Sunda Region need to acquire cultural competence in order to integrate kearifan kesehatan lokal ('indigenous medical knowledge') successfully in their practice of Integrated Nursing of the Elderly with CVD, as proposed in the Model of Integrated Nursing (*this thesis*).
5. The cultural differences among the ethno-cultural groups living in Indonesia is reflected in the complex medical configurations of the traditional, transitional and modern nursing institutions and organisations. The interactive utilisation among their patients paves the way for an integrated form of transcultural nursing for the elderly with CVD.
6. Indigenous medical knowledge and practice are lately receiving increased worldwide attention from government authorities. Since these indigenous systems have provided many generations with successful, non-commercial medical care, they deserve the interest from the ministries of health because of their contribution to cost reduction of national nursing care of the elderly.
7. The concept of a plural medical system is inclusive as it not only refers to a pluralistic configuration of coexistent traditional, transitional and modern medical systems, but also to the different forms of the provision of promotion of health, the prevention and treatment of illness of clients and patients, and the deployment of distinct categories of health professionals.
8. Since traditional healers rarely practice invasive measures, especially for the traditional treatment of CVD, they tend to refer patients in need of invasive treatment or surgery to the modern health centers and hospitals.
9. Although there is recently a growing interest among the younger generations in the cultural heritage of their country, the adherence and practice of such indigenous traditions are predominantly found among the elderly generations.
10. Life is like looking for your mobile phone. Most of the time, it's in your own hand.